

MFS II EVALUATIONS

Joint evaluations of the Dutch Co-Financing System 2011 - 2015

*Civil Society contribution
towards achieving
the Millennium Development Goals*

Country report

UGANDA

July 2015

SGE Stichting Gezamenlijke Evaluaties



Netherlands Organisation for Scientific Research
WOTRO Science for Global Development

PREFACE

This report is one of a series of evaluation reports, consisting of ten reports in total, reflecting the results of the jointly-organised MFS II evaluation:

- eight country reports (India, Bangladesh, Ethiopia, Uganda, Indonesia, DR Congo, Liberia, Pakistan);
- a synthesis report (covering the eight country studies); and
- a report with the results of the international lobbying and advocacy programmes.

This series of reports assessed the 2011-2015 contribution of the Dutch Co-Financing System (MFS II) towards achieving the Millennium Development Goals, strengthening international civil society, setting the international agenda and changing decision-makers' policy and practice, with the ultimate goal of reducing structural poverty. On July 2nd, 2015, the reports were approved by the independent steering committee (see below), which concluded that they meet the quality standards of validity, reliability and usefulness set by the Ministry of Foreign Affairs.

MFS II has been the 2011-2015 grant framework for Co-Financing Agencies (CFAs). A total of 20 alliances of Dutch CFAs were awarded € 1.9 billion in MFS II grants by the Ministry of Foreign Affairs. CFAs receiving MFS II funding work through partnerships with Southern partner organisations supporting a wide range of development activities in over 70 countries and at the global policy level.

The MFS II framework required each alliance to carry out independent external evaluations of the effective use of the available funding. These evaluations had to meet quality standards in terms of validity, reliability and usefulness. The evaluations had to focus on four categories of priority result areas, as defined by the Ministry of Foreign Affairs, and comprise baseline assessments serving as a basis for measuring subsequent progress.

Out of the 20 alliances receiving MFS II funding, 19 decided to have their MFS II-funded activities evaluated jointly. These 19 alliances formed the *Stichting Gezamenlijke Evaluaties (SGE)*¹, which acted on their behalf in relation to the joint MFS II evaluation. The SGE was assisted by an 'Internal Reference Group', consisting of seven evaluation experts of the participating CFAs.

The Netherlands Organisation for Scientific Research (NWO/WOTRO) managed the evaluation and selected ten research teams to carry out the joint MFS II evaluation: eight teams responsible for carrying out studies at country level, one team responsible for the synthesis of these country studies, and one team responsible for the study of international lobbying and advocacy. Each study comprises a baseline assessment (2012) and a final assessment (2014). Research teams were required to analyse the effectiveness, efficiency and relevance of development interventions funded by MFS II. An independent steering committee was appointed to verify whether the studies met with the required quality standards. In its appraisal, the steering committee drew on assessments by two separate advisory committees.

¹ *Stichting Gezamenlijke Evaluaties can be translated as Joint Evaluation Trust.*

The evaluation has been implemented independently. The influence of the CFAs was limited to giving feedback on the first draft reports, in particular to correct inaccuracies. The contents and presentation of information in this report, including annexes and attachments, are therefore entirely the responsibility of the research team and/or NWO/WOTRO.

However, as SGE we are responsible for adding this preface, the list with parties involved and a table of contents, in the cases that the report is a compilation of several reports.

In addition we would like to note that when reference is made to individual case studies, these have to be seen as illustrative examples, and not as representative for the whole partner portfolio of a CFA.

The Dutch CFAs participating in this unique joint evaluation are pleased that the evaluation process has been successfully completed, and thank all the parties involved for their contribution (see the next pages for all the parties involved). We hope that the enormous richness of the report will serve not only accountability but also learning.

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JOINT MFS-II EVALUATION UGANDA

ENDLINE REPORT 2015

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I. Introduction

Part 1: Background and Aim

MFS II is the 2011-2015 grant framework of the Dutch Ministry of Foreign Affairs for Dutch NGOs, which is directed at achieving a sustainable reduction in poverty. A total of 20 consortia of Dutch NGOs have been awarded €1.9 billion in MFS II grants. MFS II-funded organisations support a wide range of development activities of a large number of Southern Partner Organisations (SPOs) in over 70 countries.

The MFS II framework stipulates that each consortium of Co-Financing Agencies (CFAs) is required to carry out independent external evaluations to account for results of MFS II-funded or -co-funded development interventions implemented by Dutch CFAs and/or their SPOs and to contribute to the improvement of future development interventions. 19 consortia decided to have their MFS II-funded or co-funded activities jointly evaluated. Eight country studies, a synthesis study, and a study on international lobbying and advocacy were defined and put out to tender through the Dutch Science Council (NWO-WOTRO).

The specific aims of the country studies are:

- To assess the effectiveness, efficiency and relevance of development interventions funded by MFS II;
- To develop and apply innovative methodologies for the evaluations of development interventions;
- To provide justified recommendations that enable Dutch CFAs and/or their Southern partners to draw lessons for future development interventions.

The studies should focus on three categories of priority result areas: achievement of MDGs & themes, capacity development of SPOs, and civil society.

The research questions for each category are:

- What are the changes in the relevant priority areas during the 2012–2014 period?
- To what degree are these changes to the development interventions of Southern partners of the MFS II consortia (i.e. measuring effectiveness)?
- What is the relevance of these changes?
- Were the development interventions efficient?
- What factors explain the findings drawn from the questions above?

To answer these questions, the country evaluations involve baseline assessments in 2012 and follow-up assessments in 2014. The selection of projects and SPOs for the first two priority areas was pre-defined. Sample selection for the third priority area was left to the researchers.

Part 2: Uganda Study

This document provides an executive summary of the endline reports for the Joint MFS II evaluation for Uganda. We have conducted baseline and endline surveys for 8 (out of the 9 selected) projects to be evaluated for their impact on MDGs and themes. We also conducted qualitative studies on organisational capacity of 8 local partner organisations, and assessed the efforts with respect to civil society of 8 organisations. We have tried to maximize the overlap between the three parts of the evaluation by including all organisations involved in the MDG projects and/or the capacity studies in the sample for the civil society effort. This has resulted in a total of 23 reports, each for one organisation. An overview of the organisations and projects under evaluation in the three areas is provided in below.

Table 1: Overview evaluation studies MFS-II Uganda

SPO	CFO	MDG / Themes					Capacity development	Civil society
		1	2	4, 5, 6	7a, 7b	Fragile States		
Health Child	IICD / Cordaid			X			X	
Diocese of Jinja	Cordaid			X				
SHU	Cordaid			X			X	
St. Elizabeth Girls Home	Terre des Hommes Netherlands	X	X					
Kampabits	Terre des Hommes Netherlands	X	X					
War Child Holland	War Child Holland	X	X			X	X	
FOKAPAWA	ZOA		X				X	
URCS	Nederlandse Rode Kruis				X			
Dodoth Agro Pastoral Development Organisation	IKV Pax Christi						X	
HEPS	HIVOS						X	
RWECO	HIVOS						X	
TWAWWEZA	HIVOS						X	
Kabarole Research Centre	HIVOS							X
SEATINI	Oxfam Novib							X
UCMB	IICD / Cordaid							X
VECO	Cordaid							X
Mango Tree	ICCO / IICD							X
GWED-G	IKV Pax Christi							X
Send a Cow	Oxfam Novib							X
UGMP	HIVOS							X

Fieldwork for the project evaluations took place in June--December 2012 (baseline) and May--November 2014 (endline). We worked with researchers from Wageningen University, supported by researchers from Makerere University in Kampala and local consultants. We have made significant progress and managed to complete the entire study, despite the "late start" (unlike other country studies, Uganda was assigned to us in April 2012) and the serious delay in the baseline period (more than 2 months) when trying to obtain a research permit. Also in the endline we faced number of hurdles causing some delays in collecting and analyzing the data for the MDG and civil society part.

II. Achievement of MDGs and themes

Part 1: Country Background

Uganda is located in eastern Africa, surrounded by (post)conflict countries: DRC in the west, South Sudan in the north and Rwanda in the south. After independence in 1962, decades of civil strife and absence of rule of law caused an institutional and political breakdown. Since coming to power in 1986, the incumbent government has tried to restructure the economy through pro-market reforms and to increase the legitimacy of government institutions through political liberalization.

The Ugandan population of almost 36 million has a median age of 15 years and growth rate of about 3.3% annually. About 82% of the labour force is engaged in agriculture. Of the urban population, 1.5 million people live in the capital city Kampala (much larger than the second largest city, Jinja).

The government of Uganda has developed a comprehensive National Development Plan (NDP) as a follow-up to the Poverty Eradication Action Plan. The aim of the NDP is to transform Uganda from a largely peasant society to a modern and prosperous country over a 30-year period. The plan proposes an ambitious range of initiatives that seek to boost household incomes, including enhancing human capital development and public health services, strengthening governance and promoting sustainable natural resource management.

A. MDG 1: Private Sector and Agriculture

During the past two decades, the government has fostered stability in the macroeconomic environment, and implemented sustained private-sector oriented reforms. GDP growth accelerated to more than 7% during the last decade, and the share of Official Development Aid in GDP decreased from more than 20% in 2004 to about 10% in 2011. The recent discovery of oil and gas near Lake Albert has boosted confidence in non-agrarian development of the country (World Bank, 2010; Uganda National Household Survey, 2010).

The percentage of people living below the poverty line declined from 56% in 1992 to 31.3% in 2010. However, these numbers may not capture overall improvements, as most people still make a living in the informal economy (up to 50% of GDP), and poverty in the Northern region remains high at 60.7%. The 2011 Doing Business report ranks Uganda 123rd (World Bank 2011, 2011).

Table 2 reports some economic figures for Uganda.

Table 2: General economic situation Uganda

	1990-2000	2000-2010	2010-2014
GDP per capita (constant 2005 US\$)	228.87	318.67	404.85
GDP per capita growth (annual %)	3.43	3.65	2.00
Population, total	20451218	28372067	35765003
Population growth (annual %)	3.29	3.35	3.35
Rural population (% of total population)	88.39	87.02	85.04
GINI index (World Bank estimate)	40.94	44.23	44.55
Poverty gap at \$2 a day (PPP) (%)	45.49	34.61	26.76
Net ODA received (% of GNI)	15.94	14.08	9.94
Agriculture, value added (% of GDP)	47.90	25.68	25.22

B. MDG 2: Education

Uganda has a population of 36 million and is expected to increase to 38 million in the coming years (Uganda Bureau of statistics report 2006). The high population does not match with the growth in the economy resulting into significant percentages of people living below the poverty line. Current statistics indicate that in Uganda, youth and children constitute to 78 percent of the total population. In 2006 youth unemployment was about 6 percent and was more pronounced in urban areas than in rural areas.

Whilst the primary net enrolment rate in Uganda is high, drop-out rates are also high and the quality of education is poor, as reflected in the low levels of completion and literacy and numeracy achievement rates. The government declared Universal Primary Education in 1997 while Universal Secondary Education was declared in 2006. However schools have insufficient or non-existent learning and teaching resources and absentee rates for teachers are high. The linkage between school and the immediate community is minimal, with most parents having no interest in their children's education. A low literacy rate among parents and lack of learning support from them result in high dropout rates. In addition, many girls drop out of school when they reach puberty to get married and there is also evidence that sexual harassment and abuse cause girls to drop out of school.

Youth unemployment is attributed to mismatch between skills and education acquired and labour market demand, rural –urban migration, high population growth rate of 6.7 percent, limited private investments, poor investments and entrepreneurship skills and mismatch of demand and supply of labour market among others.

The rural urban migration trend has created a rapid growth in urban population and intensified competition in the urban labour market, at a disadvantage of young migrants, who have lower literacy rates compared to urban young people. As a consequence, migrants are often bound to find employment in the informal sector or to turn in criminal activity, drug industries and prostitution to survive. Even when there are opportunities for youth to attend school, their parents/guardians' poor resources bases leads to low enrolment rates and high dropout rates. This scenario denies the youth a chance to break the vicious cycle of poverty and further perpetuates it. Unfortunately, when youth in informal settlements are able to attend school, they are unable to later access meaningful employment owing to the policy makers' failure to orient school curricula with the needs of the private

sector. Furthermore, some of those absorbed in the labour market have jobs that do not match their qualifications and personal development goals. Table 3 shows some country-wide figures on a number of topics related to education and the labour market position of young people reported by the World Bank and related to the MDG projects in our sample

Table 3: Education and labour market position of young people in Uganda

	1990-2000	2000-2010	2010-2014
<u>Education:</u>			
Literacy rate, adult total (% of people ages 15 and above)	56.11	69.76	73.21
Literacy rate, youth total (% of people ages 15-24)	69.80	82.43	87.41
School enrollment, primary (% gross)	84.72	125.21	113.61
School enrollment, secondary (% gross)	10.38	20.78	
School enrollment, tertiary (% gross)	1.53	3.44	9.06
Secondary education, teachers	15173	43531	
<u>Internet and unemployment:</u>			
Unemployment, youth female (% of female labor force ages 15-24)	5.06	5.65	7.47
Unemployment, youth male (% of male labor force ages 15-24)	4.44	4.96	6.55
Unemployment, youth total (% of total labor force ages 15-24)	4.74	5.30	7.05
Internet users (per 100 people)	0.03	2.76	14.10

C. MDG 4, 5 and 6: Health

Uganda's health sector was in a bad shape in the 70-ies and early 80-ies, due to military absolute rule and civil war over this period. With the advent of the National Resistance Movement (NRM) government in 1986, the country regained stability and important progress was realised by the introduction of democratic reforms and improvement of human rights. Since then the health sector also slowly started to recover. In 1986, the Expanded Programme on Immunisation (EPI) was re-launched; the Maternal and Child Health (MCH) programme, Family Planning and the AIDS control programmes were also introduced.

Central to the health sector reform was decentralization, but also the Structural Adjustment Programmes that urged the government to reduce its responsibility for paying for social services, like health. As a consequence user fees were introduced into the public health system to meet the huge public sector deficit. The decentralization resulted in a multi-layered health care system from Health Centre I – IV as lower level units, with a hospital for each district, and above this the regional and national referral hospitals.

The results of the health sector reform since 1995 until 2001 were disappointing. They showed that infant mortality figures had deteriorated and maternal mortality figures had hardly changed. The majority of the government budget appeared to be allocated to large hospitals (regional and national) and the central Ministry of Health (MoH), whose services benefits the urban population, rather than to district level facilities providing primary health care services to the rural poor. Additionally donor projects, with high overheads, focused on investment goods and were inefficient at providing basic health care. User charges raised little revenue, and exemption schemes did not protect vulnerable groups; user fees were a significant barrier for poor people accessing services. Recognising these

failings, during the late 1990-ies, the Government of Uganda initiated a comprehensive programme of radical health sector reforms. This included the decision to implement a sector-wide approach (SWAp) in August 2000, in order to improve coordination and with that efficiency and equity in the sector. The first national Health Sector Strategic Plan (HSSP-I; 2000/01- 2004/05) envisaged strengthening a minimum health care package (MHCP) within a decentralized, district-based primary health care approach.

Four main reforms aimed to improve the financing of health care from 2000 to 2005: the formal suspension of user-charges in the public sector, a substantial increase in the health budget, better coordination of donor aid, and redirection of resources away from tertiary level services towards primary level MHCP provision. HSSP-II (2005/06 - 2009/20) represents a consolidation and extension of the achievements of HSSP I. The overall programme goals of HSSP I remained and were to be attained through universal delivery of the Uganda National Minimum Health Care Package (UMHCP).

The strategy of the government of Uganda is to reduce maternal and infant mortality comprises a set of initiatives aim at improving reproductive health indicators. Emphasis is placed on three interventions which comprise Goal oriented Antenatal Care, Revitalization of Family Planning and Scaling up of Emergency Obstetric Care (EmOC). Although community oriented models herein are highlighted in government policy and programmes (for example related to the UMHCP) , their utility is never given full attention neither their contribution really measured.

Despite all interventions, access to and utilization of services remain very poor. Only 42 percent of the mothers deliver with skilled care. An estimated 2.6 percent of women have obstetric fistula. Approximately 297,000 unsafe abortions occur yearly, which means an estimated 16 abortions out of every 100 pregnancies; 55% of abortions are among those aged 15 to 20. Hence the unavailability of skilled attendance at birth, unmet need for family planning especially among the youth, HIV and AIDS, and a high maternal mortality, are Uganda's key reproductive health challenges. Table 4 below reports a number of macro-health indicators for different time periods in Uganda related to the mother-child projects included in our MDG sample.

Table 4: Health situation Uganda

	1990-2000	2000-2010	2010-2014
<u>General health situation</u>			
Lifetime risk of maternal death (%)	5.13	3.80	2.44
Health expenditure per capita (current US\$)	15.19	27.18	42.60
Health expenditure, public (% of GDP)	1.77	2.01	2.11
Tuberculosis treatment success rate (% of new cases)	48.00	66.10	72.67
Physicians (per 1,000 people)	0.04	0.08	0.12
<u>Mother and child health situation</u>			
Prevalence of HIV, female (% ages 15-24)	5.02	3.11	4.18
Prevalence of anemia among children (% of children under 5)	74.17	68.50	57.65
Prevalence of anemia among pregnant women (%)	47.77	43.10	35.30
Mortality rate, infant, female (per 1,000 live births)	99.30	80.90	42.55
Mortality rate, infant, male (per 1,000 live births)	114.90	96.80	52.25
Mortality rate, neonatal (per 1,000 live births)	38.04	30.63	23.10
Mortality rate, under-5, female (per 1,000)	166.00	135.10	65.45
Mortality rate, under-5, male (per 1,000)	190.90	158.40	78.60
Births attended by skilled health staff (% of total)	37.80	40.45	57.40
Fertility rate, total (births per woman)	7.02	6.59	6.06
Newborns protected against tetanus (%)	70.80	80.70	85.00
Pregnant women receiving prenatal care (%)	91.20	92.95	93.30
Malnutrition prevalence, height for age (% of children under 5)	45.00	41.75	33.70
Malnutrition prevalence, weight for age (% of children under 5)	21.50	17.70	14.10
Diarrhea treatment (% of children under 5 who received ORS packet)	48.20	33.50	43.50
Immunization, DPT (% of children ages 12-23 months)	53.30	63.60	79.50
Immunization, measles (% of children ages 12-23 months)	54.90	67.30	78.00
Mortality rate, under-5 (per 1,000 live births)	166.58	113.65	71.83

D. MDG 7a & 7b: Safeguards for a Sustainable Living Environment & Forests and biodiversity

Uganda boasts substantial natural resources, most notably fertile soil, adequate rainfall, deposits of copper, gold and recently discovered oil reserves. Uganda's natural resource base is critical for social and economic development, rendering development in the country vulnerable to climate variability and change. For instance, a temperature rise of 2oC could wipe out most of Uganda's coffee production and jeopardize 40% of export revenue (NORAD, 2009). Although the government has been proactive in implementation of environmental protecting policies, these policies are considered to be of low quality, leading to the misuse and degradation of the environment.

Meanwhile, poverty and rapid population growth are the primary causes of biodiversity loss, threatening ecosystems throughout Uganda. The rate of biodiversity loss was calculated at 10% per decade in 2004, and the share of land covered by forest declined from 25% in 1990 to 18% in 2006 (Witte et al., 1999, MDG report Uganda, 2010).

Sanitation and provision of safe water have been priorities in the NDP. The share of individuals with access to safe water has increased from 57% in 2000 to 68% in 2006. The government is on course to meet its target of 89% access in 2015. In more detail, Table 5 below provides the development over time of some sustainable environment figures.

Table 5: Sustainability indicators

	1990-2000	2000-2010	2010-2014
Rural population (% of total population)	88.39	87.02	85.04
Improved sanitation facilities, rural (% of rural population with access)	27.23	31.14	33.70
Improved sanitation facilities, urban (% of urban population with access)	32.32	32.62	32.80
Improved water source, rural (% of rural population with access)	44.10	59.45	69.43
Improved water source, urban (% of urban population with access)	80.95	88.84	94.00
Renewable internal freshwater resources per capita (cubic meters)	1920.84	1386.22	1055.42
Access to electricity, rural (% of population)	1.50	2.40	5.30
Access to electricity, urban (% of population)	40.00	44.00	55.40
Arable land (hectares per person)	0.25	0.21	0.19
Forest area (% of land area)	21.79	17.38	14.51
Agricultural land (% of land area)	60.66	66.17	70.71
Terrestrial protected areas (% of total land area)	8.43	9.91	11.45
Permanent cropland (% of land area)	9.79	10.84	11.09
Crop production index (2004-2006 = 100)	79.17	100.96	109.13
Food production index (2004-2006 = 100)	72.55	98.97	112.15
Livestock production index (2004-2006 = 100)	58.77	94.37	122.21
CO2 emissions (metric tons per capita)	0.05	0.08	0.11

E. Fragile States

The National Resistance Movement (NRM) of President Museveni has been in power since 1986. Although a democratic constitution was adopted and presidential, parliamentary and local elections took place, the NRM's fear of a loss of power has hampered further democratic progress. Civil participation in decision-making processes increased due to the decentralization of government. However, the creation of new districts and limited financial resources caused new tensions. Media and journalists face government control, corruption is widespread, and human rights violations and impunity persist.

Following Museveni's ascent to power, an armed revolt among the northern Acholi population broke out, with numerous armed groups being formed. The Lord's Resistance Army (LRA) eventually absorbed most of the rebel groups, and waged a guerrilla war against the central government. Years of brutal violence perpetrated by both the LRA and government forces in northern Uganda forcibly displaced 1.8 million people into camps for Internally Displaced Persons (IDPs), while thousands of children were abducted to serve as child soldiers or sex slaves. In 2006 a ceasefire was negotiated between the LRA and the Government of Uganda, and today the north is relatively calm except for the Karamoja region of north eastern Uganda where cattle raiding, banditry and the overall presence of small arms continue to hamper security.

In 2007 the Government of Uganda launched the Peace, Recovery and Development Plan for Northern Uganda (PRDP) as a strategy to eradicate poverty and improve the welfare of the populace in Northern Uganda. Since 2006 around 928,000 internally displaced people have returned to their own villages from the camps, 143,000 have gone to “satellite” camps closer to home and around 87,000 people are still remaining in Internally Displaced People (IDP) camps; 214 out of 243 IDP camps have been closed. In the Acholi region 80% of the population have returned to their villages of origin and only 7% of the population remains in IDP camps with the remainder in ‘transit camps’.

Post-war recovery required focused attention to re-establishing communities that were seriously disrupted during the war. The physical result of the war in terms of agriculture production and land access was particularly harmful to the Acholi, as the majority heavily depends on subsistence farming. This posed a serious threat to the economic stability of the communities. Moreover, atrocities committed by neighbours and family members threaten the social stability of communities. Children, including child-headed households, orphans, and formerly abducted children, are the most vulnerable in these communities. Table 6 provides some more detailed figures on migration and battle related death’s over time in Uganda.

Table 6: Battle death and migration

definition	1990-2000	2000-2010	2010-2014
Battle-related deaths (number of people)	553	493	
Refugee population	218242	218274	157709
Net migration	37129	-70000	-150000

Part 2: Methodology

All eight projects under evaluation had started before the baseline data collection in 2012. Programme beneficiaries were selected non-randomly, with target communities identified based on more or less explicit criteria, and direct beneficiaries selected in consultation with various stakeholders or through a process of self-selection. This made it impossible to integrate the evaluation into project design, ruling out advanced techniques such as randomized controlled trials. The ways we chose to overcome this issue depend heavily on design of each project are discussed in more detail below, but they typically involve a difference in differences design with one or more treatment groups and a control group.

To construct the treatment group(s), we drew clustered samples from the beneficiaries (except for the Kampabits and St. Elizabeth Girls Home projects whose intervention is limited to a single group of beneficiaries). Where applicable, selection of sampling units (villages or schools) was done randomly by a computer. Selection of respondents from the sampling units was done randomly from lists of residents obtained from local authorities (Diocese of Jinja, SHU, War Child, FOKAPAWA, CPDRR), from school registers (War Child, FOKAPAWA) or from lists of mothers and pregnant women provided by local health workers (Health Child). Control sampling units were selected based on their similarity to the treatment ones, with the exact method depending on available data and other information. Due to selection bias, our treatment and control groups are not completely identical, but by

employing propensity-score matching and regression-based methods, we used the confounding variables to correct for difference as much as possible. The sampling methods and sample sizes are summarized below.

Table 7: Overview MDG studies MFS-II Uganda

Project	Sampling method	Control group selection method	Sample size				Sample Composition
			Treatment			Control	
			1	2	3		
Health Child	Geographically stratified random sampling	Control sub-counties chosen according to the same criteria as treatment sub-counties	120(b) 120(e)	120(b) 120(e)	-	120(b) 120(e)	11 mothers and 1 VHT per village
Diocese of Jinja	Ad-hoc haphazard sampling in all treatment facilities and control facilities matched by PSM, random sampling in in-between villages	PSM on pre-intervention output and input data	192(b)	-	-	192(b)	10 Catholic facility patients, 10 public facility patients and 12 village residents per Catholic facility
SHU	Geographically stratified random sampling	Control sub-counties chosen for geographic proximity to treatment sub-counties	210(b) 21 ¹ (b)	90(b) 9(b)	-	150(b) 15(b)	10 households and 1 insurance scheme official per village, 1 household head and 1 mother per household
St. Elizabeth Girls Home	Entire population	-	82(b) 150(e)	-	-	-	All beneficiaries
Kampabits	Entire population, more to be surveyed on a rolling basis as beneficiaries enter the program	-	20(b) 25(e)	-	-	-	All beneficiaries
War Child (VST)	Stratified random sampling	-	34(b) 42(e)	-	-	-	16 students and their caretakers, 5 teachers, 3 War Child staff, 3 local government officials, 7 professionals
War Child (QEIP, DEALS)	Stratified random sampling	FOKAPAWA treatment groups serve as a comparison group for War Child and vice versa. Schools supported by both projects are excluded from the control groups.	144(b) 144(b) 36 ² (b)	-	-	360(b) 360(b) 90 ³ (b)	4 second-graders, 4 fourth-graders and 4 sixth-graders per school, their caretakers (12 per school) and teachers (3 per school)
FOKAPAWA			193(e) 160(e) 42(e)	-	-	320(e) 320(e) 90 (e)	
			252(b) 252(b) 63(b)	96(b) 96(b) 24(b)	60(b) 60(b) 15(b)	96(b) 96(b) 24 ³ (b)	
			252(e) 252(e) 63(e)	96(e) 96(e) 24(e)	60(e) 60(e) 15(e)	96(e) 96(e) 24 ³ (e)	
CPDRR	Geographically stratified random sampling	Control parishes chosen for geographic proximity to treatment parishes	96(b)	-	-	96(e)	2 committee members and 10 random residents per treatment village, 12 random residents per control village

Note: (b) indicates the sample size in the baseline, while (e) refers to the sample size in the endline.

In 2012 and 2014, we interviewed all respondents using structured questionnaires for respectively the baseline and endline wave. The questionnaires cover key impact indicators as well as indicators

¹ In some cases, the mother and the household head are one person. To avoid confusion, the first figure refers to the number of households instead of the number of individual respondents. The second figure refers to the number insurance scheme officials.

² The figures refer to pupils, caretakers and teachers respectively.

³ The FOKAPAWA treatment groups serve as a comparison group for War Child and vice versa. The four schools supported by both projects are excluded from the control groups

of intermediate effects derived from the theories of change and confounding variables. The only exception is the evaluation of the vocational skills training component of War Child's Conn@ct.Now project where we conducted semi-structured interviews to be used in qualitative analysis. Where applicable, interview data are complemented by results from artificial field experiments gauging individual and group social preferences.

We take three main approaches to the evaluation. For most projects, we compare the changes in the relevant indicators between treatment and control groups in the period between the baseline and the endline survey. Where it was not possible to identify a suitable control group, we compare the indicator values from the baseline and endline data collection rounds. Since these projects (Kampabits and St. Elizabeth Girls Home) take on new beneficiaries on a regular basis, we used recall data from the newly enrolled ones at the time of the endline as a pseudo control group. Finally, for the evaluation of the VST component of the Conn@ct.Now project we take the form of qualitative case studies. The study designs and data collection methods are summarized in below.

Table 8: Evaluation instruments MDG

Project	Evaluation design	Data collection methods
Health Child	<ul style="list-style-type: none"> • Diff-in-diff • PSM 	<ul style="list-style-type: none"> • Survey • Secondary data
Diocese of Jinja	<ul style="list-style-type: none"> • Diff-in-diff • PSM • Self-reporting 	<ul style="list-style-type: none"> • Survey • Self-reported output
SHU	<ul style="list-style-type: none"> • Diff-in-diff 	<ul style="list-style-type: none"> • Survey • AFEs
St. Elizabeth Girls Home	<ul style="list-style-type: none"> • Before/after comparison 	<ul style="list-style-type: none"> • Survey
Kampabits	<ul style="list-style-type: none"> • Before/after comparison 	<ul style="list-style-type: none"> • Survey
War Child (VST)	<ul style="list-style-type: none"> • Case study • Before/after comparison 	<ul style="list-style-type: none"> • Semi-structured individual interviews • Observation
War Child (QEIP, DEALs)	<ul style="list-style-type: none"> • Diff-in-diff 	<ul style="list-style-type: none"> • Survey • AFEs
FOKAPAWA	<ul style="list-style-type: none"> • Diff-in-diff • Before/after comparison 	<ul style="list-style-type: none"> • Survey • AFEs
CPDRR	<ul style="list-style-type: none"> • Diff-in-diff • PSM 	<ul style="list-style-type: none"> • Survey • AFEs

Part 3: Studies

A. Health Child

Health Child is a registered Non Government Organization in Uganda operating in Eastern, Northern and Central Uganda, currently in Jinja, Wakiso, Apac and Lira Districts . The organisation was established in 2006; the focus of Health Child's interventions lies on improving the health and well being of young children aged 0-8 years and women in child bearing age. The organisation's aim at promoting child and maternal health, early childhood education, child nutrition and child protection.

In general Health Child works in underserved communities without adequate access to social services, which primarily include the fishing communities, urban slum dwellers and hard to reach geographical areas.

The project targets communities along the shores of Lake Victoria in the Jinja district of the Central region, selected for their underperformance in healthcare indicators as reported by the Uganda Bureau of Statistics. The immediate aim of the project is to increase the uptake of ante-natal and post-partum care (including immunization) as well as to encourage delivery under skilled care. This should in turn lead to a reduction of child and maternal mortality in the targeted communities.

To this end, Health Child conducts skills updates for active Village Health Team members (VHTs) ⁴, and encourages them to set up mother clubs to facilitate the transfer of knowledge, attitudes and practices. Health Child also cooperates with Text to Change, a Dutch NGO, on an SMS-based campaign to increase awareness of maternal health issues among participating mothers.

As the effects of the project on child and maternal mortality are likely to take place gradually, the length of this evaluation may be insufficient to measure them. We therefore focus on the immediate outcomes, the main research question being: has the project contributed to the uptake of adequate obstetric care and to increased knowledge about maternal health issues among the women in the targeted communities?

Consequently, key indicators refer to the behaviour of women in the mothers' clubs related to maternal healthcare as well as to their knowledge of maternal health issues. The knowledge of the VHTs is also taken into account.

Project impact is measured as the change in indicator values between the baseline and the endline. Assuming no attrition, we use difference in difference between two treatment groups of 110 mothers and 10 VHTs each, and a control group of the same size. The first treatment group was to receive the intervention shortly after the baseline, which allows us to assess the short-term impact of the project. In the second treatment group, the intervention was already well under way at the time of the baseline. This will allow for an assessment of the persistence of the project's impact. The samples were drawn randomly, and we plan to use matching methods to compare treatment and control respondents, assuming that observable characteristics can account for all outcome-relevant time-invariant differences.

The results on the mother behavior demonstrate that the treatment has a large positive (16.5% increase) and a significant effect on family planning uptake. Older and more educated women are more likely to use a family planning method. So do women attended by a female VHT. The evidence of project effects on the number of ANC visits per pregnancy is very mixed, with ATT (Average Treatment on the Treated) estimations yielding significantly positive results, Diff-in-diff estimations yielding statistically insignificant results, and the medium-term trend estimation yielding a significantly negative result. Nonetheless, the average number of ANC visits in all groups is close to the optimum of 4 per pregnancy. Additionally, we find that more educated women tend to go for more ANC visits, while single women tend to go for fewer visits.

Furthermore, we detect no project effect on the probability of delivering in a healthcare facility, which instead seems to be driven mainly by the wealth of the level of the mother's education and the wealth of her household. Likewise, we find no project effect on the probability that a newborn

⁴ VHTs are volunteer community health workers who form the lowest level of public health services as specified by the National Health Strategy of 2001. As such, they function as a link between health facilities and the community.

child is immunized. However, the levels of this indicator are already quite high at over 90% in all areas. Finally, the project seems to have a large, positive and persistent effect on the overall health status of the women, though the mechanism of this is unclear.

We can summarize our main findings as follows:

Table 9: Impact overview health child

Outcome indicator		Short-term effect	Medium-term trend
VHT	General health awareness	+	-
	Maternal care awareness	0	
	Perceived quality	+	0
	Involvement	++	+
Mothers' Awareness	General health awareness	0	++
	Maternal care awareness	0	
	Women's rights awareness	+	++
Mothers' Behavior	Family planning usage	++	
	Number of ANC visits	+	-
	Delivery at facility	0	0
	Child immunized	0	
	Health status	++	+
Legend:	Conclusively positive effect / increasing trend	(all estimations yield a significantly positive result)	
	++ Likely positive effect / increasing trend	(some estimations yield a significantly positive result)	
	+ trend		
	0 No effect / stable trend detected	(no significant results)	
	- Likely negative effect / decreasing trend	(some estimations yield a significantly negative result)	
	— trend		
	Conclusively negative effect / decreasing trend	(all estimations yield a significantly negative result)	

The positive impact of the project found indicates that the results are relevant in that it helps reach MDGs 4, 5 and 6. Besides, it helps to achieve Objective 2 in Uganda's Health and Nutrition sector ("Ensure universal access to quality Uganda National Minimum Health Care Package, with emphasis on vulnerable populations") through Strategy 1 ("Provide integrated promotive, preventative, curative and rehabilitative services that have been proven effective, cost effective and affordable in conjunction with the private sectors"), Interventions 6 ("Improve people's awareness about health and related issues in order to bring about desired changes in knowledge, attitudes, practices and behavior regarding the prevention and control of major health and nutrition problems in Uganda.") and 9 ("Strengthen community health services.") as defined on pages 273-274 of the National Development Plan 2010/11 – 2014/15.

B. Diocese of Jinja

The Health Office Diocese of Jinja (HODOJ) is a department of the Catholic Diocese of Jinja and was founded in 1987 to support and to coordinate the diocesan health facilities and community health and HIV/AIDS related issues. It is a semi-autonomous department that has its own governance and management systems. A diocesan health board provides governance and policy decision making while a team of dedicated staff coordinate and supervise the operations of the 6 health centers and two hospitals under the diocese. Health service delivery largely takes place at health facility levels. The core mandate of the health office is therefore supervision, coordination and representation of the health institutions under the diocese.

The core objective of the project is to improve the overall performance (including quality, quantity and efficiency) of six mid-sized health centres run by the Diocesan Health Office (DHO) of the Diocese of Jinja in Jinja district of Central Uganda. A system of performance-based financing (PBF) of the health centres was put in place to that end. Under the PBF system, the amount of funding the health centres receive is directly linked to their output, which should motivate them to increase both output and efficiency. The increase in output should in turn lead the facilities to reach a larger number of patients, while the increase in efficiency should allow for an improvement in the quality of the services.

The research question underlying the evaluation thus is: has the project contributed to increased output and efficiency and to improved quality of services in the targeted health centres? The key indicators are therefore input and output data, mortality rates to proxy for service quality, usage and patient satisfaction. For input, output, and mortality, we use data collected by the Uganda Catholic Medical Bureau (UCMB), while usage and satisfaction data come from our own survey.

Project impact is measured as the change in indicator values between the baseline and the endline. We used difference in difference between a treatment and a control group, which was selected by propensity score matching using the UCMB data from the year before the intervention started. To gauge the effect of PBF on healthcare output and on the allocative efficiency of healthcare delivery, we use a range of output and expenditure measurements collected by the UCMB from all its health units, which amount to a panel spanning up to 211 small-sized health centers over a period of thirteen years (FY 2001/2002 – FY 2013/2014). The last six fiscal years follow the introduction of PBF financing in the treated centers. Output is measured using the Standard Unit of Output (SUO) – a unit in which the PBF targets are defined. The SUO is constructed from common services typically provided by small health facilities, taking into account their relative input requirements in terms of cost and time.

In 2012 and in 2014 we conducted a HCAHPS-type patient satisfaction survey in these facilities to gauge the perceived quality of their service. While patient satisfaction is subjective, several studies endorse its validity as an instrument for measuring quality of healthcare (e.g. Andaleeb, 2001; Davies and Ware, 1988; Johansson et al., 2002). Numerous studies show that satisfaction is indeed jointly produced with quality during the course of a consultation and that patients respond to increased quality by being more likely to be satisfied. (e.g. Ryan, 2009; Wharam et al., 2009; Leonard, 2008). Moreover, patient satisfaction reflects both process quality and clinical quality (Marley et al., 2004), making it a good measure of the overall quality of healthcare delivery. To address concerns that per-

ceived quality might be highly dependent on the relative differences vis-à-vis the nearest available alternatives, each of the units was further matched with the nearest similarly-sized public facility as well as a village half-way between the catchment areas of each private-public pair, resulting in a final sample of 24 facilities and 12 neighboring villages.

Using a panel of output and expenditure data in combination with a HCAHPS-type patient satisfaction survey focused on the perceived quality of healthcare, we estimated the contribution of performance-based financing towards achieving its objectives in the diocese of Jinja. First, we find that healthcare providers respond strongly to the output targets introduced by PBF by increasing output. Output growths are achieved primarily through a greater cost-effectiveness of service provision, of approximately 30% in the most conservative estimate. Second, this seems to come at the cost of a 4% lower service quality, at least as perceived by the patients. However these quality differences disappear in the follow-up study. Unfortunately, the timing of the evaluation prevents us from gauging whether initial lower perceived quality is because PBF was introduced into lower-quality facilities to begin with, or whether it was the introduction of PBF itself that led to a decrease in perceived quality cannot be determined as no baseline data exist. In any case, even if this initial negative effect is attributable to PBF, the fact that it washes away over time is at least reassuring that it is only short-lived. If the faster growth rate in perceived quality persists, an additional follow-up round of data collection could further reveal that PBF facilities show a higher perceived quality in the long-run—but this statement should be interpreted as purely speculative at this point.

C. Save for Health Uganda

Save for Health Uganda (SHU) is a company limited by guarantee and a local (Ugandan) not-for-profit Non-Governmental Organization (NGO) formed in 2002 and registered on the 7th of March 2003. SHU is mandated to implement activities aiming at improving access to quality health care and facilities country-wide. The organization was formed for two main reasons: 1) To improve people's financial access to quality and affordable healthcare services, and 2) To rationalize healthcare seeking behaviors of the target population. SHU's vision entails: 'Healthier families with simplified access to quality healthcare' and its mission 'To improve the quality of health of Ugandans through self-managed community health financing (CHF) approaches', with the ultimate goal 'to contribute to the reduction of the disease burden in Uganda'.

The core objective of the project is to improve the access to maternal healthcare by setting up community-based health insurance schemes. The improved access should eventually lead to lower maternal and neonatal mortality rates and to higher child survival rates. As the insurance benefits were expanded to cover general healthcare as well in some of the target communities, the overall access to healthcare and general health status of the population should improve as a result of the intervention. Moreover, participation in the insurance schemes should increase the level of solidarity in the targeted communities.

As the effects of the intervention on child and maternal mortality and especially on child survival are likely to take place gradually, the length of this evaluation may be insufficient to measure them. We therefore focus on the immediate outcome of the project, with the main research question being: has the project contributed to improved access to healthcare by the target communities? A secondary question then is whether the project has increased the level of solidarity in the target communi-

ties. Key indicators therefore refer to access to, usage of and satisfaction with healthcare services, and also include measures of solidarity and collective action.

Project impact is measured as the change in indicator values between the baseline and the endline. We used difference in differences between two treatment groups and one control group. In the first treatment group, the insurance schemes were being set up at the time of the baseline data collection, which allows us to assess the short-term impact of the project. In the second treatment group, the intervention was already well under way at the time of the baseline. This allows for an assessment of the persistence of the project's impact. The samples were drawn randomly, and we plan to use matching methods to compare treatment and control respondents, assuming that observable characteristics can account for all outcome-relevant time-invariant differences.

Based on the regression results summarized in Table 10, we can conclude that the project seems to have a strong impact on the health expenditure of insured households. Even when controlling for self-selection the effect is significant. Responding to intuition – people willing to insure are ex-ante spending more on healthcare – the ITT (intention-to-treat) coefficients are slightly higher but consistent. The estimated saving per household ranges between 67,000 and 257,000 UGX depending on the estimation and sample. In any case these values are higher than the average insurance cost per household of 29,000 and 43,000 UGX respectively in the baseline and follow-up. To estimate its efficiency however the insurance subsidy should be included.

Insured households facing a pregnancy seem robustly more likely to attend Antenatal care (ANC)—an explicit target of the intervention. Insured households are on average going to an ANC visit 10 days before the non-insured; they are 4.8% more likely to have the first ANC within six months; they go on average to 0.22 more visits and are almost 11.6% more likely to attend at least four ANC visits before pregnancy. Results are however not significant in the ITT estimation.

Moreover, the intervention seems to have no significant effect on the number of hospital visits of pregnant women. It has no effect on the likelihood of hospitalized delivery. It has no effect on the likelihood that a pregnant woman would receive Postnatal care (PNC) within 24 hours from delivery, and is only significant effect on PNC in case of hospitalized delivery (13.4% more likely). ITT estimation yields insignificant results.

The intervention seems not to affect the perceived quality of hospital services (Kitagata). However, the sign of the coefficients is consistently negative. This is consistent with qualitative evidence that the scheme may contribute to generate tension about the equality of healthcare within a village. In fact, the probability of being insured significantly correlates with household wealth—a sign that poorer households may be facing significant budget constraints with respect to joining the intervention.

Table 10: Impact overview

Outcome indicator	Effect
Health Expenditure	++
ANC Month First Visit	+
ANC Before 6 Months	+
ANC Number of Visits	+
ANC 4 Visits	+
Hospital Visits (pregnant women)	0
Hospitalized Delivery	0
PNC Within 24 Hours (all)	0
PNC Within 24 Hours (hospitalized delivery)	+
Satisfaction Kitagata Hospital	0

Legend: ++ Conclusively positive effect (all estimations yield a significantly positive result)
+ Likely positive effect (some estimations yield a significantly positive result)
0 No effect detected (no significant results)
– Likely negative effect (some estimations yield a significantly negative result)
— Conclusively negative effect (all estimations yield a significantly negative result)

The project had some positive impact on 6 of 10 measured outcome indicators. The remaining 4 are unaffected. Thanks to the use of a control group and to the inclusion of standard socioeconomic confounding factors into the models and the use of different econometric specifications, we can safely attribute the reported results to the project. However, other factors also play a role in the actual levels of the outcome indicators. We summarize these results in Table 11.

Table 11: Household level influencing factors

Outcome indicator	Size	Assets	Female	Age	Edu	Health	Aware
Health Expenditure	0	++	—	++	++	—	—
ANC Related Outcomes	0	0	+	+	0	0	0
Delivery Related Outcomes	0	0	–	–	+	0	++
Satisfaction Kitagata Hospital	0	0	0	0	0	++	0

Legend: ++ Conclusively positive effect (all estimations yield a significantly positive result)
+ Likely positive effect (some estimations yield a significantly positive result)
0 No effect detected (no significant results)
– Likely negative effect (some estimations yield a significantly negative result)
— Conclusively negative effect (all estimations yield a significantly negative result)

D. St. Elizabeth Girls Home

St. Elizabeth Girls Home is being managed by Sister Akiiki and in total about 21 staff members are being employed. SEGH aims at achieving the following objectives: (1) to impart life-sustaining skills to the vulnerable girls (street and orphans) and other marginalized members in (society) through vocational skills training; (2) to provide counselling and psycho-social support to orphans, street children, marginalized women and widows; (3) re-settling empowered children with their guardian/parents

and on jobs; (4) promote the initiation of simple income generating projects to enhance household incomes, and (5) to have well-coordinated charitable activities within Kampala Archdiocese through reports, visits and meetings.

The aim of the project is to rehabilitate girls living on the street in the attempt to escape from abusive, unpaid, underpaid or overloaded domestic work, abandonment, poverty or sickness in their homes as well as girls at high risk of joining street life. Upon identification by outreach staff, the girls are provided with shelter, psychosocial support and vocational training (including apprenticeship). Their reintegration into society is aided by job search facilitation.

The main research question underlying the evaluation therefore is: has the project improved the socio-economic situation of the beneficiaries? To answer this question, we rely mostly on standard socio-economic indicators with a focus on income and living conditions.

The nature of the beneficiaries makes it nearly impossible to identify a control group that could be traced for the endline. In the absence of such a group, we opted for a before/after comparison using recall data as a pseudo-baseline. We used long-term recall data from beneficiaries who arrived shortly before the endline to partially compensate for the lack of a control group.

The results show that, overall, the project led to an increase in employment of the beneficiaries. While the nature of the used Heckman model does not allow for a direct interpretation of the magnitude of the coefficients as some of the resulting probabilities would fall outside of the unit interval, the descriptive statistics above show that the employment rate increased from 34% to 54%, i.e. by 20% points. However, this impact is conditional as it is almost exclusively for the girls who had completed the life skills training, while those that did not complete the training in fact face lower chances of having a paid job than they had before entering SEGH.

In addition, we find that the girls report to be 27% (or 1 standard deviation) happier at SEGH than before. The higher level of happiness persists throughout the stay. We used again a Heckman selection model to correct for self-selection bias. While some selection predictors are individually statistically significant, the statistically insignificant Mills ratio suggests that the bias has no effect on the outcome variable. We therefore also estimate a BSD (Bubble size distribution estimation), which yields largely similar results.

E. Kampabits

Young people from Kampala's slums but with sufficient education (completed secondary school) are identified by five collaborating community-based organizations (Kiyita Family Alliance For Development, Kawempe Youth Centre, Banda Community Development Program, Network For African Leadership and St Elizabeth Girls Home). Next 40 applicants are selected for basic training every year.

The training consists of 4 parts with focus on micro-entrepreneurship skills, ICT multimedia skills (introduction to computer and media lab skills), life skills (how to fit in and make own decisions, build confidence) and on reproductive health and HIV/AIDS (focus group discussions on topics like abortion, pregnancies, how to choose a partner). Each year, all students completed what is called the basic training. The best 20 students from the basic training are then selected to continue for an advanced training, which goes into more technical detail and builds further confidence. Potential em-

employers are invited to graduation to network with the graduates. Like other bits in the region, KampaBits is a Not-for-Profit organization that seeks to empower disadvantaged youth from the informal settlements of Kampala, Musoma and Mukuru in Nairobi through ICT. The project thus aims at empowering disadvantaged youth while bridging the digital divide and forging links between Northern and Southern youth. This provides the vulnerable youth from informal settlements with basic skills in computer applications and web design.

The core objective of the project is to train vulnerable young people in new and marketable ICT technologies to ensure their future self-reliance. Young people from Kampala's slums but with completed secondary school education are identified by collaborating community-based organisations. Next 40 applicants are selected for basic training every year. Of these, the 20 best are selected for advanced training. The training gives the students a competitive set of skills for the job market. Potential employers are invited to graduation to network with the graduates.

The main research question therefore is: has the project enabled the beneficiaries to achieve economic self-reliance through skilled employment? We rely mostly on standard socio-economic indicators to answer the question, focusing on employment and income.

The unique nature of the beneficiaries who are relatively highly educated but come from disadvantaged neighbourhoods makes it rather difficult to identify a sufficiently comparable control group. We therefore adopt a similar evaluation strategy as for the St. Elizabeth project, using a simple before/after comparison combined with recall data to serve as a pseudo-baseline, and using long-term recall data from students who enrolled shortly before the endline to partially compensate for the lack of a control group.

Our main results indicate that the project had no detectable impact on the beneficiaries wealth (measured in terms of possession of common assets). Given the roughness of our measure and the small sample size, this is not unexpected. The project had large and statistically very significant impact on the employment level of interviewed beneficiaries. Most of the new employment was in the IT sector.

F. War Child

War Child's Conn@ct.Now is a multifaceted project whose general aim is to improve the psychosocial wellbeing of children and youths in the post-conflict setting of Northern Uganda. More specifically, its objectives are to improve the protection of children and young people from violence, abuse and exploitation, to improve (non-)formal child-friendly and quality basic education opportunities for children and young people, to increase access to and quality of integrated psychosocial services for them, and to improve (self-)employment opportunities of vulnerable youths. The main project components being evaluated focus on the development of strategic plans to improve primary education services, on direct work with school children to improve their life skills and psychosocial wellbeing, and on providing vocational skills training (VST) to selected youths.

Given the complex nature of the project, we focus on three main research questions:

1. Has the project improved the quality of education in the targeted schools?
2. Has it improved the psychosocial well-being of the children in the targeted communities?

3. Has it helped the beneficiaries of the of the VST to improve their socio-economic situation by finding (self-)employment?

Accordingly, the key indicators can also be divided into three categories:

1. Academic performance
2. Physical and emotional wellbeing, self-esteem, family and peer relations
3. Standard socio-economic indicators

Project impact in terms of the first two questions is measured as the change in indicator values between the baseline and the endline. Assuming no attrition, we used difference in differences between a treatment and a control group. Since there are very few schools in the region which are not being targeted by one NGO programme or another, it was impossible to identify a control group with no education-related intervention, forcing us to use schools benefiting from different programs as a control. In this situation, we use the schools targeted by the FOKAPAWA / ZOA project as a control group in order to speed up the evaluation process and to save costs. We used stratified random sampling to account for pupils of all age groups as well as for their parents and teachers.

The third question is answered using qualitative case studies of a stratified sample of students (and their caretakers and teachers). This method was chosen to allow us to account for all the various trades being taught despite the small number of beneficiaries and the diverse nature of the training. The evaluation consisted out of two parts: (1) primary education performance and (2) vocational skills training.

Primary education components

The results are summarized in Table 12 which gives an overview of the different effects over the various outcome indicators. We find no significant effect of the project on long-term educational outcomes. Similarly, we find no significant effect of project impact on most short-term psychosocial outcomes. The two exceptions are intellect (openness) where we consistently find a negative short-term effect with no medium-term improvement, and locus of control which possibly decreased in the treated areas. However, the evidence cannot be considered conclusive as the short-term effect estimation does not control for initial levels, and the medium-term effect is statistically insignificant in the DID-PSM estimation.

Table 12: Impact overview War Child

Outcome indicator	Short-term effect	Medium-term trend	Long-term effect
Textbook			0
Absent			0
Reading			0
Math			0
Intellect	—	0	
Conscientiousness	0	0	
Extraversion	0	0	
Agreeableness	0	0	
Emotional stability	0	0	
Locus	0	—	
Esteem	0	0	
Emotional wellbeing	0	0	

Physical wellbeing	0	0
Family relations	0	0
Peer relations	0	0

Legend:	++	Conclusively positive effect / increasing trend	(all estimations yield a significantly positive result)
	+	Likely positive effect / increasing trend	(some estimations yield a significantly positive result)
	0	No effect / stable trend detected	(no significant results)
	-	Likely negative effect / decreasing trend	(some estimations yield a significantly negative result)
	—	Conclusively negative effect / decreasing trend	(all estimations yield a significantly negative result)

From these results we can draw two clear conclusions regarding reaching the objective. First, we detect no long-term impact of the project on the four observed educational outcome indicators. Second, we find no positive short- or medium-term impact of the project on the 11 observed psychosocial outcome indicators. We even find suggestive evidence of negative project impact on 2 of the 11 psychosocial outcome indicators.

We did our utmost to attribute any detected impact to the project and to rule out the effects of other factors on the results by controlling for a wide range of potential confounding factors. Some of these factors do indeed seem to significantly affect the outcome indicators, as is summarized in Table 13 and 9.

Table 13: Other factors impacting educational outcomes

	Female	ASI	Literacy care-giver	HH size	IQ
Textbook	-	0	0	0	
Absent	+	0	0	0	
Reading	0	0	0		0
Math	-	0	0		+

Legend:	++	Conclusively positive effect	(all estimations yield a significantly positive result)
	+	Likely positive effect	(some estimations yield a significantly positive result)
	0	No effect detected	(no significant results)
	-	Likely negative effect	(some estimations yield a significantly negative result)
	—	Conclusively negative effect	(all estimations yield a significantly negative result)

Table 14: Other factors impacting psychosocial outcomes

	Age	Female	IQ	ASI	Parent	Intel. caregiver	Consc. caregiver	Extra. caregiver	Agree caregiver	Emo. st. caregiver	Esteem caregiver	Locus caregiver	posure caregiver	Trauma caregiver
Intel.	0	0	++	-	0	++	0	-	0	0	++	0	++	-
Consc.	++	0	-	—	-	0	++	0	0	0	0	0	0	++
Extra.	0	0	++	—	+	0	0	0	0	0	0	0	0	0
Agree	++	0	+	0	0	0	0	++	++	-	0	0	0	++
Emo.st.	0	0	0	0	+	-	0	-	0	++	+	—	-	-
Locus	+	0	+	0	0	—	0	++	0	0	++	++	0	0

Esteem	+	-	++	0	0	0	+	+	0	0	++	—	0	0
Emo. wb.	++	+	++	++	0	0	0	0	0	—	0	+	0	+
Phys. wb.	0	++	-	0	0	—	0	0	+	—	0	0	++	+
Fam. rel.	—	0	+	0	+	0	++	0	0	0	+	-	-	0
Peer rel.	0	0	++	—	0	+	++	+	0	0	0	0	-	0

Legend:	Conclusively positive effect	
++	Likely positive effect	(all estimations yield a significantly positive result)
+	No effect detected	(some estimations yield a significantly positive result)
0	Likely negative effect	(no significant results)
-	Conclusively negative effect	(some estimations yield a significantly negative result)
—		(all estimations yield a significantly negative result)

Vocational skills training component (VST)

The beneficiaries of the project are of quite a specific demographic category: Disadvantaged, troublesome youths from one of the most remote and least developed parts of Uganda who have nonetheless completed at least primary education, and were capable of undergoing vocational skills training. This makes it difficult to identify a sufficiently similar control group. None is therefore used.

Given the small total number of beneficiaries and the consequently small sample, we rely mainly on qualitative data collected through semi-structured interviews. The nature of the data and the sample size predicate the analytical approach which involves descriptive and t-test statistics of coded qualitative data combined with simple socioeconomic quantitative indicators and illustrated with before and after narratives. It is possible that graduates who have had a positive experience with the program are more likely to agree to be interviewed than those with a less positive experience. This could also lead to an overestimation of impact.

Our main findings regarding the VST analysis indicates that the project had no detectable impact on the beneficiaries wealth (measured in terms of possession of common assets). Given the roughness of our measure and the small sample size, this is not unexpected. The project had large and statistically very significant impact on the employment level of interviewed beneficiaries, which more than doubled. While, due to the lack of a control group, we cannot rule out that the graduates would have found a job anyway, most of the respondents who gained employment following graduations do assign some role in this to the project.

G. FOKAPAWA

Forum for Kalongo Parish Women Association (FOKAPAWA) is a registered community based organization that was founded in 1998 by a group of four people. FOKAPAWA was founded on a humanitarian ground to elevate the condition of women who have suffered so much as a result of the prolonged war in Acholi sub-region. FOKAPAWA is located in Kalongo Town council and operates in 9

sub counties (Wol, Lukole, Parabongo, Omot, Paimol, Lapono, Adilang, Omiya Pacwa and Kalongo Town council) of Agago District.

FOKAPAWA's mission concerns the support to 'women and youths to know their rights and be able to work towards a better livelihood by getting involved in Income Generating activities (IGAs) and peace building activities in Agago and Pader Districts'

The main objective of the project is to reactivate the primary education system in the post-conflict setting of Northern Uganda. The project is implemented in part directly by ZOA, and in part by two local partner organisations – FOKAPAWA and Kwal Ryeko. By providing capacity training to Parent-Teacher Associations and School Management Committees as well as material support to schools, the project aims at increasing community involvement in and better efficiency of the provision of primary education services. The increased community involvement should lead to better accessibility of primary education, while efficiency increases should improve its quality and ultimately the academic performance of the pupils.

The research question underlying this evaluation therefore is: does the project improve the academic performance of the pupils in targeted schools? Key indicators consequently focus on academic performance including reading skills, text comprehension, mathematical skills and government test scores.

Project impact is measured as the change in indicator values between the baseline and the endline. Assuming no attrition, we used difference in differences between a three treatment groups and a control group. Each of the treatment groups is composed of schools supported by one of the implementing organisation, while schools supported by War Child serve as a control group for reasons described above. We selected the schools using stratified random sampling to reflect the proportion of schools supported by each organisation. Within the schools, we also used stratified random sampling to account for pupils of all age groups as well as for their parents and teachers.

First we estimated the short-term project effects on outcome indicators for which data are available from both 2012 and 2014. The effects are estimated using DID and DID-PSM approaches. We do not detect any statistically significant effect of the project on the awareness or on the opinion about PTAs. Similarly, we detect no statistically significant effect of the project on the awareness about SMCs. We do, however, detect a significant decline (between 21% and 36%) of caregivers having a positive opinion about the SMC in treated schools as compared to control ones. The decline is entirely caused by changes in the treated schools; the opinion about SMCs remains more or less constant in the control ones. Second, we estimated short-term project effects on outcome indicators for which only 2014 data are available. The sub-sample used for these estimations allows us to distinguish between the three implementing agencies (ZOA, FOKAPAWA, and Kwal Ryeko). Again, we do not detect any statistically significant effects of the project on the furnishing of classrooms in treated schools as compared to control ones. However, differentiating between the implementing agencies reveals that only FOKAPAWA-supported schools see no difference in the furnishing of classrooms as compared to control ones. Schools supported by Kwal Ryeko and by ZOA are between 33% and 45% more likely to provide a bench and a desk for all their pupils than schools in the control group. Finally, we do not detect any significant effects of the project on the fraction of class time that teachers spend teaching.

From the estimation results in the long-run, we can draw a number of clear conclusions. First, we do not detect and statistically significant project effects on the proportion of pupils who have a reading textbook. Second, we find no statistically significant project effects on long-term absence of pupils. Third, the project has no significant effects on pupils’ reading skills. Finally, we do not detect any statistically significant project effects on pupils’ mathematical skills.

In Table 15 we show the estimated long-term project effects on outcome indicators for which data from only one cross-section are available. The effects are estimated using BSD and PSM approaches. The sub-sample used for these estimations allows us to distinguish between the three implementing agencies (ZOA, FOKAPAWA, and Kwal Ryeko). We only report implementer-specific results when they significantly differ from general project results. We do not detect any statistically significant effects of the project on pupil retention. However, differentiating between the implementing agencies reveals that while pupil retention in ZOA- and FOKAPAWA-supported schools does not significantly differ from that in control schools, schools supported by Kwal Ryeko exhibit a 2-year retention rate between 13 and 21 percentage points lower than the rest.

Moreover, we do not detect any significant project effects on pupils’ grade progress. However, differentiating between the implementing agencies reveals that while pupils in FOKAPAWA- and Kwal Ryeko- supported schools progress through grades at the same rate as those in control school, pupils in schools supported by ZOA completed on average 0.2 more grades over the 2-year evaluation period than pupils in the control schools. Considering that on average, pupils complete 1.3 grades in 2 years, this is a sizable improvement.

Table 15 Impact overview FOKAPAWA

Outcome indicator	Project effect	Term
PTA know	0	short
PTA useful	0	short
SMC know	0	short
SMC useful	--	short
Furniture	+	short
Teaching time	0	short
Textbook	0	long
Absent	0	long
Reading	0	long
Math	0	long
Retention	-	long
Progress	+	long

Legend: ++ Conclusively positive effect (all estimations yield a significantly positive result)
 + Likely positive effect (some estimations yield a significantly positive result)
 0 No effect detected (no significant results)
 - Likely negative effect (some estimations yield a significantly negative result)
 -- Conclusively negative effect (all estimations yield a significantly negative result)

The project had some positive impact on only 2 out of the 12 measured outcome indicators, and no or even negative impact on the remaining 10. We did our utmost to be able to attribute any detected impact to the project and to rule out the effects of other factors on the results by controlling for a wide range of potential confounding factors. Some of these factors do indeed seem to significantly affect the outcome indicators, as is summarized in Table 16.

However, the results should not be considered entirely conclusive due to the overall set-up of the evaluation process. First, the project was already underway in most of the schools by the time we were tasked with the evaluation. The 2012 data collection wave therefore does not constitute a true baseline in the majority of the schools. This limits the sample on which short-term effects can plausibly be estimated to relatively small group, while long-term effects can only be estimated under strict assumptions. Second, the difficulty in finding a control group which was not (or had not recently been) part of an NGO project forced us to use schools with an NGO project supposedly focused on a different aspect of education as a control group. Given the multi-faceted nature of most NGO projects however, we cannot completely rule out the possibility of the control schools being affected by their NGO support in a similar way to the treated schools. Finally, education is an area where the gap between policies and their end results is usually measured in years or decades, but certainly not months. This evaluation, on the other hand, was bounded by a period of less than two years. It is therefore very much possible that the project effects are yet to manifest themselves, despite the our insignificant findings.

Table 16: Other influencing factors FOKAPAWA

Outcome indicator	Female caregiver	Age caregiver	Literacy caregiver	Wealth caregiver	HH size	PTA useful	SMC useful	Female child	IQ
PTA know	0	0	++	++					
PTA useful	0	0	0	0					
SMC know	--	++	++	++					
SMC useful	0	0	0	0					
Furniture			-	++		0	0		
Teaching time			--	++		0	0		
Textbook			0	0	0			0	
Absent			0	--	0			++	
Reading			0	0				--	++
Math			0	0				0	++
Retention			0	0	0			0	0
Progress			0	0	0			++	++
Legend:	++	Conclusively positive effect		(all estimations yield a significantly positive result)					
	+	Likely positive effect		(some estimations yield a significantly positive result)					
	0	No effect detected		(no significant results)					
	-	Likely negative effect		(some estimations yield a significantly negative result)					
	--	Conclusively negative effect		(all estimations yield a significantly negative result)					

H. Uganda Red Cross Society

The URCS trains “committees” of community members in topics and skills related to disasters, climate change and environmental degradation resilience: (1) Committee members identify environmental and climate risks together with URCS using hazard maps; (2) Committee members come up with solutions together with URCS; (3) Committee members familiarize their neighbours with the solutions; (4) The communities work with URCS to implement the solutions, and (5) It is assumed that solutions exist to the identified risks, and that the communities will be willing to implement them. So greater resilience to disasters, climate change and environmental degradation is achieved.

The core objective of the project is to create communities resilient to disaster risk and climate change in four Katakwi and Apac districts in Eastern and Northern regions respectively. The parishes were purposely selected to represent areas suffering from climate-related disaster risks prevalent in Uganda – drought and floods.

While the project is intended to benefit the population of the four parishes, many of the activities target smaller groups of selected direct beneficiaries organised into committees. The committees are trained in topics and skills related to resilience to disaster, climate change and environmental degradation. They are led by URCS to identify environmental and climate risks using hazard maps, and to come up with possible prevention and mitigation strategies. The committees are then expected to familiarize their neighbours with the solutions so that URCS can work with whole communities to implement them.

Quantitative assessment of the impact of community risk management activities is difficult if not impossible with only two years of data as DRR effectiveness only becomes manifest in the presence of negative shocks which do not occur every year. In order to overcome this potential hurdle, our evaluation is focused on the adoption of DRR measures known to be effective in other cases rather than on the ultimate effect of these measures.

Thus the main question underlying the evaluation is: has the project contributed to individual and communal practices that help to prevent and mitigate environmental and climate-change related disasters in the targeted communities?

Consequently, key indicators refer to the knowledge and practice of prevention and mitigation strategies among the committee members and the targeted communities at large. We also consider the behavioural patterns of the communities related to natural resource management measured by means of artefactual field experiments. Project impact is measured as the change in indicator values between the baseline and the endline. Assuming no attrition, we used difference-in-differences between a treatment group of 96 households in the target parishes and a control group of the same number of households in four control parishes in the same district. We used stratified random sampling to account for both committee members and other villagers, and we plan to use matching methods to compare treatment and control households, assuming that observable characteristics can account for all outcome-relevant time-variant differences.

Table 17 reports that the project had some positive impact on 3 of the 9 measured outcome indicators. In particular, we find positive impact on the knowledge and implementation of measures that can prevent drought-related problems with crop and livestock production. On the other hand, we do not find any evidence of impact on the knowledge and implementation measures that can prevent flood-related problems with crop and livestock production. Perhaps most importantly, we do not find any evidence of project impact on the prevalence of flood- or drought-related problems with crop or livestock production. Thanks to our use of a difference-in-differences set-up and the inclusion of standard socioeconomic confounding factors into the models, we can safely attribute the reported results to the project. However, other factors also play a role in the actual levels of the outcome indicators, especially the age and the level of education of the mothers (see Table 18).

Table 17: Impact overview URCS

	Affected by problem	Known measures	Implemented measures
Floods & crops	0	0	0
Drought & crops	0	++	+
Drought & livestock	0	0	+
Legend:	++ Conclusively positive effect + Likely positive effect 0 No effect - Likely negative effect - Conclusively negative effect	(all estimations yield a significantly positive result) (some estimations yield a significantly positive result) (no significant results) (some estimations yield a significantly negative result) (all estimations yield a significantly negative result)	

Table 18: Other factors affecting URCS outcomes

	Outcome indicator	Female	Age	Newspaper	Assets	Committee member
Floods & crops	Affected by problem	0	-	0	0	0
	Known measures	0	0	+	0	0
	Implemented measures	0	0	0	0	0
Drought & crops	Affected by problem	0	-	0	0	0
	Known measures	0	0	0	0	++
	Implemented measures	0	0	0	+	++
Drought & livestock	Affected by problem	0	0	+	+	0
	Known measures	0	0	0	0	0
	Implemented measures	0	0	0	0	0
Legend:	++ Conclusively positive effect + Likely positive effect 0 No effect - Likely negative effect - Conclusively negative effect	(all estimations yield a significantly positive result) (some estimations yield a significantly positive result) (no significant results) (some estimations yield a significantly negative result) (all estimations yield a significantly negative result)				

Part 4: General Comments and Reflections

While data on impact indicators, intermediate and confounding variable is available, we did receive sufficiently detailed information about budgets from all organisations to answer all budget related questions. The information we have been able to gather differs greatly in detail and time frames, rendering any comparative analysis very difficult. We have contacted the NGOs involved, but not all issues have been resolved. Moreover, project budgets tend to be modified over time as NGOs respond to new developments on the ground as well as to lessons learned from the implementation so far.

Table 17 below indicates our judgement on the relevant research questions for each project. In more detail, the respective research questions are (1) The project was well designed; (2) The project was implemented as designed; (3) The project reached all its objectives; (4) The observed results are attributable to the project interventions; (5) The observed results are relevant to the project beneficiaries and (6) The project was implemented efficiently.

In general we can say that the health projects get on average higher scores on design, implementations and reaching objectives than projects related to education or sustainability. One explanation is that the beneficiaries in the latter project are harder to target.

Table 17: Summary MDG evaluation questions

Project	Design	Implementation	Objectives	Attribution	Relevant	Efficient
Health Child	9	7	7	8	10	NA
Diocese of Jinja	7	7	9	9	10	NA
Save for Health Uganda	6	5	6	7	6	NA
St. Elizabeth's Girls Home	7	7	7	7	7	7
Kampabits	8	7	8	8	10	5
War Child	5	5	3	5	5	NA
FOKAPAWA	5	7	2	5	5	5
Uganda Red Cross Society	5	5	3	10	5	NA

III. Capacity development of Southern partner organisations

A. Methodology (approach, sampling, practical limitations)

Two special Research Manuals⁵ were written For the SPO field research for the baseline and endline (follow-up assessment) studies. The analytical approach in the final technical report regards not only the contribution of CFA funding meant for the SPO's capacity to the actual development changes in the capacity of the SPO, but in 3 studies also to the contribution of changes in the SPO capacity to SPO outcomes (contribution analysis).

Background documents

For both the baseline as the endline studies initially relevant documents on strategy, context and activities were studied and verified with the SPOs under analysis and their related CFAs.

Focus groups/group interviews

Focus group interviews were held with SPO staff members of their offices (central and/or regional when applicable), as well as with stakeholder organisations for getting data on the organisation's development and its working environment. In these interviews attention was given to the organisation's *Timeline* until the baseline year 2012, its *Theory of Change*, and the *Results Chain CFA - SPO - Target groups / stakeholders*. *Observation* of the SPO's office and working environment gives additional information about the SPO.

A complementary approach was followed in the fieldwork of the baseline and endline studies that have taken place during the period respectively May-October 2012 and March - July 2014; herein interview formats were used emphasising *key changes and wished changes* within the SPO, as seen by interviewees from the SPO personnel, from externals and from the supporting CFA.

Organisational self assessment

In the baseline as well as the endline organisational self-assessments were done with respondents of the SPOs; in the endline assessment was aimed at a participation of at least 30% of the respondents present in the baseline assessment; for 6 SPOs the participation percentage range was 33%-85%; for 2 SPOs this range was 11%-25%. These 2 SPOs underwent profound organisational changes. The baseline and endline workshops have respectively taken place during the periods May-October 2012 and March - July 2014. The same questionnaire covering 5 Core Capabilities and connected indicators with prompting questions and space for open comments was used, in order to facilitate comparability between the baseline and endline outcomes.

Outcomes of the self assessment in the baseline were related to all elements of *Focus groups/group interviews* for making up a *Synthesis scoring form* that is the basis for the evaluation of each core capability and its underlying aspects. After processing the *Synthesis scoring form* a debriefing feedback meeting with each SPO has taken place to discuss the determining factors for the given scores. After this debriefing additional *self reporting* was requested from the respondents; they were asked to is-

⁵ Research Manual, Evaluation Study *Capacity development* of Southern partner organisations -Baseline - Uganda, Eric Kamphuis, Mollema/Kampala: June/July 2012
Research Manual, Evaluation Study *Capacity development* of Southern partner organisations - Uganda -Endline, Eric Kamphuis Mollema/Kampala: March /April 2014

sue their remarks/comments on the synthesis scoring form. Final scoring and related explanations were given by the evaluators and peer reviewed.

Outcomes in the endline were related to interview findings (with SPO staff, externals, and Head Offices). Then endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, reflecting changes in core capabilities and their underlying aspects over the period June 2012- June 2014, were qualified in terms of 'improved', 'stable', or 'worsened'. These qualifications were generated by the help of an Excel tool that was specially developed for this purpose; the tool generated endline scores per core capability and their underlying aspects, based on multiple choice answers on 64 questions; the other 18 questions regarded open requests for additional comments per different aspect/core capability and did not influence the scoring. The tool thus firstly determined endline scores per core capability and their underlying aspects and these scores were then related with the scores of the baseline study for getting the change qualifications⁶.

The change qualifications of the core capabilities and their underlying aspects were linked with an inventory of determining factors for these changes. This was done in workshop sessions with the SPOs and interviews; all change qualifications, determining factors and open comments provided in the questionnaire, were captured in workshop reports and interview reports. The workshop reports were reviewed in a special feedback meeting with each SPO end August 2014; subsequently the workshop report was peer reviewed, and served as input for the evaluator's final assessment.

Contribution analysis

For 3 out of the sample of 8 SPOs a more in-depth contribution analysis was carried out. It concerned the SPOs Save for Health Uganda (SHU), RWECO, and War Child Uganda Pader/Abim Offices. The organisational self/assessment and interviews/core group discussions were carried out in service of the contribution analysis and related triangulation on 2 aspects:

1. the contribution of CFA funding meant for the SPO's capacity to the actual development changes in the capacity of the SPO
2. the contribution of changes in the SPO capacity to SPO outcomes

In the analysis of the contribution of SPO capacity changes to SPO outcomes was focused:

- on changes in the Core capabilities To act and commit and To Adapt and self renew, and
- on changes in one or maximally two SPO outcome areas.

CFA's and SPO's have intentions with their policies and operations thereof: i.e. these organisations depart both from their Theory of Change (ToC), which postulates intended *development pathways* for realising their outcomes. In principle each ToC encompasses the aspects of: Programme/ project/initiative, Context, Ideas/theories, Process/sequence of change, and Reflection and decision making. These aspects will shortly addressed insofar they are relevant in the explanation of the intended outcomes realisation of the CFA and SPO.

⁶ The scores of the baseline study were in 2012 not made up by means of this tool; the final scores were then determined by putting up the Synthesis scores. For consistency sake the original 2012 scores were reviewed with the Excel tool, in order to get a comparison between the baseline and endline scores on the same basis; in a view cases baseline scores had to be adapted; these adaptations were in general marginal. Through the review of the baseline scores with the Excel tool, both baseline and endline scores are given with one decimal.

In the analysis of the factors behind observed changes of the outcome realisation of the 3 mentioned SPOs, one needs to depart from a notion of the sequence as is displayed in the next figure.

Results Chain scheme with Outcome Areas

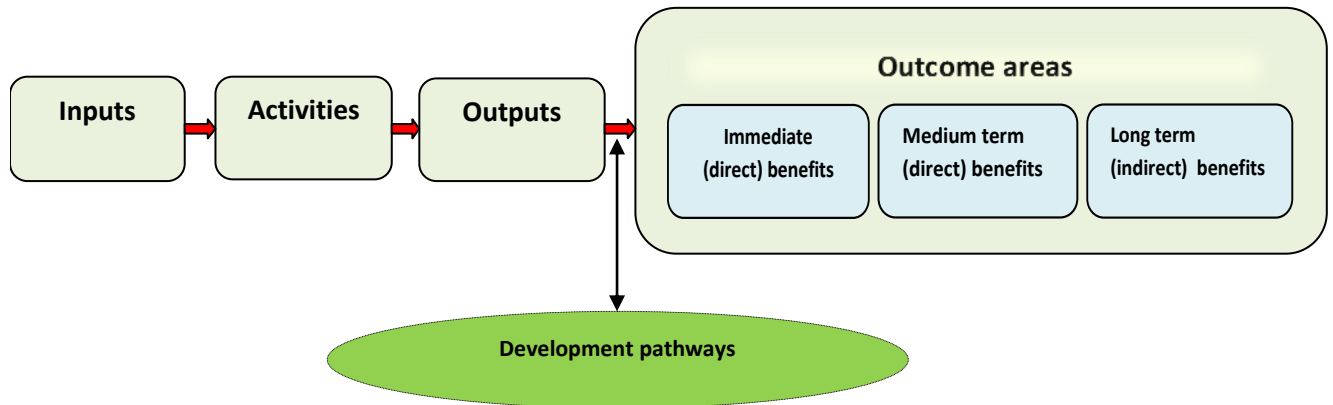


Figure 1 shows that in case of the MFS2 evaluation CFA's and SPO's both produce *Outputs* for 'their' beneficiaries (i.e.: technical trainings, health insurance, advisory/counselling services, extension services, educational services) by carrying out *Activities* (i.e.: organisation & delivery of mentioned services, and by using *Inputs* (i.e.: own income, funding from thirds, services from others, upgrading own personnel). In the provision of a plausible explanation for changes by analysing the contributions to observed changes, there is a main focus on the question how and what extend the *Outputs* contribute to the realisation of a range of intended *Outcomes*. Additionally, *Outcomes* can be realised *Immediately (maximally 1 year)*, at *Medium term (2-3 years)* or at *Longer term (4 years and beyond)*, depending on what was intended. Hence answering the questions how and to what extend *Outputs* do contribute to the realisation of intended *Outcomes* within different *Outcome Areas*.⁷

The three selected SPOs were: Rwenzori Consortium for Civic Competence (RWEKO), Save for Health Uganda (SHU), and War Child Holland Uganda Pader/Abim Offices. For RWEKO the outcome area: *The responsiveness at district level to citizen demands* was chosen; for SHU the outcome area was: *Improved access to quality health services with focus on the Project Increasing access to quality health care through health insurance*; and for War Child the outcome areas was: *War Child's Quality Education Improvement Programme (QEIP) and Community Based Child Protection Programme (CBCP)*.

Observation forms

A detailed chronology of study/research activities was recorded in Observation forms in the *Baseline* study as well as the *Endline* study. In the forms was also space for the researchers to make observa-

⁷ See ETC Research Manual, Evaluation Study *Capacity development* of Southern partner organisations - Uganda, Process Tracing, Eric Kamphuis, April 2014, p.p. 5/6. Please note that instead of Process Tracing this technical report speaks of **Contribution analysis** as a better alternative to describe the followed type of analysis.

tions on the research process, the collected data, or the cooperation extended by the SPOs, as well as 'their' related CFA.

Reasons for choice of mentioned methods

Organisational assessments regard essentially interactive processes between the evaluated organisations and the evaluators. Taking a baseline and an endline does not only concern the handling of measurement tools, but also the triangulation of collected findings in interviews/focus groups. The followed approach is thus a mixture of two perspectives. Firstly: the application of survey research and feedback, and secondly: the strong attention for people working in organisations that face changes. For that reason data gathering through questionnaires and self-assessment went hand in hand.

Respecting the two perspectives simultaneously means that research techniques like Difference-in-Differences are not applicable in this assessment framework. Factors influencing organisational development are complex and multidimensional and cannot be captured in the 5C research within a timeframe, geared to a more profound contribution analysis that was done in relation to the 8 SPOs in the sample.⁸

Organisational assessments combine different measuring and observation methods, as mentioned above with assessment based on expertise in the area of organisational development. Difference-in-Differences and Randomized Controlled Trial (randomized assignment) for example can hardly be matched with such combination.

The choice for the mentioned methods has implications for type of evidence the endline study can generate and consequently in what terms effectiveness of interventions can be qualified. The next table gives an overview of the 4 possible levels of evidence, the related parameters of evidence / types of research, and hence the qualifications of the effectiveness of interventions.

⁸ In 3 out of the 8 endline studies this contribution analysis was done, which is in line with the outcomes of the *Overview Discussion and Action Points, Workshop Joint MFS II Evaluations, Amsterdam, 26 and 27 February 2014, Prepared by Gerton Rongen – Synthesis team.*

The Evidence Ladder

Levels of evidence	Parameter of evidence	Types of research	Effectiveness of interventions
4. Causal	As in 1, 2, and 3, but there is now sound and substantial evidence that the outcome is caused by the intervention and/or clear evidence showing which ingredients of the intervention are responsible for the outcome.	<ul style="list-style-type: none"> • Randomised Control Trial • Repeated case studies (N=1 designs) 	Efficacious
3. Indicative	As in 1 and 2, but it has now been demonstrated that the intervention clearly leads to the desired outcomes (e.g. goals are attained, target problems decrease, competencies increase, clients are satisfied).	<ul style="list-style-type: none"> • Quasi-experimental studies • Theory of Change studies • Norm referenced approaches • Benchmark studies • Client satisfaction studies • Goal attainment studies • Quality assurance studies 	Functional
2. Theoretical	As in 1, but the intervention now has a plausible rationale (i.e. a program theory) to explain why it should work with whom	<ul style="list-style-type: none"> • Reviews • Meta-analysis • Expert knowledge studies 	Plausible
1. Descriptive	The essential elements of the intervention (e.g. goals, target group, methods and activities, requirements) have been made explicit	<ul style="list-style-type: none"> • Descriptive studies • Observation studies • Analysis of documents • Conduct of interviews 	Potential

The approach followed, including the contribution analysis, where applicable in the MFS2 evaluation regarding the Capacity development of Southern partner organisations, is mainly related to the evidence level 'theoretical'. The effectiveness of the interventions can the best be qualified as 'plausible'. The types of research related to the levels of evidence 1 and 2 (Descriptive and Theoretical) corresponds with the described earlier research approach.

The use of the 5 Core capabilities conceptual framework made it possible to compare baseline and endline scores of core capabilities and thus to reach to a certain extent the level of evidence 'indicative'. One should however realise that for the determination of the final scores and the qualifications of capability changes, interviews, workshops, observation studies, and core group discussions were vital. Time constraints made it not possible to carry out profound Theory of Change studies or client satisfaction studies. Hence the capacity development study can the best generate plausible explanations of the effectiveness of researched interventions. It appears doubtful whether the extra contribution analysis of the 3 selected SPOs fully justifies an evidence level 'indicative' and a qualification of the effectiveness of the interventions as 'functional'.

B. General data 8 sample SPOs 2012 - 2014

The next table summarises the SPO's in the 5C sample for Uganda on Orientation, Size, MFS2 support, Other sources and Network organisations for the period 2012 (Baseline) - 2014 (Endline).

<i>SPO</i>	<i>Orientation</i>	<i>Size</i>	<i>MFS2 Support</i>	<i>Other Sources</i>	<i>Network organisations</i>
Dodoto Agro Pastoral Development Organisation (DADO)	<i>Local, Regional</i> : Kaabong, Karamoja <i>International</i> : Sudan/ Uganda/ Kenya: peace & reconciliation cross-border peace & sports, domestic violence prevention; DADO Organisational Strategy 2014-2018 formulated	<i>2012</i> : 1 office; 25 founder members, 11 staff (incl. director) 7 volunteers; 4 in 5C baseline assessment <i>2014</i> : 1 office, 25 founder members, 9 staff (incl. director); 10 in 5C endline assessment	Freedom from Fear (PAX): € 68,670 (2011-2014); PAX' support within framework of its Human Security in the Borderlands Program; no special amounts earmarked for capacity development, except for support to financial administration	Multiple: Oxfam UK & VSF Belgium core funding; Open Society Institute (OSI); exact volume not known; larger than PAX' contribution	Local government, Seeds of Peace Africa (SOPA), Kotido Peace Initiative (KOPEIN), Human Security in the Borderlands partners, local communities in borderlands, young warriors, women groups, village elders
Forum for Kalongo Parish Women Associations (FOKAPAWA)	<i>Local</i> : Kalongo women/youth empowerment (Be in school, Stay in school, peace building, civil rights, psycho social support, domestic violence prevention Strategic Plan 2012-2014 formulated; no new strategic plan available	<i>2012</i> : 1 office, 5 board, 11 staff (incl. coordinator); 50 paid community volunteers; 5 in 5C baseline assessment <i>2014</i> : 1 office, 10 staff (incl. coordinator), 50 unpaid community volunteers; 5 in 5C endline assessment	Dutch Consortium for Rehabilitation (ZOA) disbursements : € 41,170 (2011-2014) (nb: intended support 6/2011-12/2012 was then € 118,638; appears not realised, but not clear); no earmarking of MFS2 funding for capacity project activities; financial data incomplete	2009 - 2013: Multiple: Norwegian Development Agency, Austrian Development Cooperation; Care International, Trocaire, exact volume not known; total is higher than ZOA funding; funding in 2014 and beyond uncertain	Local government, 'Roco Kwo' partners, UN Women, Uganda Women Network (UWONET), 70 Women groups, more than 100 Parent - Teacher Associations, more than 100 School Management Committees
Health Child	<i>Regional</i> : Jinja Mother & Child Health (MHC) care; Child protection (access to health services, nutrition, education) with income generation & ICT support for awareness raising/advocacy	<i>2012</i> : 1 office Kampala, 1 office Jinja, 5 Board 10 staff (majority in Jinja); 9 in 5C baseline assessment <i>2014</i> : 16 staff (2 in Jinja, 4 in Lira; extension to Lira and	Disbursements by Communities of Change Connect4Change (CORDAID): € 248,479 (MFS2: 01/10/2011-01/02/2014) (IICD): € 41,544 (MFS2:	Multiple: Bernard van Leer Foundation support 01/2011-02/2014 €125,938, Support Canadian Challenge Fund 10/2012-02/2014 €	Ministry of Health, Jinja, Wakiso, Lira and Apac district health offices, Health Communication Partners (HCP) (USAID & Johns Hopkins Bloomberg School of Public Health/Center for Com-

	Strategic Plan 2010-2014 formulated; no new strategic plan available	Apac districts; 8 in 5C endline assessment	01/10/2011-01/02/2014) Amount for capacity development unknown; disbursed IICD salary costs on MFS2 for support on capacity development to Health Child 2011/2014: € 50,458	69,642; support Text to Change and University of Carolina 01/2011-02/2014, but volume modest; MFS2 is most important funding	munication Programs); Global Health Bureau USAID, University of Carolina
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Coalition for Health Promotion and Social Development (HEPS Uganda)	<i>National:</i> Advocacy health laws, policies, interventions <i>Regional:</i> (Mbarara, Kyankwanzi, Kampala, Kawempe, Kamuli, Bugiri districts) Citizen empowerment in health consumer/provider relation Health consumer rights/ complaints. Third Strategic Plan 2011-2015 formulated	<i>2012:</i> 1 office Kampala 14 staff (incl director), 5 volunteers; 6 in 5C assessment <i>2014:</i> 1 office Kampala, 3 District offices in Lira, Mbarara, Pallisa; 25 staff (incl director); 2 volunteers GOAL Uganda; 10 in 5C endline assessment	People Unlimited 4.1 (HIVOS): realised disbursements € 145,00 (MFS2 2011 - 2014); Specific amount for capacity development unknown	Multiple: Research Triangle Park (RTI), Management Science for Health (MSH); DFID through GOAL, volume unknown but modest; MFS2 is most important; GOAL specially oriented on HEPS' capacity development	Part of national health right advocacy network; central in Coalition for Access to Essential Medicines (UCAEM), partnerships with AGHA, ACFODE, NAFOPHANU, AIDE; Medicines Transparency Alliance. Institute of Public Health, Makerere University
Save for Health Uganda (SHU)	<i>Regional :</i> 7 districts Luwero, Nakaseke, Nakasongola, Bushenyi Sheema, Masaka and Mubende: promotion quality health services, access to health care (reducing barriers to health care), promotion/ implementation insurance systems for maternal health Strategic Plan 2011-2016 formulated	<i>2012:</i> 1 head office (Kampala), 2 local offices (Luwero, Bushenyi), 6 board, 27 staff (incl. director); 9 in 5C baseline assessment <i>2014:</i> 1 head office (Kampala), 4 local offices (Luwero, Bushenyi, Mubende, Masaka), 6 board, 30 staff (incl. director); 9 in 5C endline assessment	Communities of Change (CORDAID: MFS2 commitment € 293,000 (2011-2014) support until end 2015 Amount for capacity development unknown	Multiple: Commitments 2011-2014: Brot für die Welt € 950,000; PSI € 200,00 MFS2 second important funding	Ministry of Health, District offices Luwero, Nakaseke, Nakasongola, Bushenyi Sheema, Masaka and Mubende; Uganda Community Uganda Community Based Health-Financing and Association (UCBHFA), Ugandan National Health Consumers' Organisation (UNCHO); Munno Mu Bulwadde Union of Schemes' Organisation (MBUSO), West Ankore Tweragurize Association (WATA) Union of

					Schemes, contracted health facilities
Rwenzori Consortium for Civic Competence (RWECO) (with 4 consortium partners: Karambi Action for Life Improvement - KALI, Good Hope Foundation for Rural Development- GHFRD, Human Rights Democracy Link Africa-RIDE Africa, Rwenzori Information Centres Network (RIC-NET)	Regional: 7 districts Kasese, Kabarole, Kyegegwa, Bundibugyo, Kyenjojo, Ntoroko, Kamwenge of Rwenzori area: enhance civil competence in Rwenzori area, advocacy citizens' participation in decision making, access to information, rule of law, public accountability; ICT for information sharing Strategic Plan 2011-2016 formulated	2012: 1 Coordination Unit Kasese 7 staff (incl. coordinator); 4 MFS2 funded staff per consortium member 5 in 5C baseline assessment 2014: 1 Coordination Unit Kasese 6 staff (incl. coordinator) 2 MFS2 funded staff per consortium member 10 in 5C endline assessment	Commitment from People Unlimited 4.1 (HIVOS): € 710,000 (MFS2 2011-2014); amount actually disbursed; Nb: HIVOS supported all 4 consortium partners before MFS2 start Amount for capacity development unknown	Multiple: HIVOS/EU/Oxfam commitment 2011-2014: € 99,000, ICCO Edukans: € 103,500; MFS2 most important funding	Governmental service organisations, 30 primary schools, 6 secondary schools, 2 primary teachers colleges in Kasese and Kabarole Districts, CABI-UK, Electronic Information for Libraries (EIFL), Citizens Election Watch (CEW-IT), Uganda Governance Monitoring Platform (UGMP), Makerere University

TWAVEZA Uganda	<i>International/national</i> : Kenya, Tanzania, Uganda: promoting, stimulating public debates and citizen driven change (UWAZI), basic education performance monitoring through household surveys and related policy discussions (UWAZI), brokering East African partnerships; Strategic Plan 2011-2014 formulated; no new strategic plan available	2012: 1 head office Dar es Salaam; 2 national offices Nairobi, Kampala; 30 staff total, 5 staff Uganda office (incl. coordinator); 5 (1 head office, 4 Uganda office) in 5C baseline assessment 2014: 1 head office Dar es Salaam; 2 national offices Nairobi, Kampala; 50 staff total, 10 staff Uganda office	People Unlimited 4.1 (HIVOS): € 3,707,600 (2011-2013) HIVOS states capacity development support given for 100%; HIVOS could not distinguish general support from capacity development support	Multiple: Over 2011-2013: DFID Tanzania €3,677,350, Hewlett Foundation € 2,400,000, SNV € 2,340,000, Irish Aid € 1,041,520, SIDA Tanzania € 6,625,600, and AJWS € 560,000 MFS2 second donor in	International research networks (MIT, AIID (Amsterdam Institute for International Development), ILPI (International Law and Policy Institute, Oslo), national religious, teachers organizations; contracted organisations like Uganda Radio Network, Raising voices, Track-FM; since 2013 less focus on strategic partnerships in areas of health, water and health; more
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		(incl. coordinator- 4 from TWaweza, 6 from UWAZI) 7 from Uganda office in 5C endline assessment		size	emphasis on partnerships with media organisations in Uganda; networks in Tanzania not only national, but also regional
War Child Holland Uganda Pader Office	<i>National/regional</i> : 11 districts: Gulu, Amuru, Nwoya, Kitgum, Lamwo, Pader Agago, Lira, Otuke, Alebtong, and Abim; child protection (Community Based Child Protection), improvement education (Quality Education Improvement Plan); psychosocial support (IDEAL methodology), child participation/rights (Children Creating Change); also targeted young people, teenage mothers, teenage fathers, and commercial sex workers. War Uganda worked from War Child Strategy 2015 formulated by War Child Holland; in 2013 decision taken to phase out from Uganda per 2016; phase out scenario outlined	<i>2012</i> : 1 head office; 3 field offices (Gulu, Pader, Lira) offices; 91 staff, Pader 10 staff; MT (Country Director, 3 Field Location Managers, managers HR, Operations & Programmes) 7 part of 5C assessment (3 head office, 2 Pader, 2 Lira offices) <i>2014</i> : 18 staff in Kampala (2), Lira (10), Gulu (6); Pader office to be closed	Conn@ct Now (War Child Holland without partners): € 3,268,704 (2011-2014)(on which for Pader, Abim and Lango programmes € 416,536) Child Helpline International is co-applicant with War Child; Free Press Unlimited and TNO receive MFS2 funds as contracted partners Amount for capacity development not known	Multiple: Total funding for entire War Child Organisation from <i>own fundraising</i> (gifts, donations, grants, legacies, 47% in 2013), <i>share by third parties</i> (Lotteries, UNICEF, CHF, 15% in 2013), and <i>Government grants</i> (Netherlands' Government, EU, ECHO, others, 38% in 2013)	War Child UK and War Child Canada; Dutch LEARN platform (Edukans, Fair Pen, ICCO & KiA, IICD, ICS, Oxfam-Novib, Red een Kind, Save the Children, SNV, Terre des Hommes, Woord en Daad and ZOA), Ugandan NGOs, CBOs in Lira, Gulu and Pader districts, i.e. local governmental bodies (district educational committees), primary schools, Parent Teacher Associations, School Management Committees

Previous table shows the huge diversity of the assessed organisations of the capacity development sample. DADO and FOKAPAWA work mostly locally with regional connections, with a broad orientation, with limited MFS2 budgets (below €100,000 during 2011-2014, with staff occupation of 9-10 in 1 office, mainly oriented on field based activities; staff numbers declined since 2012. Their funding base is fragile and their networks most local with outreach to national contacts.

Health Child, HEPS and SHU have a national and regional orientation; they work in different areas of health care with a combination of advocacy and field based activities, with MFS2 funding ranges between € 145,000 - € 350,000 during 2011-2014, all 3 with staff occupation of 15-30 in 3-4 offices for field based activities. They combine a regional orientation which is mainly focused on field work with a national orientation focused on advocacy and related networking. Their funding base depends much on MFS2, but also other (potential) relations relevant for funding exist. All three organisations do have international and national networks mainly geared to knowledge exchanges and research.

The three remaining organisations are very much differing from each other. RWECO and TWAVEZA both work towards strengthening citizens' influence on decision making, accountability of public services and civil rights, but the first has a distinct regional focus, and sometimes an issue based national focus, whereas the other a national and international. Their size (respectively 7 and 50 staff), as well as MFS2 budgets differ also considerably (€ 300,000 and € 3,700,000 during 2011-2014) from each other. RWECO's funding base depends much on MFS2, whereas TWAVEZA has substantial support from various donors and has clear difficulties to spend these funds according to its planning. Both organisations have international networks, but also differ here from each other: one is focused on mobilising international research capacity and funding opportunities, whereas the other is more modestly oriented on knowledge exchanges in specific areas. The national networks mainly serve in both cases the achievement of their goals and concern public or private organisations that are either involved in or contracted for certain activities.

War Child Holland Uganda, Pader Office is part of a bigger whole: War Child Holland Uganda. The organisation has a regional focus and is oriented on child protection and the different aspects thereof. The size of the entire organisation was the largest in 2012 (91 staff), but due to War Child's Holland decision in 2013 to phase out from Uganda per 2016, staff size declined to 18 staff in 2014 in 3 offices Gulu, Kampala, and Lira; the Pader office will be closed in 2015. The budget of the MFS2 programme for Conn@ctNow for the Pader, Abim and Lango programmes amounts to € 416,536 for 2011-2014. War Child Pader takes advantage of international donor funding and international networks the War Child Holland organisation entertains. Its knowledge enrichment and continuity very much depend on the strong mechanisms for knowledge exchange and funds acquisition.

C. Summary of findings

The next summary contains scorings, recommendations and additional tables in case of contribution analysis.

1. *Key features project*: Main elements of CFA capacity development support to SPO
2. *5C Assessment*: 5C assessment per SPO, out the sample of 8 SPO's. A score per each core capability is given, which is based on the evaluator's scoring using 33 indicators.⁹ The scores of all core capabilities result in the overall capacity score for each SPO.
3. *CFA's targeting capacity development of the SPO*: For each SPO the CFA's targeting of each core capability is rated: 1 stands for not targeted, 5 for intensively targeted.
4. *Assessment scores of the design of the project under the implementation of the SPO*: Scoring on a scale 1 -10 on the statements: The project was well designed, The project was implemented as designed, The project reached all its objectives.
5. *Recommendations*, taking the conclusions of the 5C assessment into account
6. *Theory of Change and Results Chain* tables: In case contribution analysis (tracing) was done.

The next overview gives the findings on the capacity development of all 8 sample SPOs. Data were collected during the endline study following the approach described in Chapter A . The comparison between baseline and endline scores is given at core capabilities level. Final change qualifications, set by the evaluator, take into account what emerged in workshops, interviews, focus groups and the final feedback meeting with the SPO.

C.1 SPO: Dodoth Agro Pastoral Development Organisation (DADO) - CFA: Freedom from Fear (PAX)

1. Key features project

PAX' support to DADO covers a part of DADO's entire spectrum of activities. The support focuses on a series of interventions mainly within its Human Security in the Borderlands program and its preceding peace brokering and human rights activities. Within this entire range of activities capacity development has a modest place, hence PAX' support cannot be considered as a distinct capacity development project. It is better to refer to certain timely interventions that touch upon capacity development i.e. training in Monitoring, Documenting and Reporting (MDR), TOT in human rights and facilitation (ToT) and in addition support to DADO's financial administration. These interventions aims at serving the improvement of a part of DADO's operations, but cannot be considered as such as a project on its own.

2. 5C assessment

	Baseline score	Endline score	Final change qualifications
1. Act and commit	2.9	3.2	Improved
2. Adapt and self-renew	2.6	3.3	Improved
3. Deliver on development objectives	2.6	3.2	Improved

⁹ Research Manual, Evaluation Study *Capacity development* of Southern partner organisations -Baseline - Uganda, Eric Kamphuis, Mollema/Kampala: June/July 2012
Research Manual, Evaluation Study *Capacity development* of Southern partner organisations - Uganda -Endline, Eric Kamphuis

4. Relate to external stakeholders	3.5	3.5	Stable
5. Achieve coherence	3.4	3.5	Improved

DADO has made important steps in its capacity development. These important steps are especially reflected in the changes of the core capabilities 1, 2, and 3. In the baseline report was indicated that PAX has targeted these capabilities clearly in 2012. PAX was then also focused on Core capability 4; for this core capability the endline did not show the same change as was the case with the other three. A clear explanation for this is not easy to give. Certainly does count that the establishment of strong interactions between different, and often antagonising, communities (a central issue in the Core capability To deliver on development objectives) was complicated. At the same time were donor relationships and relations with governmental bodies already fairly well established (important elements in the Core capability To relate): here was relatively less to 'gain'. PAX' efforts to have DADO more engaged in networks, alliances and collaborative efforts were successful. Core capability 5 improved slightly but steadily: now mechanisms for coherence are not only existing, but also actively used.

3. PAX' targeting core capabilities DADO

Baseline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	3
Human Resources development training (jointly with Amnesty International)	
2. Adapt and self-renew	4
Exposure visits (Pristine, Mitrovica), human rights trainings	
3. Deliver on development objectives	5
Coaching on delivery, support in coordination activities and to accounting	
4. Relate to external stakeholders	4
Support to establishment cross border and regional relations	
5. Achieve coherence	1
No targeted support	

Endline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	5
Support to DADO's financial accounting	
2. Adapt and self-renew	4
Training Human rights, advocacy/campaigning, Monitoring, Documenting & Reporting (MDR)	
3. Deliver on development objectives	5
Coaching on delivery, and support to coordination activities	
4. Relate to external stakeholders	4
Support to establishment cross border and regional relations	
5. Achieve coherence	1
No targeted support	

PAX' orientation to DADO's capacity development at the time of the endline does show only a change in attention for core capability 1, because of PAX' intensified attention to DADO's financial accounting.

4. Assessment scores of the design of the project under the implementation of DADO

Changes in DADO's capacity since June 2012 can be attributed to PAX' interventions thereafter. PAX' support became less fragmented and more coherently structured over time when the Human Security in the Borderlands program was formulated and put in action in 2013. PAX did not specifically focus on DADO's capacity development, but was more oriented on program support. When program implementation was hampered by lacking capacities within DADO, specific capacity development support was provided (financial accounting, MDR - Monitoring, Documenting and Reporting). PAX supported DADO with small amounts in comparison with other donors, but its support was effective, due to its focus. PAX' interventions cannot be seen as a separate project; better is it to refer to programmatic interventions, which fall since 2013 in the Human Security in the Borderlands program.

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	7

5. Recommendations

PAX is recommended to continue its involvement in DADO within the framework of its Human Security in the Borderlands program in the way that was done thus far, i.e. program oriented and incidentally focused on punctual capacity development issues.

C.2 SPO: Forum for Kalongo Parish Women Associations (FOKAPAWA) - CFA: Dutch Consortium for Rehabilitation (ZOA)

1. Key features project

ZOA's support to FOKAPAWA with MFS2 funds covers one strategic goal that the organisation covers i.e. education. ZOA and FOKAPAWA consider all strategic goals i.e. equal rights, agricultural practices and savings, psycho social problems, gender based violence, and peace building as a whole. ZOA moved in 2012 from hardware-focused to training/software-focused skills; the capacity building of Parent Teacher Associations and School Management Committees. ZOA supports capacity development for improving FOKAPAWA's operations as partner. ZOA Uganda has developed a capacity development plan for FOKAPAWA, covering the period 2014-2015 by using the 5C framework. ZOA conducts 5C assessments. ZOA's capacity development focus in 2014 regarded project reporting, monitoring & evaluation, project implementation, and financial management.

2. 5C assessment

	Baseline score	Endline score	Final change qualifications
1. Act and commit	3.1	3.1	Stable
2. Adapt and self-renew	3.0	2.9	Stable
3. Deliver on development objectives	2.8	3.1	Improved
4. Relate to external stakeholders	3.3	3.6	Improved
5. Achieve coherence	3.3	3.4	Stable
<p>The development of Core capability 1 was slow, due to the long time it took to have FOKAPAWA's Board of Directors in place; before roles of board members vis-à-vis the organisation were unclear. There were issues in financial management; ZOA considered in general the organisation's accountability a challenge.</p> <p>Core capability 2 did not show change, which is attributed to the organisation's lack of budget for specialised M&E skills for the organisation. This situation worsened with the reduction in the program staff per 2014.</p> <p>The change in Core capability 3 looks the most pronounced. The expansion of FOKAWAPA's General Assembly from 225 groups in 2 sub-counties in Agago district in 2012, into 450 groups in 10 sub counties and 3 urban councils: Kalong, Agago and Paton in 2014 meant establishment of extended basis for its target groups interface and the goal focus of its operations.</p> <p>Core capability 4 improved, due to the strong reputation of FOKAPAWA's organisation in Agago District was clearly demonstrated by the assignment the organisation got to coordinate the UN Women's Program the Civil Society organizations within the district.</p> <p>Core capability 5 remained stable. This can be attributed to ZOA's increased emphasis on upgrading FOKAPAWA's existing internal rules & regulations.</p>			

3. ZOA's targeting core capabilities FOKAPAWA

Baseline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	4
Training in and assistance to proposal writing resulting in successful proposal	
2. Adapt and self-renew	3
Joint M&E with ZOA; gap analysis with focus on effectiveness and efficiency	
3. Deliver on development objectives	3
Funding 2 project officers and frequent coaching by ZOA	
4. Relate to external stakeholders	2
FOKAPAWA established net works its self; some support ZOA	
5. Achieve coherence	3
ZOA supported completion manuals on Human resources, Finances, and Procurement; also Assets register put up	

Endline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	5
Training / assistance to governance structure, financial /administrative management, log frame development, fundraising & team building	

2. Adapt and self-renew	4
Trainings on M&E, reporting & learning, and DRC monitoring protocol	
3. Deliver on development objectives	3
Frequent coaching by ZOA	
4. Relate to external stakeholders	2
Some support to networking, but FOKAPAWA established networks its self	
5. Achieve coherence	1
No further specific support	

The focus on the Core capabilities 1, 2, and 3 was intensified/maintained over the period June 2012 - June 2014. In the Capacity Development Plan 2014-2015 for FOKAPAWA Core Capability 1 gets most attention by trainings geared to the organisation's governance structure, financial / administrative management, fundraising and networking, and team building, followed by attention to Core Capability 2 by trainings on M&E, and reporting & learning, and trainings on reporting, and on monitoring protocol of the Dutch Consortium for Rehabilitation. The previous tables displays ZOA's shifts in focus on FOKAPAWA's capacity development at the time of the endline.

4. Assessment scores of the design of the project under the implementation of FOKAPAWA

ZOA's interventions to FOKAPAWA's capacity development cannot be seen as a separate project; better is it to refer to programmatic interventions, which fall since 2013 under ZOA's support to education and to ZOA's recent (2014) more focused capacity development support: ZOA's specific support on capacity development was then increasingly better focused, notably since 2014. Financial data are lacking to assess the relative importance of MFS2 funding influencing FOKAPAWA's capacity development. The next table gives assessment scores on 3 statements: The project was well designed, The project was implemented as designed, and The project reached all its objectives. Based on the lack of MFS2 financial data no scores can be given.

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	n.a.
The project was implemented as designed	n.a.
The project reached all its objectives	n.a.

5. Recommendations

ZOA is recommended to continue its involvement in FOKAPAWA's capacity development, and is additionally recommended to seek how it can complement to the capacity development efforts of the other development partners (government, other donors, other CSO's).

C.3 SPO: Health Child - CFA: Connect4Change/Communities of Change (CORDAID-IICD)

1. Key features project

CORDAID's support to Health Child within MFS2 relates mainly to its Maternal and Child Health (MCH) program activities; within this program CORDAID provides capacity development support. IICD's support was, besides specifically being targeted at ICT, also oriented on capacity development. This support was hands on. Hence CFA's activities are partially oriented on Health Child's own capacity development. Over the period June 2012-2014 the attention for capacity development became less intensive, less specific, and more ad-hoc. CORDAID's support to capacity development regards project management (feedback on proposals and reports, strategic advice, field visits, programme development) and the management of project funds (mainly concentrated on project interventions and staff salary). IICD took care of hands-on capacity development during 2011-2014.

2. 5C assessment

	Baseline score	Endline score	Final change qualifications
1. Act and commit	3.4	3.6	Improved
2. Adapt and self-renew	3.3	3.5	Stable
3. Deliver on development objectives	3.5	3.5	Stable
4. Relate to external stakeholders	3.6	3.9	Improved
5. Achieve coherence	3.7	3.8	Stable

Progress in Core capability 1 is related to effects of capacity development efforts by CORDAID / IICD in 2012 -2014. Capacity development was given attention along with the MFS2 Connect4Change (CORDAID / IICD) funded activities for the MCH program. Health Child's staff personnel was enlarged; capacity improved through this program. Also complementary ICT capacity was built through funding / interventions by IICD for dissemination/awareness raising on MCH. IICD / CORDAID contributed to strengthening Health Child's organisation: its strategic planning, strategic master budget and accounting system. CORDAID focused on MCH program design and execution; IICD's focus hands-on.

In Core capabilities 2 and 3 other funding agencies (Non MFS2) play their roles: Bernard van Leer Foundation, the University of Carolina and Canadian Grand Challenge were important. The change in Core capability 4 showed overall improvement, because engagement in national networks became stronger, engagement with target groups remained high, and improvement was reached in the teambuilding within the organisation. All improvements were realised on the organisation's own merits and sometimes with the help of CORDAID / IICD. Core capability 5 remained firmly stable; internal rules & regulations were updated; for seeking synergies room for improvement. CORDAID / IICD's involvement was on incidental basis.

3. CORDAID/IICD's targeting core capabilities Health Child

Baseline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	3
Training trajectory financial management (CORDAID), partial core funding (CORDAID/IICD); on the job coaching/advising, resource mobilisation (IICD)	
2. Adapt and self-renew	3
M&E, data entry trainings, strategic advice in field visits (CORDAID); digital M&E, knowledge sharing, learning, action research, ICT4D (IICD)	
3. Deliver on development objectives	4
Funding pilots, evaluation management child illnesses/health of young mother (CORDAID); integration ICT, implementation planning (IICD)	
4. Relate to external stakeholders	4
Partial core funding for networking (CORDAID)	
5. Achieve coherence	2
Not special extra attention	

Endline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	4
Relation board - Health Child team, specific human resources, financial management (CORDAID), on the job coaching/advising, resource mobilisation (IICD)	
2. Adapt and self-renew	3
M&E, strategic advices in field visits (CORDAID), learning, knowledge sharing, action research, ICT4D (IICD)	
3. Deliver on development objectives	2
General feedback on implementation (CORDAID), implementation planning (IICD)	
4. Relate to external stakeholders	2
CORDAID support to networking during field visits	
5. Achieve coherence	2
General feedback on organisational procedures (CORDAID, IICD)	

Gradual shift CORDAID / IICD's attention for Core capability to Core capability 4 to Core capability 1 was due to more ad-hoc and hands-on capacity development support, based on observed needs in CORAID / IICD's during regular project visits. CORAID / IICD's way of addressing Core capability 2 remained the same. Other core capabilities either did not get extra CORDAID / IICD MFS2 funded attention, because either other donors provided more support (Core capability 2), or support was less needed (Core capabilities 3, 4, 5).

4. Assessment scores of the design of the project under the implementation of Health Child

CORDAID IICD's interventions cannot be considered as a separate project, but more to a set of pragmatic capacity development oriented actions based on clear organisational needs. The assessment of the project design takes this approach to the capacity development to Health Child into account.

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	8
The project was implemented as designed	8
The project reached all its objectives	7

5. Recommendations

CORDAID / IICD are recommended to continue its involvement in Health Child also beyond the MFS2 program funding with program funding, but then on a more modest level. In case Health Child succeeds in diversifying its donor base, CORDAID and IICD are then recommended to phase out and to confine itself to punctual support. This should not necessarily entail support to further capacity development.

C.4 SPO: Coalition for Health Promotion and Social Development (HEPS Uganda) - CFA: People Unlimited 4.1 (HIVOS)

1. Key features project

HIVOS' support to HEPS with MFS2 funds relates mainly to the Health Policy Advocacy (HPA) Program, one of the three pillars of the Strategic Plan 2011-2015. HIVOS supported from 2010 onwards HEPS in the project Promoting increased access to HIV/AIDS treatment among the poor and vulnerable people in Uganda (HIV/AIDS treatment campaign) under the Uganda Coalition for Access to Essential Medicines (UCAEM); HIVOS continued this project support in 2011 and in 2012 budget neutrally at a slower pace. HIVOS' support to UCAEM through HEPS got a renewed basis with the start of the project *Contributing to the Reduction of New HIV Infections (2013-15)* over the period July 2013 - November 2015, which entirely funded from MFS2. The project addresses specifically new HIV infections, which is in view of the 2013 reporting on MDG achievements in Uganda, relevant given the observed reversed spread of HIV/AIDS in the country. HIVOS did not specifically target the HEPS' capacity development, as this was mainly covered by the NGO GOAL. HIVOS capacity development support to HEPS, as an activity on its own, has a minor place.

2. 5C Assessment

	Baseline score	Endline score	Final change qualifications
1. Act and commit	3.2	3.3	Improved
2. Adapt and self-renew	2,6	2.9	Improved
3. Deliver on development objectives	2.8	2.7	Stable
4. Relate to external stakeholders	3.7	3.7	Stable
5. Achieve coherence	3.7	3.5	Stable

The positive change in core capabilities 1 and 2 look really present; for core capability 3 the picture is mixed under its general qualification of Stable. The changes in the core capabilities 1, 2 and 3 could increasingly be attributed to GOAL's support and related interventions. The score for core capability 4 looks realistic, as the organisation continued its practice in attracting new partnerships and also to increase its number of members from 33 (2012) to

40 (2014). The income from its membership remained however small, as compared to incomes from donor funding. The change in core capability 4 was mainly the result of HEPS' own efforts. HIVOS' support remained, but had even a lesser focus on capacity development than before. Its contribution has a clear focus on HEPS' involvement in UCAEM's secretariat, with now an explicit emphasis on the reduction of new HIV Infections. Regarding Core capability 5: especially in the course of the 2nd half of 2013 and 2014 HEPS' coherence remained stable, but with clear conditions for further improvement

3. HIVOS' targeting core capabilities HEPS

Baseline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	3
Improvement fund raising / diversification	
2. Adapt and self-renew	3
M&E quality and report writing improvement	
3. Deliver on development objectives	3
Social media training	
4. Relate to external stakeholders	2
Communication and networking capacity building	
5. Achieve coherence	2
General support through program officer Nairobi	

HIVOS' focus on all core capabilities appears to be not drastically changed over the period June 2012 - June 2014. The HIVOS' funded project under UCAEM continued, as was the case in the previous years. The focus on all core capabilities was not intensive and was always in service of the implementation of project activities. This is also confirmed in HIVOS' periodic internal Capacity Assessments, done twice in 2013; in these assessments was indicated that no specific attention to HEPS' core capabilities was given in HIVOS' support. GOAL was in 2013 very much focused on HEPS' capacity development: the organisation issued a capacity development plan, in which the areas Human Resources, Finance, Governance, Program development and delivery, Sustainability, Service development and delivery, and M&E were included.

Endline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	2
Improvement fund raising / diversification	
2. Adapt and self-renew	2
M&E quality and report writing improvement	
3. Deliver on development objectives	3
Social media training	
4. Relate to external stakeholders	2
Communication and networking capacity building	
5. Achieve coherence	2
General support through program officer Nairobi	

4. Assessment scores of the design of the project under the implementation of HEPS

Changes in HEPS' capacity since June 2012 can only be attributed very partially to HIVOS' interventions thereafter. HIVOS' capacity development support was not structurally present, especially since mid-2013. HIVOS explicitly focused on HEPS' involvement in the functioning of the secretariat of UCAEM. It is not clear what amount from HIVOS was spent on capacity development during the period June 2012-2014. As HIVOS did not specifically design an intervention for HEPS' capacity development, and given GOAL's role in HEPS' capacity development, an assessment along the 3 statements, that concerns only HIVOS' support, cannot be given.

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	n.a.
The project was implemented as designed	n.a.
The project reached all its objectives	n.a.

5. Recommendations

HIVOS' current approach can be maintained, under the condition that possible capacity development interventions complement the contributions by GOAL. This requires clear exchanges between HEPS, HIVOS and GOAL on capacity development issues at hand.

C.5 SPO: Rwenzori Consortium for Civic Competence (RWECO) - CFA: People Unlimited 4.1 (HIVOS)

1. Key features project

HIVOS has supported RWECO over the period 2011-2014 with the project *Enhancing civic competence on Social Accountability in the Rwenzori Region*. HIVOS' support to RWECO's capacity development was mainly geared to Enhancing the capacity of RWECO Coordination Unit (CU) to facilitate and to conduct social accountability monitoring in Rwenzori region. The support concerns core funding (i.e. salaries, office costs, travel costs for exposure visits, costs related to development of code of conduct, development of tools, documentation best practices, and external consultancy). Financially HIVOS' support takes for this about 23% of the entire HIVOS funding to RWECO CU, i.e. € 163,000 over the period 2011-2014.

2. 5C assessment

	Baseline score	Endline score	Final change qualifications
1. Act and commit	3.5	3.5	Stable
2. Adapt and self-renew	3.3	3.4	Stable
3. Deliver on development objectives	3.1	3.2	Stable
4. Relate to external stakeholders	3.7	3.8	Stable
5. Achieve coherence	3.8	3.7	Stable
Core capabilities 1 and 2 developed positively, but no drastic changes occurred. RWECO CU was well			

established and consolidating itself helping the consortium partners to become better equipped for their activities. Regarding the other core capabilities is concluded that the baseline levels were maintained. Hence RWECO succeeded in the period June 2012 - June 2014 to consistently maintain its organisational capabilities and regularly improve within its core capabilities. With the upcoming phasing-out of HIVOS MFS2 funding, RWECO may face a big challenge to continue at this level. HIVOS' approach towards RWECO has from 2012 onwards not been essentially changed in its main contribution to the project *Enhancing civic competence on Social Accountability in the Rwenzori Region*. Through this project core funding is mainly focused on to the Core capabilities 1 and 3.

3. HIVOS' targeting core capabilities HEPS

Baseline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	4
Core funding of salaries (focus expressed by HIVOS in the baseline)	
2. Adapt and self-renew	3
Monitoring, project results documentation trainings	
3. Deliver on development objectives	4
Salary support for strengthening capability to deliver (focus expressed by HIVOS in the baseline)	
4. Relate to external stakeholders	3
General support by core funding	
5. Achieve coherence	3
General support by core funding	

RWECO CU itself remained strong in pursuing its own capacity development. The focus on the core capabilities 1 and 3 was more intensive than on the other three, where the implementation of the project stood central. Support declined to core capabilities 1 and 3 in 2014, due to finalisation project *Enhancing civic competence*. HIVOS periodic internal Capacity Assessments have taken place trice in 2011, 2013, and in 2014; in these assessments was clearly indicated that general attention to RWECO's core capabilities was given in HIVOS' support during 3 visits. No special budgetary provisions, besides the project *Enhancing civic competence on Social Accountability in the Rwenzori Region*, were made for capacity development.

Endline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	3
Continued core funding of salaries in organisation, but in 2014 lower	
2. Adapt and self-renew	2
Monitoring, project results documentation in shape; less attention from HIVOS	
3. Deliver on development objectives	3
Salary support field workers for strengthening capability to deliver	
4. Relate to external stakeholders	2
General support by core funding	
5. Achieve coherence	2
General support by core funding	

4. Assessment scores of the design of the project under the implementation of RWECO

RWECO has support of a limited number of donors, but HIVOS was from the outset of RWECO's existence essential in its development as the most prominent donor. Within this general framework HIVOS's main focus was on the Core capabilities 1 and 3 and to a lesser extent on Core capability 2. This focus was not specific, as most of the support regarded core funding to RWECO CU and the consortium partners. HIVOS' contribution was defined as a separate project *Enhancing civic competence on Social Accountability in the Rwenzori Region*.

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	7

5. Recommendations

If HIVOS decides to continue its support to RWECO it is recommended that:

- *RWECO investigates the effectiveness of its outputs on outcomes more profoundly than thus far, by firstly defining more exactly outcomes in measurable terms, and by assessing whether the current consortium setup still can serve its ambitions in the same as it did*
- *HIVOS investigates co-funding opportunities for continuing core funding, together with assessing to what extent RWECO can develop own earning capacity for partial cost coverage.*

6. Tables Theory of Change and Results Chain RWECO (Contribution analysis)

Contribution analysis regarding RWECO's capacity development in relation to its intended program outputs/ outcomes are shown in the next tables. Two types of contributions are described in the Results chain scheme:

1. the contribution of HIVOS funding to the actual changes in RWECO's core capabilities To act & commit and To adapt & self renew
2. the contribution of these changes in RWECO's capacity to its realised outcomes in the area of *the responsiveness at district level to citizen demands*

The next tables give the relevant elements of the Theory of Change of HIVOS and that of RWECO that underlie the Results chain HIVOS - RWECO from inputs to outcomes.

The results chain is generally in accordance with observations and interviews in the field; the results chain is later further related to provided written reporting by RWECO CU and activity publications. However no evidence could be found that E-Societies are contributing to civic competence in regard to demanding services from the districts. Rather the E-Societies were appreciated, because of their facilities (internet, printing, photocopying), their IT training and their IT support to district officers. Interviewed monitors and Community Process Facilitators said not to make use of the facilities to access, nor to disseminate information through the centres.

Overview relevant Theory of Change elements HIVOS-RWECO

Elements	HIVOS	RWECO
Ideas/theories on change	National civil society organisations contribute to citizens empowerment	Conscious citizens ask for adequate service delivery government
Programme/project/initiative seeking changes	Enabling RWECO's core operations and its capacity development	Information dissemination on governmental services / advocacy on government's accountability on quality of these services
Pro-process/sequence of change	Core funding RWECO CU and consortium partners, active partner in RWECO consortium	Strategic Plan 2012-2016: <ul style="list-style-type: none"> – To enhance civic competence, social accountability; – To coordinate capacity building of RWECO members; – To be engaged in advocacy activities on major policy issues; – To mobilize resources and enhance internal systems for the RWECO members
Reflection and decision making	Periodic capacity assessments, coaching	Involvement in preparation governmental decisions affecting poor, school children, M&E outputs / outcomes and related consortium decisions
Context	Declining financial means for development funding in the Netherlands	Political environment tense for NGOs/CSO activists Positive responsive regional authorities (MPs) Livelihoods affected by floods and draughts

Results chain for RWECO's outcome area: Responsiveness at district level to citizen demands

Inputs of HIVOS	RWECO's Activities	RWECO's Outputs	RWECO's Outcome areas	
			Immediate (direct) benefits	Medium term (direct) benefits
<p>Finance: 2012 & 2013 minimally Euro 250,000 / year for RWECO CO and 4 consortium partners</p> <p>Other support:</p> <ul style="list-style-type: none"> Supervision visits by HIVOS staff (3 visits in two years) by regional director Meeting to inform about and prepare for upcoming changes and exit Regular backstopping support by Skype, email, and phone. 	<p>Capacity to act & commit</p> <ul style="list-style-type: none"> Dialogue meetings with district leaders and monitors <ul style="list-style-type: none"> MoUs with districts Petitions, etc Support to district budget analysis Training of Community Process Facilitators (CPF) and monitors Radio + TV programs for sensitization and raising awareness Strengthening E-Societies <ul style="list-style-type: none"> Provision of internet & equipment Funding of 1 staff per district for about 9 months Training on IT Online D-groups and blogs Rural information centres <ul style="list-style-type: none"> Provision and dissemination of info Community sensitization <p>Capacity to adapt & self-renew</p> <ul style="list-style-type: none"> Joint quarterly meetings for planning and reflection Joint monitoring with districts Public expenditure tracking M&E position (noticed need in 2012) 	<ul style="list-style-type: none"> One meeting organised per year in 7 districts Report on budget analysis + recommendations shared and discussed in 7 districts 86 CPF + 840 monitors trained 3 radio stations with weekly programs on the radio; one TV station (about 3 shows on civic competence) 7 E-Societies operational (2 in 2012) 16 rural information centres (4 in 2012) <ul style="list-style-type: none"> Better reporting Changed approach from confronting to dialogue 	<ul style="list-style-type: none"> 220 schools, 80 agricultural programs, 85 water points and 75 health units monitored Establishment district integrity forums to combat corruption More awareness on roles/ responsibilities of the public in government programs/ projects E- Societies within district structure when RICNET phased out funding for staff (two district have employed staff to continue other centres have applied) <ul style="list-style-type: none"> Better reporting Changed approach from confronting to dialogue 	<p>Increased responsiveness of districts on citizens demands:</p> <p>Examples:</p> <ul style="list-style-type: none"> Special needs education in Kamwenge district (many examples provided- see reports on meetings with monitors) Recovery of misused government funds in 2013

C. 6 SPO: Save for Health Uganda (SHU) - CFA: Communities of Change (CORDAID)

1. Key features project

CORDAID has supported SHU over the period July 2012 - June 2014 with the *Project Reducing Delays to Maternal and Child Health Care Services - Uganda* and the *Project Increasing access to quality health care through health insurance*. CORDAID's support to SHU's capacity development is mainly geared to Core capability 3 within these projects, whereas the other four core capabilities are less accentuated. CORDAID's realised financial support under these projects over the period 2012 - 2013 amounts to € 196,517, of which about 5% is spent on capacity development (i.e. € 9,826). Besides capacity development support, stemming from project implementation does CORDAID supports SHU's capacity development through planned field visits for project monitoring and feedback on SHU's performance lobbying and linking organisations. But one cannot speak of capacity development as a distinct project that stands on its own.

2. 5C assessment

	Baseline score	Endline score	Final change qualifications
1. Act and commit	3.4	3.5	Stable
2. Adapt and self-renew	3.1	3.5	Improved
3. Deliver on development objectives	3.2	3.1	Stable
4. Relate to external stakeholders	3.6	3.7	Improved
5. Achieve coherence	3.7	3.8	Stable

The Core capabilities 2 and 4 have shown improvements. The shape of SHU's capacity was already solid at the time of the baseline; that on top of that improvements were realised, is remarkable: such kind 'last mile' improvements are generally more difficult to achieve than when starting from scratch. SHU has strong internal orientation on strategic use of M&E and is open for strategic learning; SHU has gained good reputation in promoting and building Community Health Financing schemes and could extend its networks.

Core capabilities 1 and 5 coherence remained firmly (i.e. at high level) stable. Core capability 3 remained stable as well, but worsened on the level of work efficiency. SHU claims with respect to efficiency measuring that behavioural changes are difficult to quantify and thus that input/output ratios are difficult to use. Discussion on this aspect stimulated SHU to look into the efficiency of its own organisation. SHU has taken action to address its financial sustainability; this is necessary with large funding phasing out.

3. CORDAID's targeting core capabilities SHU

Baseline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	3
General support by funding; organisation did not ask for specific support	
2. Adapt and self-renew	3
General support by funding; organisation asks focused M&E support	
3. Deliver on development objectives	4
Improvement promotion of community health insurance schemes in sub-counties	

4. Relate to external stakeholders	3
General support by funding; organisation asks for skills in lobbying and networking	
5. Achieve coherence	3
General support by funding; SHU asks for capacity to anticipate women's health & empowerment issues	

CORDAID's approach towards SHU has from 2012 onwards not been essentially changed in its main contribution to the projects it funded. Its projects provide firstly some core funding (i.e. salaries, benefits), plus coordination costs (office / travel / governance costs, support supervision) and secondly coordination costs; this means a main focus on Core capability 3. The focus on the other core capabilities decreased.

Endline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	2
Support by project funding; organisation did not ask for specific support	
2. Adapt and self-renew	2
General support by funding; support given by CORDAID through feedback on M&E	
3. Deliver on development objectives	5
Strong project support focus on expansion of community health insurance schemes in sub-counties	
4. Relate to external stakeholders	2
General support by funding; some support to CBHFA related lobbying - networking	
5. Achieve coherence	2
Support by project funding; organisation did not express special support	

4. Assessment scores of the design of the project under the implementation of SHU

CORDAID's support concerned essentially to the projects *Reducing Delays to Maternal and Child Health Care Services - Uganda (158/10146, July 2009 - December 2012)*, and the *Maternal, infant and Reproductive Health insurance project(108736, January 2013 - December 2015)*. The close cooperation with CORDAID contributed to the changes in SHU's capacity since June 2012. Within this cooperation, through SHU's project implementation, improvements of the core capabilities 2 and 4 have taken place, and partial improvements within the core capabilities 1 and 3. CORDAID's support to SHU's capacity development is mainly geared to enhancing the capacity of SHU in function of the implementation of mentioned projects, and cannot be considered as a separate project.

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	6

5. Recommendations

If CORDAID decides to continue its support to SHU it is recommended that:

- CORDAID jointly with SHU investigates new models/partners for funds generation through Corporate Organisations (under Corporate Social Responsibility), private Banks/Insurance Companies, and Governmental funding through the proposed National Health Insurance Bill
- In case these alternatives take their time beyond MFS2, CORDAID and SHU consider with the other now involved donors how the existing partnership with SHU the best can be shaped in service of the further expansion of Community Health Finance schemes.

6. Tables Theory of Change and Results Chain SHU (Contribution analysis)

Contribution analysis regarding SHU's capacity development in relation to its intended program outputs/ outcomes are shown in the next tables. Two types of contributions are described in the Results chain scheme:

1. the contribution of CORDAID funding to the actual changes in SHU's core capabilities To act & commit and To adapt & self renew
2. the contribution of these changes in SHU's capacity to its realised outcomes in the *Outcome area: Improved access to quality health services.*

The next tables give the relevant elements of the Theory of Change of HIVOS and that of RWECO that underlie the Results chain HIVOS - RWECO from inputs to outcomes. The result chain has been verified and further refined in the field. The result chain is in accordance with observations and interviews done during the field visit to Sheema district; the results chain is also related to written reporting by SHU and activity publications.

Overview relevant Theory of Change elements CORDAID - SHU

Elements	CORDAID	SHU
Ideas/theories on change	Accessible health care for the poorest	Promotion community health insurance within National Health Insurance Scheme (NHIS) Bill
Programme/project/initiative seeking changes	Enabling SHU to contribute to maternal / infant and reproductive health care services in Sheema District	Implementation projects on reduction delays to maternal/child health care services and related health insurance schemes; changes in attitudes of target groups in rural and peri-urban settings sought; lining up health service providers by adequate service contracts, all in Sheema District
Process/sequence of change	Funding SHU in 2 projects regarding reduction delays to maternal/child health care services and related health insurance schemes	Services offered within SHU strategy to promote Community Health Insurance (CHI): <ol style="list-style-type: none"> 1. Community mobilisation, 2. Health education / health insurance education. 3. Health insurance Schemes formulation 4. Capacity building for self professional management 5. Grass-root, local level lobbying / advocacy to-

		<p>wards change to Community health insurance (CHI) schemes</p> <p>6. Purchasing / Contracting health care services</p> <p>7. Community health insurance (CHI) schemes' networking and coordination</p> <p>8. Stimulate patient centred awareness and create health care facilities with this orientation</p>
Reflection and decision making	Periodic capacity assessments, feedback and dialogue	Involvement in preparation governmental decisions maternal / child health care of the poor / M&E on realised outputs and outcomes to promote CHI further
Context	Changing policies international development funding agencies	Political environment for health NGO's conducive to integration community health care insurance schemes into draft National Health Insurance Scheme (NHIS) Bill; passing of the Bill delayed; uncertain when Bill is passed due to certain opposition

Results chain for SHU's outcome areas: Improved access to quality health services

Inputs of CFA	Activities of SPO	Outputs	Outcome areas	
			Immediate (direct) benefits	Medium term (direct) benefits
<p>Finance: 2012 & 2013 Euro 75,000 per year (no separate budget line for capacity development)</p> <p>Personnel support:</p> <ul style="list-style-type: none"> • Training on ToT (leadership skills) for field staff • Training on project management, M&E, governance for senior management • Support to attend conferences on health insurance in Indonesia in 2013 	<p>Capacity to act & commit: Expansion and strengthening of health insurance schemes:</p> <ul style="list-style-type: none"> • Health education • Health insurance education • Strengthening + formation of schemes • Training of scheme leaders • Subsidizing schemes (30% during yr 1, 20% in yr 2, 10% in yr 3 and phased out in yr 4) • Outreach and mobilization • Contracting health care services + purchasing • Contracting transporters • Customer care desk • Distribution insecticide treated mosquito bed nets <p>Capacity to adapt & self-renew</p> <ul style="list-style-type: none"> • Learning and reflection through joint partner meetings (annually), local annual project partner meeting, team meetings, frequent interactions with partners & beneficiaries • Monitoring of schemes (monthly) • Desk for customer care to guide patients when they come in and go out- place where patients can file feedback 	<ul style="list-style-type: none"> • 9 schemes functional (3777 beneficiaries of which 769 mothers) in 2013 • 3 contracts with health service providers • 18 contracts with transporters • 1001 bed nets distributed to pregnant mothers and new born babies • Schemes structure revised and simplified • Schemes cover entire family (women, men and children) and not only women as fist envisaged • One scheme discontinued because dysfunction 	<ul style="list-style-type: none"> • Increased access to quality health services (72% of mothers covered under scheme had institutional delivery; vs average of 43.4% in the district; about 1,700 claims under insurance schemes with 80% of costs cleared by schemes) • Only 3 scheme members (mothers and newborn) have died of malaria (2012-2014) • Reduction in number of filed complaints • Sign and name tags in Ishaka Adventist hospital 	<ul style="list-style-type: none"> • Reduced maternal & child mortality

		<p>tional- funds given back to members</p> <ul style="list-style-type: none">• Improved services		
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C.7 SPO: TWAVEZA Uganda - CFA: People Unlimited 4.1 (HIVOS)

1. Key features project

Within the framework of HIVOS Tanzania hosting the TWAVEZA Initiative continues during the period June 2012 - 2014 to provide core funding for TWAVEZA with special attention to:

- Delegation and decentralisation within TWAVEZA's organisation
- Search for and appointment of TWAVEZA's new Head in 2014
- Addressing TWAVEZA's actual staff turnover and related needed human Resources management
- Separation of roles between TWAVEZA and HIVOS Tanzania during the period of TWAVEZA starting with becoming an independent legal body in 2014 and ending with being a fully regionalised/localised organisation with an independent Board in 2016.
- HIVOS inputs to TWAVEZA's strategy beyond 2014, as the current Strategic Plan 2011-2014 is closed

The indicated intervention areas aim at serving TWAVEZA becoming a fully independent and regionalised East African organisation. For this a timeframe has been agreed upon between HIVOS and TWAVEZA, but a roadmap detailing orientations and related actions was not formulated by HIVOS as a specific project. How this roadmap will look like, depends on TAWWEZA's strategy formulation for the period beyond 2014 (2015 - 2019). HIVOS' intervention areas are not specifically addressing TWAVEZA Uganda, which is in the MFS2 evaluation the unit of analysis. TWAVEZA Uganda's capacity development analysis is therefore done within this context.

2. 5C assessment

	Baseline score	Endline score	Final change qualifications
1. Act and commit	3.5	3.6	Stable
2. Adapt and self-renew	3.5	3.4	Stable
3. Deliver on development objectives	3.2	3.2	Stable
4. Relate to external stakeholders	3.7	3.8	Stable
5. Achieve coherence	3.7	3.7	Stable

Under above general picture changes within the core capabilities have taken place. For the unit of analysis the TWAVEZA Uganda Office this concerns its merging with the UWEZO Uganda Office mid-2013 and this affected certainly aspects of the Core capabilities 1, 2, 4, and 5. The merger of the offices was mainly the result of decision making within the TWAVEZA organisation, and not induced by HIVOS as the organisation's key donor. The relationship between HIVOS and TWAVEZA cannot be described in terms of a traditional donor recipient relationship. Their relation, in which HIVOS Tanzania was hosting the TWAVEZA initiative, was continued during the period June 2012-June 2014: it is intended that TWAVEZA will become fully independent in 2016.

However the evaluator expresses special concern regarding Core capability 3, because over the years 2011, 2012, and 2013 ambitious budgeting and low expenditure levels at the same time, occurred. Could it be seen as a temporary concern during the Baseline, after the endline assessment there may be a structural issue.

3. HIVOS' targeting core capabilities TWAVEZA

Baseline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	5
Participation in board TWAVEZA, funding of salaries, improvement implementation capacity	
2. Adapt and self-renew	2
TWAVEZA took care of M&E and studies itself; little focus from HIVOS	
3. Deliver on development objectives	1
Strong focus organisation on capability; mutual learning TWAVEZA - HIVOS; no unilateral relationship	
4. Relate to external stakeholders	4
Budget priority to relate to external stakeholders; joint effort TWAVEZA and HIVOS	
5. Achieve coherence	3
Administrative/financial policies and accountability joint effort TWAVEZA and HIVOS	

During the period June 2012 - June 2014 HIVOS' focus appears not to be profoundly changed. Core capability 1 still remains the most focused. For Core capability 2 HIVOS' focus has not changed either, because here TWAVEZA is clearly leading in its Learning, monitoring and evaluation activities/studies. The same counts for Core capability 3, but here TWAVEZA seems to struggle seriously getting its ambitions realised. Underspensing seems to be endemic at least since 2011. In 2012 HIVOS and TWAVEZA addressed Core Capability 4 intensively in their common relation building, with TWAVEZA in the lead. In 2014 HIVOS' focus on this core capability decreased, because TWAVEZA's Head and his staff realised further successful initiatives in building international partnerships. Especially with regard to the Core Capability 5, HIVOS made clear inputs.

Endline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	5
Participation HIVOS in board TWAVEZA, funding of salaries, sustaining implementation capacity	
2. Adapt and self-renew	1
TWAVEZA took mainly care of M&E and studies itself; no distinct focus from HIVOS	
3. Deliver on development objectives	1
Focus TWAVEZA on capability; hardly from HIVOS; relationship TWAVEZA - HIVOS remains not unilateral	
4. Relate to external stakeholders	3
Still attention HIVOS to relate to external stakeholders, but TWAVEZA more in the lead	
5. Achieve coherence	4
Road map for TWAVEZA's becoming independent joint effort TWAVEZA and HIVOS	

4. Assessment scores of the design of the project under the implementation of TWAVEZA Uganda

HIVOS' contribution was not defined as a separate project, but the chosen governance setup and related roadmap to TWAVEZA's independence can very well be considered as a separate and original project, but which cannot be defined in terms of a traditional donor recipient relationship.

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	5

5. Recommendations

Given the organisation's sound donor base, it is strongly recommended to HIVOS Tanzania - TWaweza to pursue the completion of its new Strategic Plan, which' elaboration started in 2014. Herein the match between ambitions and realisations should be firmly addressed for further improving its Core capability To deliver on development objectives. This regards a common responsibility of HIVOS and TWaweza, given the long-term trajectory both organisations have entered since 2009.

C.8 SPO: War Child Holland Uganda Pader/Abim Offices - CFA: War Child Holland/War Child Uganda Kampala Office

1. Key features project

War Child Holland acquired MFS2 funds for the Conn@ctNow program that operates in 5 countries (Burundi, Colombia, Sudan, South Sudan, and (northern) Uganda); for Uganda about € 3.25 million was spent within the Conn@ctNow program by War Child alone over the years 2011-2013, out of the total project cost of € 7.44 million over the same period. The Conn@ctNow program took over this period 44% of the total budget of War Child Uganda. The active participants reached under the Conn@ctNow program had a peak in 2013, whereas the total active participants of all War Child programs declined. Within the Conn@ctNow program *War Child Uganda Pader was supported by War Child Holland / War Uganda Kampala office as the CFA* with funds and guidance over the period June 2012 - June 2014. The War Child Uganda Pader office was *the SPO* during the baseline. Due to War Child's phasing out from Uganda that started from June 2013 onwards, inducing an internal reorganisation, *the SPO consisted of the Pader, Abim, and Lira offices at the time of the endline*. The assessment of the capacity development of Pader office therefore should be seen in this perspective: the baseline - endline comparison will concentrate on the Pader/Abim offices, due to the field research that could only be done in these districts.

2. 5C assessment

	Baseline score	Endline score	Final change qualifications
1. Act and commit	3.1	3.0	Stable
2. Adapt and self-renew	3.3	2.9	Stable
3. Deliver on development objectives	3.2	3.1	Stable
4. Relate to external stakeholders	3.7	3.5	Stable
5. Achieve coherence	3.6	3.7	Improved

Capacity changes have taken place in two distinct episodes: firstly intensive efforts to get the capacity of Pader office at level required for the Conn@ctNow program activities, and secondly: the consequences of War Child's decision to phase out from Uganda per 2016.

In the first period clear improvements were realised within Core capability 1; to this improvements War Child Holland's distinct orientation on this core capability contributed. This orientation is not exclusive for War Child Holland's work in Uganda, but strongly embedded in its whole organisation and in its Strategy 2015 for Capacity building. Funding for capacity development is integrated in preparation and management of War Child Holland's , and as such not broken down in its Annual Accounts. War Child's strong focus on internal learning / innovation is reflected in War Child Uganda's orientation. Within Core capability 2, effective application of activities M&E improved; the perspective of phasing out was not having a negative influence. Strategic learning from M&E went well up to mid-2013, but with the phasing out focus was redirected to strategies for handing over to programs in Uganda.

With regard to Core capability 3: Improvements within this Core capability were realised in the first period up to mid-2013. War Child Uganda and also the Pader/Abim offices were not deploying activities for non-MFS2 Uganda programs; Conn@ctNow was to be finished in accordance to the organisation's set commitments. For this program provides funds for project implementation, for preparation and management, and for communication & awareness raising. Herein was work efficiency addressed by overcoming delays, but efficiency measuring was not consequently applied.

Core capability 4 remained firmly (i.e. at high level) stable.

Core capability 5 showed improvement, because in view of the phasing-out perspective of War Child Uganda, the organisation was forced to look into synergies, while scaling down human resources.

3. War Child Holland/Uganda Kampala's targeting core capabilities War Child Pader/Abim Offices
Baseline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	5
Attention to leadership development, human resources management; all personnel is on own pay roll	
2. Adapt and self-renew	4
Development of the performance and development cycle with emphasis on M&E	
3. Deliver on development objectives	3
Attention to planning, results, and deliveries, but scant attention to efficiency measuring	
4. Relate to external stakeholders	2
Not specially targeted.	
5. Achieve coherence	2
Not specially targeted	

Since the baseline study War Child Uganda Pader office has undertaken various activities in the area of programmatic capacity building of the Pader Office staff members. All related trainings were geared to the understanding of the staff on: Community-based child protection (CBCP), psychosocial support, and the Quality Education Improvement Plan (QEIP) approach. Based on this understanding staff became able to work with these approaches in practice (in communities and schools) with ongoing coaching and support. Within Conn@ct.Now staff members were made understood how ICT & Media can be used. Training on War Child Uganda advocacy strategy 2012-2014 induced staff to integrate this into Conn@ct activities. Specific trainings geared to the Pader Office staff were done early 2013 i.e.: Capacity building of operations staff- Logistics & Finance and Human Resources, and PM&E, and General ICT Capacity building. All training activities were mainly focused on Core capabili-

ties 1, 2, and 3; especially in 2013 this focus was the clearest. After the decision to phase out by mid-2013, trainings were continued for less staff, in service of existing program implementation.

Endline report measurement (1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	5
Broad range of specific trainings for the Conn@ctNow program	
2. Adapt and self-renew	5
PM&E (i.e. Indicator Progress Card Application development / training) and ICT	
3. Deliver on development objectives	5
Active support and coaching in the execution of QEIP, CBCP, ICT applications and advocacy	
4. Relate to external stakeholders	1
Not specially targeted	
5. Achieve coherence	1
Not specially targeted	

4. Assessment scores of the design of the project under the implementation of War Child Pader/Abim Offices

War Child Holland's contribution was defined as support to the *Conn@ctNow program* which became the largest prominent in 2013 in all War Child's activities in Uganda. War Child Holland's and War Child Uganda Kampala Office's support to the capacity development of 'its SPO' (i.e. Pader and later Pader/Abim/Lira offices) was from 2012 increasingly geared to enhancing the capacity of the SPO in function of its project implementation. From the second half of 2013 this support continued with a completely changed perspective for the Uganda program given the phasing out per 2016, and the need to implement existing programs.

It is therefore difficult to characterise all capacity development activities during the period June 2012 – June 2014 from one angle. The capacity development efforts up to mid 2013 can be portrayed as well designed, as they were made mainly in service of the implementation of the Conn@ctNow program. The capacity development activities efforts thereafter were undertaken under completely different assumptions

Statements	Scores: 'Not at all' (1) - 'Completely' (10)
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	6

5. Recommendations

War Child Holland is recommended to (see for this next table Results Chain):

- *To carry out a post-exit evaluation to assess after minimally 3 years what Immediate (Direct) benefits have resulted in Medium term (direct) benefits in the original program areas, where War Child Uganda was active. Herein should be accentuated what role parents' contributions have played, whether local authorities and community groups succeeded in their journey on the 'road to sustainability', and to what extent (inter) national organisations could make their contributions by using War Child methodologies.*

- To assess what capacity requirements had to be fulfilled at the 3 indicated levels in kind and in cash (i.e. what approaches to capacity development were effective and efficient at the same time), while also taking into account the findings of the endline study.

6. Tables Theory of Change and Results Chain War Child Pader/Abim Offices (Contribution analysis)

Contribution analysis regarding War Child Pader/Abim Offices' capacity development in relation to its intended program outputs/ outcomes are shown in the next tables. Two types of contributions are described in the Results chain scheme:

1. the contribution of War Child Holland funding to the actual changes in War Child Uganda Pader/Abim Offices' core capabilities To act & commit and To adapt & self renew
2. the contribution of these changes in War Child Pader /Abim office's capacity to its realised outcomes in the *Outcome areas: Quality Education Improvement Programme (QEIP) and Community Based Child Protection Programme (CBCP)*.

Overview relevant ToC elements War Child Holland - War Child Uganda Pader/ Abim Offices

Elements	War Child Holland	War Child Uganda Pader/Abim Offices
Ideas/theories on change	Safe environment for children in communities and schools	War Child's self implementation approach, i.e. working directly with communities by building/strengthening community structures
Programme/project/ initiative seeking changes	Enabling Pader/Abim offices to contribute to quality education and child protection in Pader & Abim Districts	Strengthening community/school structures/setup, seeking cooperation with sub-count/parish leaders, communities and schools in Pader and Abim Districts
Process/ sequence of change	MFS2 Funding of Conn@ctNow <u>Education (MDG 2):</u> Quality Education Improvement Program (QEIP). Implemented in primary schools for 2 years <u>Child protection (MDG 4-6):</u> Community Based Child Protection (CBCP) War Child developed/ replicated/tailored QEIP and CBPC programs for Uganda	Services offered within War Child QEIP and CBPC strategies:: <u>QEIP:</u> Teachers development, teaching materials development, school management support, establishment Parent Teacher Associations (PTA) and School Management Committees (SMC); non-formal schooling i.e. community-based learning, e-learning supported), infrastructural support to schools; Training stakeholders in education sector in leadership/supervision of schools; joint development school plans joint monitoring of school plan results <u>CBCP:</u> Support to community-based child protection groups / child rights groups; training of Child Protection Committees (CPC) on child protection issues /set-up complementary REFLECT circles at village level; identification children at-risk, develop community based solutions; training of community child protection at sub-county level for dealing with child protection in communities
Reflection and decision making	Periodic capacity assessments, feedback and dialogue	Increased joint decision-making with district/sub-county/parish leaders on the course of QEIP and CBCP activities. Joint concern about addressing school dropouts and child abuse. M&E on realised outputs and outcomes shared with these leaders and used for QEIP and CBCP in other sub-counties/parishes
Context	Changing policies interna-	Operational environment for post conflict and rehabilitation activities

	ditional development funding with respect to charities	improved in North Uganda, due to sustained overall stability, in spite of incidents. District and parish leaders open for working together on improvements primary education and child protection
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Results chain War Child Uganda Pader/Abim Offices' outcome areas: Quality Education Improvement Programme (QEIP)/Community Based Child Protection Programme (CBCP)

Inputs of CFA	Activities of SPO	Outputs	Outcome areas	
			Immediate (direct) benefits	Medium term (direct) benefits
<p>Finance: During 2012 - 2014 € 2,567,753 total project costs War Child only (no specification for capacity development) within Conn@ctNow Programme (MFS2 funding)</p> <p>Personnel support: Pader:</p> <ul style="list-style-type: none"> • Re-staffing Pader office • Programmatic capacity building staff Pader office • Capacity building operations staff • ICT capacity building of staff for M&E • 2012-2013 6 Project Officers PO's in 6 Sub Counties • Downscaling: Until December 2013 6 PO's; in July 2014 3 PO's in 3 'difficult' Sub Counties all under Conn@ctNow <p>Other support:</p> <ul style="list-style-type: none"> • Technical support in kind from District Education Office (DEO) on tutoring, in- 	<p>Capability to act & commit:</p> <p>QEIP:</p> <ul style="list-style-type: none"> • Selection schools, 3-days trainings SMC/PTA (their roles & responsibilities, meetings with parents, teachers and pupils for inputs in yearly school plans through SWOTs per target group) • Jointly with DEO teacher trainings on school curriculum, teaching content • Procurement of school books, furniture, lighting, music instruments • Jointly with DEO development of work plans all schools in each Sub County • Focus on addressing factors behind dropouts (early marriages, low school fees, child abuse) by cooperation between DEO, police, War Child, and school • Establishment of Sub county Education Committees (SEC's) • Advocacy international educational campaigns (Global African School day, Annual Parents day, Global Education Week) <p>CBCP:</p> <ul style="list-style-type: none"> • Training Child Protection Committees (CPC's) • Training War Child staff in child protection issues • 8 steps approach to Child Protection (CP): (1) leader- 	<p>QEIP:</p> <ul style="list-style-type: none"> • Over period 2012 – 2014 QEIP outputs realised in: 24 schools in Pader 33 schools in Abim • In these schools SWOTs, joint DEO teacher trainings, procurement of school materials, and putting up school plans carried out • Dropout factors addressed in Pader and Abim Districts • SEC's active in both districts (numbers not known) • Participation in Global African School day, Annual Parents day, Global Education Week <p>CBCP:</p> <ul style="list-style-type: none"> • 30 people per parish; 	<p>QEIP:</p> <ul style="list-style-type: none"> • 57 SMCs established; in each school PTAs appointed • Improved learning environment for pupils • Well equipped teachers through Teachers Deals approach • Increased enrolment and higher pupils retention (i.e. lower dropout rates) • Improved P7 examination results • In Global Education Week Abim District nationally recognised having highest enrolment and retention rates • Worries about upcoming absence War Child with respect to addressing child abuse cases <p>CBCP:</p> <ul style="list-style-type: none"> • Reduced cases of child abuse • In Abim District: Early child marriages, corporal punishment 2012 300 cases, 	<p>QEIP:</p> <ul style="list-style-type: none"> • Phasing out War Child from Uganda means decline of Capability To Act and to Commit, where it concerns the scope of activities that can be carried out • Phasing out scenario with respect to handing over activities and to work out 'path to sustainability' not worked out in detail • DEO and schools mainly declare to take up the challenge to consolidate War Child's contributions • Herein large emphasis on responsibilities of the parents (stimulate children to go to school, contributions in cash and kind to schools, participation in school operations) <p>CBCP:</p> <ul style="list-style-type: none"> • In phasing out more reliance on CPC's; during Conn@ctNow period CPC's grew visibly

<p>spection, and selection teachers</p> <ul style="list-style-type: none"> • Support in kind from communities with materials, food, and labor • External trainers • District staff (Council speaker) <p>Abim:</p> <ul style="list-style-type: none"> • 2012-2013 6 Support Project Officers PO's) in 6 Sub Counties • Downscaling: July 2014 2 PO's in 6 Sub Counties • Technical support in kind from DEO on tutoring, inspection, and selection teachers • Support in kind from communities with materials, food, and labor 	<p>ship mobilization per Sub County, (2) Community meetings at parish level, (3) Identification CP issues per parish, (4) Basic CP training, (5) Risk analysis ID issues, (6) pathway analysis, (7) SWOT analysis, (8) Dialogue on work plans and implementation</p> <ul style="list-style-type: none"> • Community mobilization (CPC's selection and re-organisation): 12 CPC's in Pader District, 24 CPC's in Abim District • 2012-2014: Linking CPC's to existing government structures (police, Child Protection Unit, Community Development Office –CDO) • Basic training on child protection for these structures • Joint development of work plans for further training on child protection • Community based sensitization on child protection for CPC's <p>Capacity to adapt & self-renew</p> <p>QEIP:</p> <ul style="list-style-type: none"> • Jointly with DEO monitoring school exams, M & E in schools, and quality control educational content • Involvement in back to school campaigns and pupils retention through using UNICEF tracking tools on school presence pupils <p>CBCP:</p> <ul style="list-style-type: none"> • Report on child protection activities (8 steps approach) <p>General:</p> <ul style="list-style-type: none"> • Improved ITC-based M&E systems 	<p>12 parishes in Pader and 20 parishes in Abim</p> <ul style="list-style-type: none"> • Annual child protection work plans per parish structure elaborated <ul style="list-style-type: none"> • QEIP reports <ul style="list-style-type: none"> • CBCP reports 	<p>2013 100+ cases, Jan-Jun 2014 43 cases</p> <ul style="list-style-type: none"> • Reduces report/cases to war child as CPC's handle these • Empowered and strengthened CPC's <p>General and QEIP/CBCP:</p> <ul style="list-style-type: none"> • Timely and adequate reporting • Outcome reporting MDG2 and MD G4-6 Uganda 2013 on QEIP and CBCP 	<p>stronger and with them women's unions, clan leaders and LC1 Councils</p> <ul style="list-style-type: none"> • Children's rights and leadership roles better taken care of thanks to child empowerment <p>General and QEIP/CBCP:</p> <ul style="list-style-type: none"> • Timely and adequate reporting
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The Results Chain table gives results chain gives a display of War Child Holland's inputs contributing to War Child Uganda Pader/ Abim Offices' core capabilities To act & commit and To adapt & self renew that are instrumental in the realisation its activities. The outputs that these activities produce, generate

immediate (direct) outcomes and after that medium term (direct) benefits. It concerns the originally planned Rollout of the new War Child programming framework 2012 – 2013 (QEIP, CBCP, ICT, DEAL's modules). The rollout was affected by the scaling down of War Child's activities in Uganda, due to recalibrating overall policy War Child Holland Head Office. The results chain table refers to the current activities carried out by the Pader /Abim Offices; the table gives the results chain analysis carried out the with War Child Uganda Pader /Abim offices, and verified in field visits. It is focused on the outcome areas Quality Education Improvement Programme (QEIP) and Community Based Child Protection Programme (CBCP) in the Pader /Abim Districts.

D. Reflections

After the completion of the 8 5C baseline and endline studies the following observations are made.

4. The 5C baseline and endline studies could be completed in accordance with the originally envisaged methodology, when it concerned the organisational self assessment, the workshops in which timelines and results chain were put up and discussed with core persons of each organisation. The remaining time for stakeholders consultations (interviews, focus groups discussions, workshops) was too limited to get in touch with all stakeholders relevant for the organisation's performance (outcomes and enabling environment). Contacts with stakeholders were now mainly used to triangulate statements made in the timeline, results chain workshops with each organisation. In the endline studies of 2014 stakeholder consultations still needed more time than available; this counts for the endline studies with and without tracing.
5. In all 5C baselines and endline studies either hardly any approach towards or actual efficiency measurements could be identified. Assessing organisational efficiency was in the endline study no requirement anymore within the Capacity Development component. But still it should be noted that not any organisation did have a clear definition of efficiency, and systems of efficiency measurement were not existing. Sometimes efficiency measurement was related to cost reduction at organisational level. It also was clear that neither SPO's nor Dutch NGO's gave high priority to the efficiency of the SPO's studied. For all 8 SPO's no decent efficiency measurements could be envisaged.
6. The concept of project design and its assessment along the 3 statements 'The project was well designed', 'The project was implemented as designed', 'The project reached all its objectives' proved to be problematic in relation to capacity development. With respect all 8 researched SPOs no specific MFS2 funded capacity development project were existing. In all cases CFAs and 'their' SPOs considered capacity development as instrumental in the implementation of projects funded under MFS2. CFAs mostly facilitated capacity development support within MFS2 funded projects on ad-hoc basis addressing bottlenecks during project implementation. In a few specific cases capacity development strategies for supported SPOs could be identified, but the funding of activities, stemming from these strategies could hardly be linked to MFS2 funding.
7. After the completion of the endline studies it became clear that all researched SPOs were more capable to formulate strategies and plan activities to realise outputs. Researched SPOs could also be more specific on the outcomes that outputs should generate and their strategy formulation. In all 8 organisations tracing of outcome and outcome measurement was either partially present or not present at all. The question remains since the baseline what changes in organisational capacity do mean, when not much can be said about the organisation's *raison d'être* to make a positive difference for the target groups it is working: the capacity of a SPO can be found sound, whereas its outcomes are lousy. Capacity development is not an issue on its own, but be in service of outcome realisation.
8. Financial data from the Dutch Co-Financing Agencies (CFAs) were in 7 cases much clearer and better reported. Researchers' inquiries from CFAs regarding MFS2 funding went considerably

better than at the time of the baseline. The earmarking of specific capacity development funding meant for the capacity development of the SPO, remained however problematic. The embedding of capacity development funding in MFS2 funded programs is logical and can hardly be changed. In addition should be realised that the researched SPOs are also getting funds for capacity development from many other donors. This makes attribution of capacity changes of SPOs to CFA funding complicated.

IV. Efforts to strengthen civil society

Key information on projects/SPOs

Gulu Women Economic Development & Globalization (GWED-G)

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MDG MDG 7: Good governance and civil society building; Fragile states

GWED-G was founded in 2004 when it began as a support group to war affected women who met under a particular mango tree. The organisation has since evolved into a very active civil society actor in the district and region. GWED-G is also involved in various national and international networks that aim at championing human rights. It has 17 staff members and works in the districts of Gulu, Amuru and Nwoya in Northern Uganda.

The mission of GWED-G is to strengthen the capacity of grassroots communities in Northern Uganda to become self reliant agents of change for peace and development. The target areas of GWED-G's work are health, Human rights with an emphasis on women and girls, psychosocial support and counselling, research and advocacy, and economic empowerment.

GWED-G is a member of the Northern Uganda Human Rights Partnership (NUHRP) composed of 9 organisations including Amnesty International Netherlands. Amnesty international provides technical support and guidance to the partnership on issues of human rights. Four of the 9 members in the partnership came together to implement the Youth empowerment programme which is being funded by through MFSII funding channelled through Amnesty International. The four organisations are GWED-G, Justice and Peace Commission (JPC), Kitgum NGO Forum and Pader NGO Forum.

From Amnesty international the funds are channelled to ACORD the host institution. ACORD subsequently takes charge of the management and administrative aspects of the program. Each organisation does its planning and the plans are sent to ACORD who forwards the plans to the Amnesty which subsequently undertakes funding disbursement. The programme is being funded for 5 years, (2011-2015). The partnership and implementation are still challenged with insufficient capacity logistical shortages e.g transport, and institutional development.

Kabarole Research and Resource Centre (KRC)

Organisation	Kabarole Research and Resource Centre (KRC)
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Phone number	+256-382-274438
Website	www.krc.co.ug
MDG	1 (poverty reduction)

Kabarole Research and Resource Centre (KRC) is an indigenous NGO in Western Uganda that has been operating in the predominantly agricultural Rwenzori Region since its inception in 1996. KRC strives to improve the quality of life of poor people in the Rwenzori region. The organisation targets the rural communities and in particular the very poor in the seven districts of Kabarole, Kasese, Kamwenge, Kyenjojo, Kyegegwa, Ntoroko and Bundibugyo. Some of KRC's programmes target specific communities within these districts, depending on local conditions and needs. KRC has been a HIVOS partner since 1998 (*source: KRC website*).

KRC has played a major role in the development of a Regional Framework in which CSOs, local and district government representatives and institutions, research institutes and private sector will cooperate in a concerted and coordinated framework to bring Ruwenzori region at a higher level of development based on more own responsibility and sustainability. Increased civic competence and consciousness of the rural farmers and citizenry to make informed choices and advocate for pro poor development policies are part of the realization of this strategy.

Send a Cow Uganda (SACU)

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Website	www.sendacowuganda.org
MDG	MDG 1 (poverty reduction)
Funding	Oxfam NOVIB (IMPACT)

Send a Cow Uganda (SACU) is a Non-Governmental development Organization registered in Uganda and affiliated to Send-A-Cow United Kingdom. It presents itself as being founded on Christian principles. SACU partners with farmer communities to develop knowledge and skills to overcome poverty and malnutrition. SACU works with groups of vulnerable people. Priority is given to areas that have suffered calamities such as conflict, HIV/AIDs and natural disasters. Send a Cow began working in Uganda in 1988 and the country is its longest standing programme. Over more than 25 years SACU has worked in Uganda in 42 districts across the central, eastern and northern regions to overcome

poverty and malnutrition in a sustainable manner through animal production and organic farming. SACU works directly with about 4,000 farmers in Uganda. Founded on a principle of sharing and imparting knowledge and skills from one farmer to the next, SACU claims that their impact has reached over 400,000 people in the country (source: Send A Cow Annual Review 2013-14).

Mango Tree (MT)

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MFS II Funding ICCO Alliance +Connect4Change (C4C)

Mango Tree develops and produces custom-designed educational tools that are durable, portable and culturally appropriate. It presents itself as “Innovators in Education and Communication”. Mango Tree is a private limited, employee-owned company which depends on clients to pay for its services. Mango Tree is a private limited company whose main aim is to enhance the education abilities of young people children.

Mango Tree carries out three main programmes at the moment: (i) The Uganda Literacy Project; (ii) The Primary Literacy Project and (iii) Strengthening a Literate Society. The Strengthening a Literate Society program is supported by ICCO (50%) and is focusing on fragile states and education. The project supports two language boards in Northern Uganda to develop their orthographies, print and distribute basic reference materials related to the language, train local writers, editors, illustrators and graphic designers, educate the general population about the importance of local language literacy and build the language boards internal capacity so that they are able to make a meaningful contribution to local language literacy education in Northern Uganda. The Mango Tree MFS II funded work is carried out in the Lango sub region of Northern Uganda. Mango Tree aims at creating systems, methods and capacities so that children in war-affected Northern Uganda will attain a meaningful and relevant early primary education with a focus on attaining reading and writing skills in their mother tongue, Leblango.

Southern and Eastern African Trade, Information and Negotiations Institute (SEATINI)

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Funding Oxfam NOVIB (IMPACT)

SEATINI is a regional lobbying and advocacy organisation with a strong base in Uganda through its regional office for East Africa. Its advocacy work focuses on the Economic Partnership Agreements (EPA), Regional Integration, WTO Trade Negotiations, Tax Justice and Linking Global Economic Issues to Rural Livelihoods. SEATINI analyses policies, simplifies them and shares them with partners in the form of policy briefs and studies. Research done by SEATINI on various policies and treaties focuses on how they impact the citizens including smallholder farmers and the poor. SEATINI wants to ensure that the multilateral negotiations and other global processes generate favourable rules and frameworks that are supportive to the development efforts of Uganda, East African Community and Africa in general.

Uganda Catholic Medical Bureau (UCMB)

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MDG 4, 5 and 6 (health)

Funding Cordaid (Communities of Change) and C4C

The Ugandan Catholic Medical Bureau is the Health Department of the Uganda Episcopal Conference (UEC - Conference of Catholic Bishops in Uganda) which is jointly owned by the Catholic Bishops in Uganda. UCMB was founded in 1955 and became a self-accounting department under the UEC in 1971. The different UEC departments and units are overseen by their respective Commissions, established by the Episcopal Conference. In the case of UCMB this is the Commission for Medical and Health matters, chaired by a Bishop appointed by the UEC.

UCMB coordinates and provides technical assistance to Catholic health units in Uganda, assists in personnel training and the evaluation of facilities, and represents and advocates for Roman Catholic health care services nationally and internationally. A scholarship fund provides financial support to medical staff seeking further training and education; technical assistance includes assistance with financial software and web-based e-mail. Information about hospitals, clinics, and diocesan resources is available on UCMB's website. The biannual UCMB Bulletin publicizes the bureau's work and discusses public health issues. UCMB is occasionally partners with the Uganda Protestant Medical Bureau (UPMB), with whom it established the now-independent Joint Medical Store to provide low-cost medical supplies and training to church-related health facilities. (*source www. UCMB.org*)

UCMB member health facilities include 13 health training institutions, 32 hospitals (about a quarter of all hospitals in Uganda) and 249 health centers which are coordinated through 19 Diocesan Health Offices (DHO) and with a total of over 8000 health workers. Health services of the Catholic Church form part of the national health system. These facilities have all a quality certificate through an accreditation system – the first in the Uganda health system. These health facilities also have community-related (public health) programs. (source: *UCMB Annual Report 2013*). Total expenditure by the UCMB facilities amounted to 147.9 billion shillings (about EUR 45,5 Million) in FY 2013/14 which is 12,6% up from the previous year. The main sources of income for the health facilities are the users' fees (48,7%), Government of Uganda (10,4%) of UCMB, with the remainder (40,8%) coming the Catholic church and donor contributions (source: *Min of Health Annual Health Sector Review 2013/14*).

Uganda Governance Monitoring Platform (UGMP)

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Website:	www.ngoforum.or.ug
MDG	Good governance and civil society building
Funding	HIVOS (People Unlimited 4.1)

The Uganda Governance Monitoring Platform, a coalition of Ugandan NGOs united in the quest for good governance was established in 2004 with an aim of monitoring trends in governance in Uganda and Africa at large. The platform now comprises 18 Uganda and 5 Dutch Civil Society Partners. Over the years, UGMP has been producing an annual governance trends bulletin on the basis of intensive research, and thereafter using the findings to lobby and engage concerned actors on how practically to improve the governance situation in the country.

The Uganda Governance Monitoring Platform was established as a coalition united in the quest for good governance with an aim of monitoring trends in governance in Uganda and Africa at large. UGMP has grown in size since its inception in 2004 from 13 to 18 member organizations to date, each member bringing a unique aspect on board. In addition there are 40 partner (35 district partners and 5 interest groups), through whom UGMP's flag ship programme - *The Citizen's Manifesto* - and other programmes are being implemented. The members provide voluntary services to the platform and entirely facilitate its running in terms of operating costs and human resources. UGMP is run as a loose coalition, with the Chairperson democratically elected by the members. Currently Deniva chairs UGMP and its secretariat is hosted at the National NGO Forum.

VECO East Africa – Uganda (VECO)

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MDG	1 (poverty reduction)
Funding	Cordaid (Communities of Change)

VECO-Uganda supports the development of sustainable agricultural chains at local and national level in which organized family farmers, male and female successfully influence the trade relationships and benefit through increased income. The focus of VECO is on the formation of commercial Farmer Organisations, building farmer driven cooperatives to develop sustainable agricultural value chains of Groundnuts and maize. VECO aims to contribute to a sustained improvement of small scale farmer household livelihoods through increased incomes as a result of improved accessibility to markets. Cordaid has been supporting VECO in Uganda for over a decade since 2000.

This report is presenting the context of operation of the Cordaid funded projects in the period 2011-2014. This relates to four different projects which are related to the strengthening of Farmer Organisations to develop their groundnut and maize commodity chains, to lobby for more enabling policies at district and national levels and a project to enhance access to rural finance. The report intends to analyze the relative changes for the period 2012-14 (the baseline also includes the preceding years) and to present two cases that illustrate the contribution of VECO to the realisation of their objectives.

General evaluation approach and key indicators

Introduction

During the baseline 2012 and the endline 2014 a general methodology has been developed for the CSS Uganda SPO studies which has been applied to all SPO in more or less the same way. This methodology has followed the Civil Society Index methodology with a major focus on the perception of social and political impacts as a result of the activities of the SPO under review. A methodological guide has been developed based on the earlier developed Baseline Methodological Guide and discussions with the Wageningen University CDI studies for Civil Society Strengthening, in particular contribution analysis (Methodological Guide Endline 2014 is presented in Annex). As has been described in the Baseline report, the Uganda study intends to make a comparison of the changes of the five Civil Society Index (CSI) dimensions over the period 2011-2014. In 2012 the Evaluation Framework has been developed on the basis of the Civil Society Strengthening Assessment Framework also known as the CSI as developed by Civicus. The five pillars as prescribed by the MFS II evaluation framework has been elaborated into a set of 25 indicators (excluding the context description). The CSS Evaluation Framework for Uganda has been applied unchanged in both the baseline phase as well as the endline 2014.

In the endline of 2014 the focus has been on the dimensions of Civic Engagement (social engagement and political engagement; dimension I) and the Realised (or perceived) Impact of their social and political engagement (dimension IV). But the scoring and description of relative changes has been done for all 25 indicators including dimensions II (Level of Organisation) and III (Practice of Values).

No monitoring has been undertaken in 2013 as there was no budget available. Furthermore, the period between the baseline and the endline was already relatively short to assess impact.

Endline 2014 SPO selection and reporting

In the baseline 2012, 17 SPOs had been randomly selected from the long list of about 120 SPOs being supported by the Dutch MFS consortia. In addition the 8 SPOs under the 5C study have also been addressed with regard to their Civil Society Strengthening. From the original 17 SPOs under the CSS study, 13 have been retained for the endline study at the start of the endline.

The Criteria which have been used for the selection of the SPOs to be included in the endline were:

- a) Selecting the SPOs that will be part of the process tracing exercise (before fieldwork).
- b) Selecting the specific outcomes that will be analyzed using the process tracing methodology.

From the 13 SPOs retained for the endline, finally 3 organisations have not been included. It appeared to be too complicated and time-consuming to include the two SPOs of the Capacity Building exercise. They could only be included towards the end of the endline exercise as the Uganda CapDev ETC team was still working with these organisations. A third SPO was left out as they did not wish to collaborate during the endline exercise also for reasons of being included in the MDG evaluation. Finally only eight out of ten remaining organisations have been reported upon for the endline 2014 as the lack of data consistency for the two remaining made it impossible to sufficiently address the evaluation questions. Of these eight SPOs, four are under MDG 1 (poverty reduction), one under MDG 2 (Education), one under MDG 4,5 and 6 (Health) and two under MDG 7 (Good Governance and Conflict Resolution).

Methods/ techniques

During the baseline 2012 and the endline 2014 the following methods have been used:

1. Before/ after comparison

Upon completion of the 2012 CS baseline study a clear picture of the Civil Society Strengthening efforts by the individual SPOs both in terms of Civil Society engagement as well as lobbying and advocacy (political engagement) had been made. This was realized by taking stock of what was the situation in 2012 since the start of the individual projects one or two years earlier on the basis of the indicators as formulated for the baseline.

A similar assessment has been made in 2014 during the endline analysis when a description has been made of the changes in the period since the baseline 2012. On the basis of these changes a score has been given for positive/ negative changes or no change at all. The relative changes 2012-2014 have been further analysed to understand what has contributed to these changes in the

The indicators used in Evaluation Framework to assess the relative changes 2012-2014 are summarized below:

Baseline 2012 and Endline 2014 Evaluation Framework: Dimensions, Result Areas and indicators
Dimension 1: Civic Engagement
1a – diversity of socially based engagement
1. Degree to which the needs of beneficiaries / target groups are included in SPOs analysis, planning and implementation.
2. Degree of participation of target groups in analysis and planning of SPOs.
1b – diversity of political engagement
3. Number of dialogue platforms with local or national government that SPO is participating in.
4. What is the intensity of involvement in dialogue platforms or sectoral networks?
Dimension 2: Level of Organisation
2a – Organisational level of civil society
5. Degree of participation of the SPO (and possibly CFAs) in sectoral networks of civil society organisations.
6. Nature of the relationship between the SPO (and possibly CFAs) and sectoral networks/umbrella organisations in the MDG/theme.
2b – Dialogue and communication
7. Degree to which a shared analysis of situation in society exists
8. Degree of joint activity as a result of joint analysis
9. Mode, nature and quality of dialogue / communication
2c – financial and human resources
10. Composition of current financial resource base of SPO
11. Degree of dependency of external funding
12. Human resources management by the SPO
Dimension 3: Practice of Values
3.a - Internal Governance
13. Degree to which organisational structures are involved in strategic management of the SPO
14. Degree of sharing of information to staff (structured and regular)
3b- Transparency
15. Independent external (financial) auditing being done
16. Degree of transparency towards beneficiaries
17. Extent of upward and downward accountability by SPO
3c – Internal financial and human resources management
18. Extent to which internal written procedures for financial and human resource management are being respected
Dimension 4: Perception of Impact
4a –Responsiveness
19. Degree of incorporation of priorities of target groups in plans and activities
20. Degree of alignment with government policies (planned and implemented)
4b – Social impact
21. Target group satisfaction regarding fulfilment of their primary social and/ or personal concern
22. Degree to which empowerment of target groups towards public and/ or private sectors have been enhanced
23. Degree of sustainability of the social impact
4c policy impact
24. Level of influence of SPOs towards major policy changes
25. Degree to which SPOs are holding government (national and local) and private sector accountable

Source: *Methodological Guide Civil Society Strengthening MFS II Uganda (final June 2012)*

2. Case studies

The case studies are described in most of the studies on the basis of the “stories” of the beneficiaries and / or partner organisations as well as representatives of the “lobbying targets”. The 2012 baseline include descriptions of specific cases which have identified and described to illustrate the activities,

outputs and outcomes of the SPO in question. In 2014, these cases have been further elaborated to assess the contribution of the SPO to the realization of the achieved outcomes through a contribution analysis.

3. Focus Group Discussions

Focus Group Discussions have been used to interview several stakeholders in order to capture the opinion or meaning of various persons at a time. FGDs have been held in the first place with the staff of the partner organisations in order to address the issue of relative changes 2012-2014 (including timeline analysis) as well as the theory of change which was being applied by the SPO.

Secondly, FGD have been held with groups of the beneficiaries of the SPO in order to assess their opinion on the changes in their organisation and/ or communities.

4. Individual interviews

Both during the 2012 Baseline and the 2014 Endline Individual interviews have been held with selected stakeholders on the basis of the research questions as formulated in the CS research guide. These interviews have been used for the assessment of the relative changes 2012-2014 in the contribution analysis.

5. Timeline analysis

In both the baseline 2012 as well as the endline 2014 and timeline analysis has been done in order to understand the development of the organisation over time in the face of both internal and external developments. The latter timeline analysis has been used to understand better the relative changes, the implementation of concrete activities based on the theory of change as well as to assess the contribution of the SPO to the realization of the intended outcomes.

Sampling of beneficiaries/ informants

During the baseline 2012 and endline 2014 a similar approach to the sampling of beneficiaries and informants has been applied. The sample of the beneficiaries to be interviewed was done by the Ugandan consultants. It was agreed in the Baseline Methodological guide that a wide range of stakeholders would be interviewed, either during the 'staff analytical workshop' with the attendance of as many staff member relevant for management, programme implementation and financial management. A similar approach has been used during the endline 2014.

Moreover, focus group interviews were held with beneficiaries at their location, with responsible staff of beneficiary organisations (eg primary schools teachers, cooperative board members, health workers, extension workers, etcetera). In a few instances board members have been contacted and interviewed on their role and vision on the organisation. Other stakeholders from government agencies such as local government staff or ministerial staff have been interviewed on an individual basis.

The selection of groups/ individuals to be interviewed was often made on the basis of the availability, relative proximity (most research was done during the rainy season and in regions with very poor transport infrastructure).

The persons and/ or groups interviewed are mentioned in each SPO report in Annex.

Overall assessment, answering the evaluation questions

Civil Society Strengthening

6.1 Relative changes

The following table provides the overall picture of the relative changes from the baseline situation in 2012 to the assessment of changes of the endline situation in 2014. Despite the fact that the assessment of relative changes is a numeric one, the scoring done is a qualitative evaluation of the original situation and the endline situation. The endline score is an assessment of the changes from very negative to very positive.

Table: Baseline score (2012) and Endline relative changes (2014) per indicator

	<i>MDG</i>	1a	1b	2a	2b	2c	3a	3b	3c	4a	4b	4c	Total	Overall score
GWED-G	7													2,28
Baseline		2	2	3	2	2	2	1	1	2	1	1	1,73	1,73
Endline		+	=	+	=	+	++	++	+	=	-	-	6+	0,55
KRC	1													3,37
Baseline		2	3	3	3	2	3	3	3	2	2	3	2,64	2,64
Endline		+	=	++	+	+	=	=	+	+	+	=	8+	0,73
Mango Tree	2													3,02
Baseline		2	1	2	3	2	3	2	2	3	2	2	2,20	2,20
Endline		+	=	=	+	+	+	+	+	=	+	+	9+	0,82
Send a Cow	1													2,63
Baseline		3	2	2	2	2	3	2	3	2	3	2	2,36	2,36
Endline		+	=	=	=	-	+	-	=	++	+	=	3+	0,27
SEATINI	1													3,18
Baseline		2	3	3	2	2	2	2	3	2	2	3	2,36	2,36
Endline		++	+	+	++	-	+	=	=	+	=	++	9+	0,82
UCMB	4,5,6													3,18
Baseline		2	3	2	1	3	3	2	3	3	2	3	2,45	2,45
Endline		=	=	+	+	++	=	=	+	+	+	+	8+	0,73
UGMB	7													2,45
Baseline		2	2	3	3	1	3	2	2	2	2	1	2,09	2,09
Endline		=	+	=	+	=	=	=	=	+	=	+	4+	0,36
VECO	1													2,36
Baseline		3	2	3	2	1	1	1	2	2	2	2	1,91	1,91
Endline		+	=	=	=	=	=	+	=	+	+	+	5+	0,45

For detailed description of the result areas and the underlying indicators see above. Overall score for Endline relative score is calculated on the basis of the total score (endline) divided by eleven (indicators).

Baseline 2012 : score 1-3 (with 1 lowest and 3 highest)

Endline 2014 : relative change : -- - = + ++ (from very negative change to very positive change)

We have tried to integrate the baseline score 2012 and the relative change 2014 into one overall score. The relative change score 2014 in the Total column is the sum of pluses and minuses for the 11 result areas (1a -4c). This sum has been divide by eleven to give a score of the relative change. The Overall score per organisation gives an indication of the score of each of the eight SPOs on the Civil Society Index as developed by Civicus in 2008. When assessing the SPOs per MDG it appears that there is not a big difference but that the SPOs under MDG 7 (good governance/ conflict resolution) have a slightly lower score.

When analysing the changes in the table below it appears that overall the average is indicating towards a slight improvement (about half of positive change: 0,58+ (=6,41 out of 11 indicators). The largest relative improvements have been realized for result areas 1a (social engagement) and 4a (responsiveness) with 2b (dialogue and communication) also having advanced substantially. On the result areas 1b (political engagement) and to some extent 2c (financial and human resources) and 3b (transparency) there has been relatively less progress. There is no link between a relatively high score during the baseline 2012 and the relative change during the endline 2014. On the other hand the low scores on result area 2c and 3b have been followed by relative little progress in the two years following the baseline of 2012.

Table: Average baseline score per indicator

	1a	1b	2a	2b	2c	3a	3b	3c	4a	4b	4c	Average
Baseline score	2,25	2,25	2,63	2,25	1,88	2,50	1,88	2,38	2,25	2,00	2,13	2,22
Endline improvement	0,88	0,25	0,63	0,75	0,38	0,63	0,38	0,50	0,88	0,50	0,63	0,58+

The little progress for result area 2c (Financial and Human resources) is related to the continuous dependency of SPOs on external (donor) funding. With the decrease of opportunities to find funding from Northern donors there is often a need to decrease staffing in order to reduce costs. Only four SPOs have a positive score on this result area with two organisations having a negative score. This indicates that the sustainability of SPOs is often very dependent on donor funding. A few initiatives are indicating that SPOs are taking this issue in a creative way: KRC has started its own coffee farm to have their own revenues, whereas GWED-G has opened a website targeting Northern individuals whom can donate directly to them.

Another area where little progress has been made is 3b (Transparency). SPOs are apparently still struggling to share the information and decision-making process in a transparent way. Also here one can observe that there are interesting initiatives such as VECO publishing outcome changes of their beneficiaries over time on their website, GWED-G has introduced a number of actions to improve the sharing of internal information, the improved planning of activities and the sharing of results.

As said most change has been realized between the baseline 2012 and the endline in 2014 for the related indicators 1a (social engagement) and 4a responsiveness. Apparently the SPOs are capable to formulate actions and plan the activities in close relationship with their target groups. This is one of

the strongholds of the Civil Society as compared to the Government institutions and is being confirmed in this MFS II evaluation.

The secondary improvements are also to some extent related. It appears that the improvements with regard to the result areas (2a) networking and (2b) dialogue and communication are very much related to the improvement realized on 4c (policy impact). As show the examples of SEATINI and UCMB – and KRC as well –networking skills of the organisation as well as dialogue and communication skills are to some extent an indication of successful lobbying and advocacy. This indicates that the improvement of these organisational capacities are an important condition for effective political engagement. Working together in a wide range of networks is important as well as the capacity to communicate and to develop a dialogue.

With regard to the relative low score on Social Impact (result area 4b) it has been observed that in many cases there was no or little evidence of social impact. Apparently the Monitoring and Evaluation systems of many SPOs are still relatively weak and do not provide the information needed to make a judged assessment of the impacts realized. In many cases the evidence remains anecdotal. This does not imply that there has not been any progress with regard to social impact. The best examples of good monitoring of the results with regard to social engagement are KRC, VECO, Mango Tree, UCMB and Send a Cow who are all five using quantitative methods to assess their results and impacts on the target population. Examples of all four are provided in the respective Technical Reports.

6.2 Causal mechanisms and attribution

With regard to the analysis of the causal mechanisms in all of the eight SPO projects case studies were implemented to assess the contribution of the individual SPO to Civil Society Strengthening (social engagement) and Lobbying and Advocacy (political engagement). The table below indicates the main focus of the SPO and the respective score on the baseline 2012 and endline 2014 for the relevant result areas of social impact (4b) and political impact (4c). The main focus is a relative one, all SPOs are engaged in CSS as well as lobbying and advocacy (maybe with the exception of UGMP). But this is a relative one: for most SPOs there is a clear specialisation with three SPOs visibly pursuing both goals but still with a different emphasis. The column of Causal mechanism provides the main elements which have contributed to the achievement of the results.

SPO	MDG	Main Focus	Score 4b	Score 4c	Causal mechanism
KRC	1	1. Advocacy 2. Civil Society Strengthening	2 +	3 =	KRC as a lead and initiator Information and communication skills Networking and platform creation Use of Mass media Focus on citizen’s rights
Send a Cow	1	Civil Society Strengthening	3 +	2 =	SACU’s very clear Graduation model Close collaboration with communities Responsive to local needs, e.g. VSLA

					Successful group approach
SEATINI	1	Advocacy	2 =	3 ++	SEATINI showing leadership Coalition building / networking Developing a joint strategy Advocating and lobbying at different levels Good research and information dissemination Based on evidence
VECO	1	1. Civil Society Strengthening 2. Advocacy	2 +	2 +	Capacity building for advocacy and lobbying Partnerships for joint planning and information sharing Awareness creation
Mango Tree	2	Civil Society Strengthening	2 +	2 +	Very clear strategy for educational sector Training of key stakeholders Capacity strengthening of local partners Communication strategy
UCMB	4/5/6	1. Advocacy 2. Civil Society Strengthening	2 +	3 +	UCMB taking the lead in advocacy and lobbying A comprehensive strategy Networking and collaboration skills both with government and partner organisations Evidence based Clear and relevant strategy for strengthening of Health Facilities Responsiveness
UGMP	7	Advocacy	2 =	1 +	Partnerships with many national and local CSOs Providing evidence-based reports to policy-makers Good information campaigns making use of the mass media (Citizen's Manifesto campaign)
GWED-G	7	Civil Society Strengthening	1 -	1 -	Providing inspiration to, sensitize and train target groups Capacity building for lobbying and advocacy

First of all the table learns that a certain form of specialization – either focus on Civil Society Strengthening or focus on Advocacy and Lobbying – pays off. The scores for respectively result area 4b and 4c are in most cases better for the area in which the SPO has specialized: KRC, Send a Cow, SEATINI, UCMB (and to a lesser extent UGMP where 4c is in the plus) are clearly providing evidence of this. The case of GWED-G is somewhat particular as there is a lack of data substantiating progress of their target group (social engagement). All results that are provided in the case study are mainly anecdotal based on individual cases and no information is provided of all groups being supported.

In terms of causal mechanisms a few stand out:

1. Civil Society Strengthening

- Clear development strategy which is based on real perceived needs, eg. Citizen’s rights (KRC), introduction of Savings and Credit Associations, (SACU), graduation model (SACU), Local Language for Literacy development (Mango Tree), Information management for Health Facilities (UCMB)
- Capacity development of target groups or Community Based Organisations (CBO):
- Responsiveness to priorities of target groups

2. Lobbying and Advocacy

- Leadership to take action for political change: KRC (Regional Framework), SEATINI (Tax Justice and Biosafety bill), UCMB (Public Private Partnerships in Health), UGMP (Citizen’s Manifesto).
- Network and coalition building for joint planning and action based on a common strategy: same examples as above as all lobbying and advocacy trajectories were implemented by coalitions.
- Evidence-based information to influence policy-makers: SEATINI, UCMB, UGMP
- Skills for engagement with policy-makers at different levels KRC (Regional Framework), SEATINI (at national and local levels), and UCMB (close partnership with Ministry of Health)

3. For both types of engagement

- Information and communication skills: use of mass media for dissemination of information to the target groups, KRC (Regional Framework), UGMP (Citizen’s Manifesto), Mango Tree (promotion of New Orthography)

On the basis of the (relatively subjective) “*assessment of project design*” the following table has been composed. The scores (1-10) for the different statements provide a relatively consistent picture: the design of the projects was in general well done with clear objectives and a pronounced strategy. The implementation of the project was generally in all cases implemented as designed; no large deviations from project design have been observed. Not all projects have been able to achieve all the stated objectives. In some cases this is due to the lack of quantitative data on project achievements. Where this information is available –as has been shown above – the assessment of results (at outcome and impact levels) has greatly enhanced the achievement of project objectives. With one exception it has become clear that the projects have greatly contributed to the achievement of the observed results. In the case of UGMP it remains unclear whether policy changes have been achieved as planned as the ones mentioned and found during the MFS II evaluation are mainly anecdotal and not substantiated.

Statements	Overall	GWED-G	KRC	SACU	SEATINI	MangoT	UCMB	UGMP	VECO
The project was well designed	8,3	7	9	10	8	10	9	7	6
The project was implemented as designed	8,3	8	8	8	9	8	8	8	9
The project reached all its objectives	7,8	6	8	8	8	9	9	6	8
The observed results are attributable to the project interventions	7,9	8	9	9	9	8	7	5	8

The observed results are relevant to the project beneficiaries	8,4	7	7	10	9	10	7	8	9
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Negative factors contributing to the non-achievement of results have in some instances been identified as well. Just to mention a few: the Regional Framework as developed under the leadership of KRC in West Uganda has suffered – and made itself dependent – from the difficulty to get external funding for the identified and planned activities. Despite the energy put into the Development Framework and the great interest by many stakeholders, the plans still have not materialized because of lack of funding. Another factor which often plays a role is the high turnover of staff (case of UCMB, . This may jeopardize the continuity of many CSOs due to conditions of employment, new career perspectives or issues within the organisation.

6.3 Relevance of results

The above presented table also presents the relevance of the projects. In most cases the results have been to a large or very large extent relevant to the target groups of the SPOs (7-10 on a scale to ten; average 8,4). The projects considerably differ in terms of approach and results. The relevance of each of the projects has been described in detail in the technical reports. Here it does not make sense to make a summary of the relevance as the relevance of each project is quite specific.

JOINT MFS-II EVALUATION UGANDA

ENDLINE REPORT 2015

Technical Papers

Erwin Bulte (WUR)

Jeroen Klomp (WUR)

Jan Duchoslav (WUR)

Francesco Cecchi (WUR)

Eric Kamphuis (ETC)

Bert Lof (ETC)



Reading list reports

1. Kampabits
2. St. Elizabeth's Girls Home
3. Diocese of Jinja
4. Health Child
5. Save Health for Uganda
6. War Child
7. FOKAPAWA
8. Uganda Red Cross Society
9. Dodoth Agro Pastoral Development Organisation
10. Rwenzori Consortium for Civic Competence
11. HEPS Uganda
12. TWaweza Uganda
13. Kabarole Research and Resource Centre
14. Southern and Eastern African Trade, Information and Negotiations Institute
15. VECO East Africa
16. Uganda Governance and Monitoring Platform
17. Uganda Catholic Medical Bureau's
18. Send a cow
19. Mango tree
20. Gulu Women Economic Development & Globalization

Appendix

- Research manuals 5C and CSI

Technical paper

KampaBits

1. Introduction

This technical report about KampaBits is one of the studies within the framework of the Joint MFSII evaluation at country level – Uganda. In particular, the report serves to give input to the overall joint evaluation report on MFSII funding to the Millennium Development Goals, Capacity Development, and Civil Society Strengthening.

The outline of this technical report is as follows. First, Chapter 2 gives a description of the context, in which KampaBits operates, highlighting the main relevant (international) political, economic, cultural and social issues with which the organization has to deal in pursuance of its objectives.

Chapter 3 gives the project description and profile of KampaBits e.g. its mission, vision, and strategic objectives. The data collection and analytical approach in section 3 gives attention to the methodological choice made. This study aims at giving plausible explications on the effectiveness of Terre des Hommes support to KampaBits, based on descriptive and qualitative evidence. These explanations are given to the KampaBits realized MDG outcomes. We end this report with a Discussion and Conclusion.

1.1. Brief summary of the analyses and the findings

In the study approach qualitative and quantitative research methods are combined. Our main results indicate that the project had no detectable impact on the beneficiaries wealth (measured in terms of possession of common assets). Given the roughness of our measure and the small sample size, this is not unexpected. The project had large and statistically very significant impact on the employment level of interviewed beneficiaries. Most of the new employment was in the IT sector.

2. Context

Uganda had a population of about 31 million in 2010, which was expected to increase to 38 million in 2015. The high population does not match with the growth in the economy resulting into significant percentages of people living below the poverty line. Current statistics indicate that in Uganda, youth and children constitute to 78 percent of the total population. In 2006 youth unemployment was about 3.2 percent and was more pronounced in urban areas than in rural areas.¹

Youth unemployment is attributed to mismatch between skills and education acquired and labor market demand, rural –urban migration, high population growth rate, and high fertility rate of 6.7 percent, limited private investments, poor investments and entrepreneurship skills and mismatch of demand and supply of labor market among others.

The rural urban migration trend has created a rapid growth in urban population and intensified competition in the urban labor market, at a disadvantage of young migrants, who have lower literacy rates compared to urban young people. As a consequence, migrants are often bound to find employment in the informal sector or to turn in criminal activity, drug industries and prostitution to survive. Even when there are opportunities for youth to attend school, their parents/guardians' poor resources bases leads to low enrolment rates and high dropout rates. This scenario denies the youth a chance to break the vicious cycle of poverty and further perpetuates it. Unfortunately, when youth in informal settlements are able to attend school, they are unable to later access meaningful employment owing to the policy makers' failure to orient school curricula with the needs of the private sector. Furthermore, some of those absorbed in the labor market have jobs that do not match their qualifications and personal development goals.

Over the past decades, growing levels of unemployment and underemployment among young people have been a source of great concern and is recognized that responding to as one of the main Millennium Development Goals

¹ MoF (2006). State of Uganda Population Report 2006. Kampala: Ministry of Finance, Planning and Economic Development (MoF).

Uganda needs to address the causes of unemployment among youth and create jobs in order to absorb the youth coming into the labor market in urban centers, specifically municipalities. Reversing this trend is a major challenge for especially Uganda whose population pyramid reflects a very high dependency ratio.

Like other bits in the region, KampaBits is a Not-for-Profit organization that seeks to empower disadvantaged youth from the informal settlements of Kampala, Musoma and Mukuru in Nairobi through ICT. The project thus aims at empowering disadvantaged youth while bridging the digital divide and forging links between Northern and Southern youth. This provides the vulnerable youth from informal settlements with basic skills in computer applications and web design.

3. Project description

Young people from Kampala's slums but with sufficient education (completed secondary school) are identified by five collaborating community-based organizations (Kiyita Family Alliance For Development, Kawempe Youth Centre, Banda Community Development Program, Network For African Leadership and St Elizabeth Girls Home). Next 40 applicants are selected for basic training every year.

The training consists of 4 parts with focus on micro-entrepreneurship skills, ICT multimedia skills (introduction to computer and media lab skills), life skills (how to fit in and make own decisions, build confidence) and on reproductive health and HIV/AIDS (focus group discussions on topics like abortion, pregnancies, how to choose a partner). Each year, all students completed what is called the basic training. The best 20 students from the basic training are then selected to continue for an advanced training,² which goes into more technical detail and builds further confidence. Potential employers are invited to graduation to network with the graduates.

4. Data collection

A total of 140 youths have participated in the training by 2014. Of those, 80 completed the advanced training. Of those, KampaBits had contact details for 89 graduates.³ We attempted to interview all of them, but only 46 were available for interview. Of those, 35 were graduates of the advanced training, making them overrepresented in our sample (76% in sample compared to 57% in population) at the expense of the graduates of the basic training only. Women are underrepresented in our sample (39% in sample, 51% in population).

Table 1: Sample overview

Class Year	Student population		Contacts available	Final sample	
	Total	of which advanced		Total	of which advanced
2013-2014	40	20	36	21	16
2012-2013	40	20	34	13	9
2011-2012	40	20	0	0	0
2010-2011	20	20	19	12	10
Total	140	80	89	46	35

² The main reason for not providing the advanced training to all students is lack of capacity, i.e. the size of the training facility and the number of computers. Two groups would therefore alternate in the facility for the initial basic training, which would be followed by an intensive advanced training for the best half of the students. The first academic year (2010-2011) was an exception to this as only 20 students participated in the basic training and all could consequently advance. KampaBits has since managed to expand its facilities so as to accommodate a total of 80 students for both the basic and advanced training starting in the current academic year (2014-2015).

³ KampaBits lost the files for academic year 2011-2012 (40 students). The remaining 11 missing dropped out.

Table 2: Descriptive statistics

	At enrollment	2014
Age	21.1 (2.40) 44	22.5 (2.96) 44
Female	0.391 (0.493) 46	
Years of education		12.8 (1.51) 41
Wealth	0.215 (0.218) 44	0.225 (0.167) 44
Employed	0.565 (0.501) 46	0.935 (0.250) 46
Employed in IT	0.000 (0.000) 46	0.696 (0.465) 46

Legend: mean
 (standard deviation)
 observations

In Table 2, we present the descriptive statistics of our sample, where

- *Age*: age in years
- *Female*: Dummy equal to 1 if female, 0 if male
- *Wealth*: Index on a scale of 0 to 1 constructed from yes/no to questions about possession of common assets
- *Employed*: Dummy equal to 1 if employed, 0 if unemployed
- *Employed in IT*: Dummy equal to 1 if employed in the field of IT, 0 otherwise

The survey instruments used on which the above variables are based are presented in Appendices 1-5.

5. Analyses and results

The beneficiaries are of a very specific demographic category: relatively highly educated youths from informal settlements who are involved with local grassroots NGOs. Such people are relatively few in Kampala. Combined with a typically rapid turnover of inhabitants in informal settlements, it was virtually impossible to identify a retraceable control group. No control groups is therefore used.

Given the small total number of beneficiaries and the consequently small sample, we rely mainly on qualitative data collected through semi-structured interviews. The nature of the data and the sample size predicate the analytical approach which involves descriptive and t-test statistics of coded qualitative data combined with simple socioeconomic quantitative indicators and illustrated with before and after narratives.

The sample is biased in favor of graduates of the advanced training, which could lead to an overestimation of impact. It is possible that graduates who have had a positive experience with the program are more likely to agree to be interviewed than those with a less positive experience. This could also lead to an overestimation of impact.

5.1. Research question 1: Provide the results; include sensitivity analyses; succinctly describe the major results.

Table 3: Project effects

	At enrollment	2014	Difference
Wealth	0.215 (0.033)	0.225 (0.025)	0.010 (0.041)
Employed	0.565 (0.074)	0.935 (0.037)	0.370 ^{***} (0.083)
Employed in IT	0.000 (0.000)	0.696 (0.069)	0.696 ^{***} (0.069)

Standard errors in parentheses
^{*} $p < 0.10$, ^{**} $p < 0.05$, ^{***} $p < 0.01$

Our first results indicate that the project had no detectable impact on the beneficiaries wealth (measured in terms of possession of common assets). Given the roughness of our measure and the small sample size, this is not unexpected. The project had large (37% points) and statistically very significant impact on the employment level of interviewed beneficiaries. Most of the new employment was in the IT sector.

In order to infer the same about the whole beneficiary population, we have to make several assumptions:

1. The sample of beneficiaries whose contact details were available (excluding academic year 2011-2012 and dropouts) is representative of the whole beneficiary population (including academic year 2011-12 and dropouts) in terms of pre- and post-training levels of employment.
2. The sample of interviewed beneficiaries is representative of the sample whose contact details were available in terms of employment level before training.
3. The sample of interviewed beneficiaries is representative of the sample whose contact details were available in terms of post-training employment.

To have a more in depth view, we make several simulations in which we gradually relax these assumptions as summarized in the table below along with the associated sample size.

Table 4: Effect simulation overview

	Assumption 1	Assumption 2	Assumption 3	Sample size
Scenario 0	YES	YES	YES	46
Scenario 1	YES	YES	NO	89
Scenario 2	YES	NO	NO	89
Scenario 3	NO	YES	NO	140
Scenario 4	NO	NO	NO	140

It should be easier for beneficiaries who completed the advanced training to find employment that for those who only completed the basic training. Since the advanced-level graduates are overrepresented in our sample, Assumption 3 is unlikely to hold, and post-training employment levels are likely to be lower in the whole population than in our sample. In Scenarios 1-4, we instead assume that none of the beneficiaries whose contact details were available but whom we could not interview got a new job after their training.

In Scenarios 2 and 4, we relax Assumption 2 so as to find the lowest level of pre-training employment which would render the project impact statistically insignificant. While it is quite possible that Assumption 2 does not hold, there is little reason to believe that the pre-training levels of employment should be lower in our sample than in the whole population as the advanced-level students – who are overrepresented in our sample - were selected based on their performance.

Since an entire class (academic year 2011-2012) was removed from the potential sample by an administrative mistake of the NGO and since the dropouts are not numerous, we believe that Assumption 1 is likely to hold. However, in order to test the robustness of our result, we relax it in Scenarios 3 and 4 by assuming the other extreme, i.e. that there was no gain in employment in the missing class of 2011-2012 and among the drop-outs.

Table 5: Effect simulation results

	At enrollment	2014	Difference
Scenario 0	0.565 (0.074)	0.935 (0.037)	0.370*** (0.083)
Scenario 1	0.562 (0.053)	0.753 (0.046)	0.191*** (0.070)
Scenario 2	0.640 (0.051)	0.753 (0.046)	0.112 (0.069)
Scenario 3	0.564 (0.042)	0.686 (0.039)	0.121** (0.069)
Scenario 4	0.593 (0.042)	0.686 (0.039)	0.093 (0.057)

Standard errors in parentheses

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Assuming similar pre-training levels of employment in the sample and the beneficiary population, but no employment increase outside of our sample, the project would still lead to a 12% point increase in employment, significant at the 5% level. Pre-training employment levels would have to be at least 3% points lower our sample as compared to the whole population. Such extreme scenarios are however just as unlikely as perfect representativeness of the sample. Their results should be interpreted as a lower bound similarly to the results of Scenario 1 being interpreted as an upper bound of the projects impact on employment.

While the exact magnitude of the impact of the project on the employment status of the beneficiaries is impossible to estimate, it likely to be significant both statistically and in terms of its magnitude.

5.2. Research question 2: Did the project reach its objectives? Can the results be attributed to the project? If not, why not? Did other factors play a role?

The aim of training vulnerable young people in new and marketable ICT technologies for self-reliance was met to the extent of increasing employment levels among the beneficiaries, most likely exceeding the self-declared 75% target. According to the beneficiaries, this is largely due to the high quality and the practicality of the training. As one respondent put it, "the curriculum of KampaBits was so unique and practical that we know a lot more than many university students of ICT." Another respondent explained: "I went to some institutions and universities to do a survey and I realized that KampaBits is much better than all of them. They are practical, they give you skills."

In addition to improving the employment of youths from slums, the project also had a social dimension. From the interviews conducted, it seems the youth that join the program are youth that want to change or want to improve their current conditions but feel helpless because they do not know how. KampaBits gives what they call "soft skills" necessary for finding and attaining jobs in both the formal and informal sector. When asked whether the graduates saw any changes in their behavior after completing the training, many spoke of gaining confidence and social skills: "KampaBits taught me how to handle tough situations calmly. It also taught me how to approach people and instilled confidence in me. I learnt how to conduct myself, etiquette, what to say and when," said one respondent. Even those who indicated that they were unemployed saw a positive change: "There is a change in my character; I am more optimistic, resourceful and I know life will get better if I get a job." The training encouraged the students to pursue their dreams; all respondents had clear ideas of where they saw themselves in 1 and 5 years' time. And all were positive and optimistic.

It could be argued that the CBOs from which many of the youth came to attend the training contributed more significantly to the success of the graduates. Only 13% of the respondents were not recommended to join the training by a CBO. The rest came mainly from MBOGO Foundation, Kiyita Family Alliance for Development (KIFAD), Kawempe Youth Centre (KYC), and St Elizabeth Girls Home. These are all well-established and successful CBOs with a good track-record of working with youths. Some of the CBOs (St. Elizabeth Girls Home and KYC) also have facilities for computer training. When the respondents were asked how many had received ICT training, 41% said yes, which means the majority learnt all their ICT

skills from the KampaBits training. Of the respondents who found employment after the training 88% were recommended by a CBO, of these, less than half had previously received any form of ICT training.

With regards to the changes in behavior, the respondents themselves attributed the increased confidence, maturity and resourcefulness to the KampaBits training. A respondent who previously volunteered for one of the recommending CBOs explained: "There is a change in my character. I have skills that I did not have before and I have been able to build on those skills so as to get where I am now. I can attribute my current success to KampaBits."

5.3. Research question 3: How relevant are the results?

The education of poor and disadvantaged populations has been a long-standing challenge to education systems in both developed and developing countries.^{4,5,6} As a result, among the most prominent of the MDG goals set by the United Nations are those related to education. The MDGs also set as a target to, "in cooperation with the private sector, make available the benefits of new technologies, especially information and communications." Often the investment in ICT-supported education programs is justified by their longer-term social and economic impacts, such as higher life satisfaction, higher income, improved health, and increased economic competitiveness and access to the global economy. Many of these anticipated outcomes are related to the internationally supported Millennium Development Goals, such as level of poverty, gender equity, literacy and health.

There is no doubt that the use of ICT is perceived as a catalyst for economic growth. ICT is defined as a set of activities that facilitate by electronic means the processing, transmission and display of information. Thus, it is important to know how the effectiveness of such a process has an impact on a nation's economy. A higher level of ICT capital stock per capita allows a typical economy to achieve a higher growth rate for given levels of growth in labor and capital inputs.

By using the MDG framework, Clark et al. have endeavored to demonstrate the potential of modern information technology in the fight against poverty, but they have also acknowledged its limitations. They conclude that ICTs play an important, but by no means sufficient, role in the urgently required redoubling of efforts to achieve these MDGs and in informing thinking about the post-2015 framework. Poverty is about marginalization, discrimination, exclusion, and inequality and the economic, political and social level. ICTs can help overcome divides and build the infrastructure for citizens to speak out and be heard.⁷

While primary education is free in Uganda under the Universal Primary Education policy tool, secondary education is not. Many youths, including some of the respondents, struggle to find money for school fees, especially when there are more pressing needs such as food, medical bills and rent. By removing the obstacle of money KampaBits gives intelligent hard working youth an opportunity to learn skills to develop them into productive and responsible young adults. Many respondents saw this as one of the main strongpoints of the KampaBits program. As one of them put it, he would "very much recommend the training because it is free of charge and it gives opportunity to the needy who cannot afford to pay."

⁴ Glewwe, P., and M. Kremer (2006). "Schools, Teachers, and Education Outcomes in Developing Countries." In E. Hanushek, and F. Welch (Eds.) *Handbook of the Economics of Education 2*, p. 945-1017. Amsterdam: Elsevier.

⁵ Planty, M., W. Hussar, T. Snyder, S. Provasnik, G. Kena, E. Dinkes, A. Kewal Ramani, and J. Kemp (2008). *The Condition of Education 2008*. Washington, D.C.: National Center for Education Statistics, Institute of Education Sciences, U.S. Department of Education.

⁶ World Bank (2004). *World Development Report 2004: Making Services Work for the Poor*. New York: Oxford University Press.

⁷ Clarke, S., G. Wylie, and H. Zomer (2013). "ICT 4 the MDGs? A Perspective on ICTs' Role in Addressing Urban Poverty in the Context of the Millennium Development Goals," *Information Technologies & International Development*, 9(4): 55-70.

5.4. Research question 4: How efficient was the project?

Below we report the total expenditure over the period 2010-2013 using three categories.

Table 6: Total expenditures

Year	2010		2011		2012		2013	
	Actual		Actual		Actual		Budget	
	Total	Per student	Total	Per student	Total	Per student	Total	Per student
Operational Costs	973	49	2,173	54	4,046	101	2,474	62
Program Costs:	282	14	351	9	1,466	37	868	22
One Time Costs:	1,998	100	707	18	319	8	359	9
Total in KSh.	3,253	163	3,231	81	5,832	146	3,700	923
Total in Intl. \$	13,555	678	13,462	337	24,299	607	15,418	385

The budget and realized costs are in Kenyan Shillings as the founder of KampaBits, NairoBits, is based in Kenya. The expenditures per student are higher compared to the given benchmarks by the synthesis team.

6. Discussion and conclusion

While the students were very positive about the training, they were also asked to give any recommendations to improve the training. Some maintained that the course was great and needed no improvements. However, some interesting suggestions were made. A reoccurring suggestion was to go into more detail on certain topics and packages, this was linked to increasing the length of the training, "The period was short. We would have benefitted more if it was longer, say a year and a half." Other respondents who only did the basic course argued that all students should be taken to the advanced level, so that they can all benefit.

Another recommendation that came up a few times was to get more training on networking and also related to this was to put the graduates in touch with relevant companies. Respondent 213 suggested organizing internships with IT companies. Doing an internship would give the graduates the experience of being in work environment, which Respondent 215 said was missing in the training. She felt she did not know what to do if she got employed.

A couple of the respondents felt that they should receive some kind of start-up capital either in the form of money or a laptop with which they can already start doing small jobs. An alternative is to "connect us with organizations that lend money with low interest and long pay."

A final recommendation or concern shared by many of the respondents was the certification received upon completion of the training. "The jobs are there but they are not easy to find with the qualifications we got from KampaBits because most employers prefer IT students/degree holders from universities. We face a lot of competition from university students and yet practically speaking we can do better work than them." If the qualifications were accredited by for example the Uganda National Council of Higher Education (NCHE), it would make it easier for the students to find jobs. The KampaBits training includes an entrepreneurship component because, as some of the graduates already found out, "There are many opportunities in the field especially of self-employment [...] there is so much demand for our services. [...] You get better paid when you are self-employed, you are not paid so well when you are working for someone else."

There are many recommendations from the graduates. Some can be incorporated and already are, like taking all students through to the advanced level of the training, but others may be more difficult such as accrediting the training and still providing it free of charge. Still, the respondents interviewed unanimously agreed that the course was very good and beneficial. It had not only given them new IT skills but also improved their character to help them to be better individuals in society.

6.1. Related literature:

Information and Communication Technologies (ICT) has been receiving mounting attention in recent years as a critical driving force for development in both developing and developed countries alike. Many scholars, have stressed the value of information and communication and they all tend to see these as prerequisites for economic and social development.^{8,9,10} Ngwainmbi describes development as an ongoing process which requires information in constant flow among politicians, decision makers, project leaders, and receivers. Moreover, information is a "non-exhaustible" item, i.e. its use does not in itself degrade its present or future availability.¹¹

Within the perspective of a developing nation, ICT supports a wide range of human activities and it offers a means of breaking barriers to knowledge, civic participation, social and economic opportunities. Developing countries aspire to boost economic and political capability through adopting forward looking development strategies, through promoting foreign direct investment, technology transfer, research and development, human resources development, and employment.¹²

The new wave of IT technologies create a new source of knowledge exchange and innovation to the poor communities to defend their interests.¹³ Wilson and Heeks argue that ICT, like any other new generic technologies, is often mentioned in wide prospective about what it can do for development. There is an overall belief that poor people and developing communities should gain eventually when adopting new technologies, the same way as developed communities do. Many claims are being made for the role of ICT in poverty alleviation and development facilitation. ICT may play three main roles in the development process of poor communities. First, ICT can be seen as a production sector, of either tangible (hardware) or intangible (software) products. The second role views ICT as an information processing technology, with the motivation that all people and enterprises in modern days need to process information that arises from inside and outside. Domestic information should be processed and interrelated with the indigenous environment to generate knowledge and to be ready for decision makers to enhance operations efficiency, productivity and accountability.¹⁴ This will allow the enterprise to acquire a competitive position at local, regional and international stage. The third promising role is the communication technologies, which is in line with views of ICT as a tool for fast and reliable communication and exchange of information and knowledge.¹⁵ Furthermore, the ICT sector requires less initial investments in capital and infrastructure than do more traditional sectors, which may be why high-tech industries are growing faster than medium-tech industries in developing countries.¹⁶

It is widely recognized that one of the vital determinants of competitiveness in developing countries is the skills of the workforce at all levels. The effective use of IT technologies requires skills, and the move from simple to complex technologies requires more, better and more diverse skills. Further, new technologies often call for entirely different skills, both for direct production and services and for the organization of production and for managing knowledge networks. The need for increased skills rises with the level of development, but even the least developed countries have to improve their human capital base if they are to grow and prosper. Traditional models of competition based on low costs and prices are being replaced by competition driven by quality, flexibility, design, reliability and networking. This change is not only in markets for advanced manufacturers but also in day-today use consumer goods like clothing, footwear and food products.¹⁷

Thus, the use of new technologies, especially information based technologies, calls for more, better and newer kinds of skills. The reason for this stems largely from both technological factors, as well as

⁸ Fuglesang, A. (1973). Applied communication in developing countries: ideas and observations. Uppsala: Dag Hammarskjold Foundation.

⁹ Rostow, W. (1960). The stages of Economic Growth. Cambridge: Cambridge University Press.

¹⁰ Lerner D. (1958). Passing of Traditional Society. Glencoe: Free Press.

¹¹ Ngwainmbi, E. (1995). Communication Efficiency and Rural Development in Africa: the case of Cameroon. Lanham: University Press of America.

¹² Sachs, J. (2005). The End of Poverty: Economic Possibilities for Our Time. New York: The Penguin Press.

¹³ Goransson, B., and J. Soderberg, J. (2003). "Long Waves and Information Technologies – On the Transition towards the Information Society," *Technovation*, 25(3): 203-211.

¹⁴ Wilson, G., and R. Heeks (2000). "Technology, Poverty, and Development." In T. Allen, and A. Thomas (Eds.) *Poverty and Development: Into the 21st Century*. New York: Open University and Oxford University Press.

¹⁵ Ngwainmbi, E. (1995). Communication Efficiency and Rural Development in Africa: the case of Cameroon. Lanham: University Press of America.

¹⁶ Jussawalla, M., and R. Taylor, and S. Pai (2001). "Lessons of Investment In Technology Parks and Their Role in Bridging the Digital Divide." Presented at the Virtual Global Super Projects Conference, Nov. 2001.

¹⁷ Narayanan, K. (2003). "Socio-economic empowerment through ICT education: A comparative analysis of Maharashtra and Rajasthan in India." Presented at the International Conference on the Convergence of Knowledge, Culture, Language and Information Technologies in Alexandria, 2-6 Dec. 2003.

organizational factors. These skills are subject to constant change. Consequently, the education and training system has to upgrade skills constantly in line with emerging needs. The ILO observed that the demand for professionals and technicians has increased in all countries, as their analytical, cognitive and behavioral skills equip them better to adapt to more sophisticated technology. In addition, the increased importance of networking between firms [and between firms and technology institutions] for competitiveness, requires specific “communicative” skills.¹⁷

While the formal Government sector continues to play an important role, it is the growth of private participation in providing affordable computer education, especially to the socially and economically under-privileged that appear to have provided the impetus for growth in qualified professionals. There is a broad consensus of appreciation on the role of NGOs in fostering the growth of supply in computer educated and qualified personnel.¹⁷

Education and training in computer program and packages is likely to increase the capabilities for job-seeking, which in turn would change the socio-economic structure of the households whose members have been the beneficiary of such program. Rasmussen examines the link between ICT and Poverty Reduction. He identifies the possibilities and pitfalls in this link and points out that many possible ICT projects lead (indirectly) to people’s participation [defined in terms of “the ability of people to take part in public processes and form an active part of society”]. More specifically, he argues that knowledge in ICT can be an “enabler” for people’s participation. In a detailed study Narayanan observed many tangible benefits from subsidized computer education among the beneficiaries from the states of Maharashtra and Rajasthan in India.¹⁸

7. Conclusion

Our results indicate that the project had no detectable impact on the beneficiaries wealth (measured in terms of possession of common assets). Given the roughness of our measure and the small sample size, this is not unexpected. The project had large (37% points) and statistically very significant impact on the employment level of interviewed beneficiaries. Most of the new employment was in the IT sector. The table below gives a summary of the conclusions of this project on a scale of 1 to 10, with 1 being “not at all” and 10 being “completely”.

Table 7: Evaluation table

Question	Score
The project was well designed	8
The project was implemented as designed	7
The project reached all its objectives	8
The observed results are attributable to the project interventions	8
The observed results are relevant to the project beneficiaries	10
The project was implemented efficiently	5

8. References

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9. Appendix

Appendix 1: Instruments – Personal information

NO.	QUESTION	ANSWER		CODING CATEGORIES
101	IS THE RESPONDENT MALE OR FEMALE?	<input type="checkbox"/>		1. Male 2. Female
102	In what month and year were you born?	M M	Y Y Y Y	RECORD THE DATE. IF THE RESPONDENT DOESN'T KNOW, ENTER 99 / 9999
103	What is the highest level of school you attended?	<input type="checkbox"/>		1. Primary 2. Lower Secondary (O) 3. Upper Secondary (A) 4. Tertiary / University
104	What is the highest class you completed at that level?	<input type="checkbox"/>		RECORD CLASS
106	What tribe do you belong to?	<input type="checkbox"/>		1. Muganda 2. Muteso 3. Musoga 4. Munyankole 5. Munyarwanda 6. Mukiga 7. Lango 8. Mugisu 9. Acholi 10. Lugbara 11. Munyoro 12. Mutoro 13. Karamojong 14. Other, specify: _____
107	What is your religion?	<input type="checkbox"/>		1. Christian 2. Muslim 3. Traditional 4. Other, specify: _____
108	Which program did you complete? a. ICT Multimedia b. Micro-Entrepreneurship program c. Life Skills Curriculum d. Reproductive Health and HIV/AIDS program	<input type="checkbox"/>	<input type="checkbox"/>	1. Yes 2. No
109	Which training did you do?	<input type="checkbox"/>		1. Basic training 2. Advanced training
110	Before coming to KampaBits, did you receive any ICT training?	<input type="checkbox"/>		1. Yes 2. No
		Before	After	
111	Do you or anyone in your household own any of the following? a. phone? b. radio? c. television? d. generator? e. bicycle? f. motorbike? g. car?	<input type="checkbox"/>	<input type="checkbox"/>	1. Yes 2. No
112	Are you married? PROBE FOR THE RESPONDENT'S MARITAL STATUS	<input type="checkbox"/>	<input type="checkbox"/>	1. Single 2. Married 3. Divorced 4. Separated 5. Widowed 6. Co-habiting
113	How many people live in your household, including yourself?	<input type="checkbox"/>	<input type="checkbox"/>	
114	How many rooms in your homestead are used by your household?	<input type="checkbox"/>	<input type="checkbox"/>	

115	What is the main material of your roof?	<input type="checkbox"/>	<input type="checkbox"/>	1. Thatch 2. Iron	3. Tiles 4. Other, specify: _____
116	What is the main material of your walls?	<input type="checkbox"/>	<input type="checkbox"/>	1. Mud 2. Mud block 3. Bricks	4. Iron 5. Other, specify: _____
117	What is the main material of your floor?	<input type="checkbox"/>	<input type="checkbox"/>	1. Mud / earth / dung 2. Cement	3. Tiles 4. Other, specify: _____

Appendix 2: Instruments – Livelihood

How have they met their daily needs? (e.g. with small jobs, steady job, farming, dependent on parents) If currently working, find out if it is related to the skills learnt at the training.	Before	After
Where have they been living? Who have they been living with? (e.g. with family, started own family, together with friends) How have they been contributing to their household? And the other members of the household? (e.g. money for food, school fees, farming, house chores etc.)	Before	After
What options or opportunities are there with regards to employment within this sector? Get some examples. Probe into the nature of the sector. (e.g. is there a demand, competitive, does it pay well etc.).		
To which CBO have they been registered (the one that recommended them for the program) What has their role been within that CBO (e.g. role model, mentor etc.)	Before	After

Appendix 3: Instruments – Social factors

<p>What social challenges have they faced? (e.g. unemployment, food insecurity, crime, unwanted pregnancy, access to healthcare etc.)</p>	<p>Before</p>	<p>After</p>
<p>How did they deal with these challenges? Did the program show them how to deal with these challenges, or give them skills to use to deal with these challenges? If yes, like what? If no, how do they deal with them?</p>	<p>Before</p>	<p>After</p>
<p>Do they see a change in their behaviour or character after completing the training? (e.g. more confident, resourceful, more organized, optimistic etc.)</p>		

Appendix 4: Instruments – Expectations

<p>Why did they join the program? What were their expectations at the start of the program? Did they get what they expected?</p>		
<p>What were their expectations after completing the program (e.g. confident of finding employment, enough knowledge to start own business)</p>		
<p>Where do they see themselves in:</p>	<p>1 year</p>	<p>5 years</p>

Appendix 5: Instruments – Training

<p>To what extent did the training prepare them for the job market? E.g. What were the most useful aspects? Did they receive enough business or entrepreneurship training? Did they receive tips on how to find jobs and market themselves?</p>	
<p>What could they have additionally benefited from?</p>	
<p>Would they recommend the training to others? Why or why not?</p>	

Technical paper

St. Elizabeth Girls Home

1. Introduction

This technical report about St. Elizabeth Girls Home (SEGH) is one of the studies within the framework of the Joint MFSII evaluation at country level – Uganda. In particular, the report serves to give input to the overall joint evaluation report on MFSII funding to the Millennium Development Goals, capacity development, and Civil Society Strengthening.

The outline of this technical report is as follows. First, Chapter 2 gives a description of the context in which St. Elizabeth operates, highlighting the main relevant (international) political, economic, cultural and social issues with which the organization has to deal in pursuance of its objectives.

Chapter 3 gives the project description and profile of St. Elizabeth's e.g. its mission, vision, and strategic objectives. The data collection and analytical approach in section 3 gives attention to the methodological choice made. This study aims to give plausible explanations on the effectiveness of Terre des Hommes' support to St. Elizabeth, based on descriptive and quantitative evidence. These explanations are given to St. Elizabeth's realized MDG outcomes. We end this report with a discussion and conclusion.

1.1. Brief summary of the analyses and the findings

In the study quantitative research methods are used to evaluate the objective of the project of improving the psycho-social position of the girls measured by their labor market prospects and the level of happiness after leaving the home. This technical paper reports a significant increase in both measures.

2. Context

In 2001, a document from a British charity, Jubilee Action, estimated that there were 8,000 Street Children in Uganda with around 4,000 of them living on the streets of Kampala, the Ugandan capital. Eight years down the line, this number is likely to have grown as a result of such social and economic problems as:

- HIV/AIDS – Uganda is reported to have about 2 million orphans of whom an estimated 900,000 have been orphaned by HIV / AIDS. An estimated 1 million adults and 100,000 children are infected with the virus, and there are about 70,000 new infections every year. Girls and women are significantly more vulnerable to infection than boys and men.¹
- Orphans are usually left in the care of an old grandmother or older siblings and with little in terms of resources. In some cases they are at home looking after an ailing parent. Some orphans are sent away by greedy relatives who want to take their property, especially land. The likelihood of these children dropping out of school, running away from home and ending up on the streets or as child laborers is high.
- Poverty – An estimated 38% of Ugandans live below the poverty line.² Poverty results from a complexity of malfunctioning and non-functioning socioeconomic systems that make it difficult for the common citizen to access basic needs. Sadly, it tends to create a vicious cycle.
- Effects of the internal conflict that prevailed in Northern Uganda for the period 1986 till 2006. Active conflict is no longer there but poverty remains very real; another impetus for adolescents to seek better opportunities elsewhere, particularly in the towns and cities of the country.
- Drought, hunger, insecurity in some of the North-Eastern districts in the country, particularly Karamoja district, continues to push families to migrate to other areas in search of a better livelihood. Women, boys and girls from Karamoja can be found in Mbale, Jinja and Kampala begging or doing whatever jobs they can find to make a living.

¹ UNICEF (2005), Situation Analysis of Child Poverty and Deprivation in Uganda. Kampala: The United Nations Children's Fund (UNICEF)

² UNICEF (2005), Situation Analysis of Child Poverty and Deprivation in Uganda. Kampala: The United Nations Children's Fund (UNICEF)

The effects of severe poverty, poor nutrition and health, no education, no skills, poorly informed and naive all add up to very limited access to opportunities for a decent livelihood, particularly for women and girls. It's not a wonder that girls faced with these difficulties end up in a situation of exploitation for cheap labor and commercial sex. Young girls end up as domestic workers, vendors and hawkers on the streets, working in restaurants and bars all for a pittance. Some engage in prostitution as well to make ends meet. These are the key target group for St. Elizabeth Girls Home (SEGH). Those at high risk of joining the streets are also assisted.

A study undertaken in 1997 by RYDA (Rubaga Youth Development Association) showed that majority of the (visible) girls on the streets were working in the three main Kampala markets of Owino, Nakasero and Kiseka. Information on the situation with child prostitution is scanty.

3. Project description

St. Elizabeth Girls Home is being managed by Sister Akiiki and in total about 21 staff members are being employed. SEGH aims at achieving the following objectives:

- To impart life-sustaining skills to the vulnerable girls (street and orphans) and other marginalized members in (society) through vocational skills training
- To provide counselling and psycho-social support to orphans, street children, marginalized women and widows.
- Re-settling empowered children with their guardian/parents and on jobs
- Promote the initiation of simple income generating projects to enhance household incomes.
- To have well-coordinated charitable activities within Kampala Archdiocese through reports, visits and meetings.

Project activities include street visits as well as visits to homes of orphan and destitute girls, most of them in Kampala's slum settlements. Rehabilitation is facilitated through counselling and center based activities such as sports, music, dance and drama activities. Alongside this the girls are encouraged to try/choose a vocational skill that they would want to train in. Most of the girls successfully go through the training and are finally re-settled on a job. Girls are taken into SEGH between 6 - 15 months and provided with:

- Basic literacy training (if needed)
- Life skills training and counselling
- Vocational training
- Apprenticeship in the field of their vocational training.
- Facilitation of job search upon the completion of the above

This is meant to allow them to find and maintain a stable job or start a business to support their livelihood.

4. Data collection

We collected the first wave of data in the Summer of 2012. All 82 girls that reside at the home at that time were interviewed using an Entry questionnaire. We asked the girls questions about their family situation, economic position and educational background. In 2013 we conducted a follow up survey when again all girls at that time staying at St. Elizabeth were interviewed. In more detail, 49 girls were already in the baseline interview in 2012, while 141 girls were interviewed for the first time. In the summer of 2013 an endline survey was held where a total of 116 girls were interviewed of which 107 who were interviewed for the first time. Of the girls who had been interviewed in 2012 and/or in 2013 and who were not still SEGH (212 in total), as many as possible (62) were traced down (mainly using the administration from the home) and interviewed using an Exit questionnaire³. The very high attrition rate (75%) is due to the relatively high turnover of people in low-income dwellings and jobs, which makes it difficult for the majority of former beneficiaries to be traced down. We address potential biases due to attrition econometrically.

³ To identify the beneficiaries we used the records from the home as SEGH use family tracing, follow-up meetings with family. The interviewers use the record sheet of the home to cross-check answers given by the girls as most girls may change the initial given answer as they have not yet build trust.

Figure 1 gives a graphical representation of our sample, while Table 1 presents the used sample in a more traditional manner. Tables 2 to 5 present the descriptive statistics.

Figure 1: Sample overview

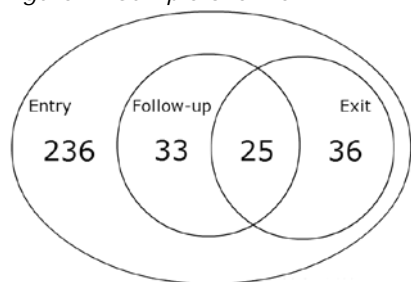


Table 1: Sample overview

	Sample	Sub-sample 1	Sub-sample 2
Questionnaire Respondents	Entry 330	Follow-up 58	Exit 62

Table 2: Descriptive statistics – socioeconomic situation

	Sample	Sub-sample 1		Sub-sample 2	
	Entry	Entry	Follow-up	Entry	Exit
Age	18.257 (3.318) 327	17.643 (3.403) 56	18.293 (3.34) 58	18.433 (3.538) 60	20.311 (3.334) 61
Education	8.897 (2.877) 330	8.483 (2.842) 58		9.082 (2.616) 61	9.596 (2.84) 57
Mother alive	0.712 (0.453) 323	0.684 (0.469) 57	0.648 (0.482) 54	0.738 (0.444) 61	0.774 (0.422) 62
Father alive	0.523 (0.5) 325	0.561 (0.501) 57	0.527 (0.504) 55	0.667 (0.475) 60	0.694 (0.465) 62
Bed	0.742 (0.438) 326	0.782 (0.417) 55		0.800 (0.403) 60	0.763 (0.429) 59
Trust	0.875 (0.232) 330	0.845 (0.238) 58	0.957 (0.106) 58	0.893 (0.191) 61	0.895 (0.228) 62

Legend: mean
(standard deviation)
observations

Where

- *Age*: Age of respondent in years at the time of the interview;
- *Education*: Number of completed years of education;
- *Mother alive*: Dummy equal to 1 if respondent's mother is alive at the time of the interview, 0 otherwise or if unknown;
- *Father alive*: Dummy taking the value 1 if respondent's father is still alive at the time of the interview, 0 otherwise or if unknown;
- *Bed*: Dummy equal to 1 if respondent usually slept on a bed before entering St. Elizabeth Girls Home (Entry questionnaires) or usually sleeps on a bed now (Exit questionnaire), 0 otherwise.
- *Trust*: Approximation of respondent's trust in the NGO – response to question "If you were in trouble, would you ask help from the sisters at St. Elizabeth" on a 5-point scale from "Certainly" (1) to "Certainly not" (0).

The descriptives show that on average the girls are about 18 years old when they enter the home and have completed about 8 to 9 years of education. Table 3 below shows the distribution of our sample over the different vocational trainings opportunities provided by the home, where

Table 3: Descriptive statistics - vocational training

	Sample	Sub-sample 1		Sub-sample 2	
	Entry ⁴	Entry ⁴	Follow-up ⁴	Entry ⁴	Exit ⁵
None	0.067 (0.250)	0.172 (0.381)	0.103 (0.307)	0.066 (0.250)	0.131 (0.340)
Catering	0.376 (0.485)	0.362 (0.485)	0.448 (0.502)	0.361 (0.484)	0.426 (0.499)
Tailoring	0.242 (0.429)	0.207 (0.409)	0.172 (0.381)	0.262 (0.444)	0.295 (0.460)
Knitting	0.012 (0.110)	0.000 (0.000)	0.000 (0.000)	0.000 (0.000)	0.000 (0.000)
Handicraft	0.009 (0.095)	0.000 (0.000)	0.000 (0.000)	0.000 (0.000)	0.000 (0.000)
Decoration	0.018 (0.134)	0.017 (0.131)	0.052 (0.223)	0.016 (0.128)	0.016 (0.128)
Hairdressing	0.273 (0.446)	0.241 (0.432)	0.293 (0.459)	0.311 (0.467)	0.230 (0.424)
ICT	0.109 (0.312)	0.017 (0.131)	0.138 (0.348)	0.098 (0.300)	0.049 (0.218)
Life skills					0.869 (0.340)
Stay					12.262 (7.842)
Observations	330	58	58	61	61

Legend: mean
(standard deviation)

Where

- *None*: Dummy equal to 1 if the respondent is (was) not enrolled in any vocational training program at the time of the interview (Entry and Follow-up questionnaires) or during the stay at SEGH (Exit questionnaire), 0 otherwise.
- *Catering, Tailoring, Knitting, Handicraft, Decoration, Hairdressing, ICT*: Dummies equal to 1 if the respondent is (was) enrolled in the respective vocational training program at the time of the interview (Entry and Follow-up questionnaires) or during the stay at SEGH (Exit questionnaire), 0 otherwise.
- *Life skills*: Dummy equal to 1 if the respondent completed the life skills course at SEGH, 0 otherwise.
- *Stay*: Total length of stay at SEGH in months.

The descriptive statistics show that most girls choose to follow training in catering, tailoring and hairdressing. The average stay in the home is slightly over one-year. In the next step, we perform a similar analysis using variables describing the living situation.

⁴ Data refer to situation at the time of the interview.

⁵ Recall data about time at St. Elizabeth.

Table 4: Descriptive statistics - living situation

	Sample Entry	Sub-sample 1 Entry	Sub-sample 2	
			Entry	Exit
Parents	0.388 (0.488)	0.293 (0.459)	0.345 (0.479)	0.190 (0.395)
Husband	0.006 (0.078)	0.000 (0.000)	0.000 (0.000)	0.086 (0.283)
Other relatives	0.427 (0.495)	0.362 (0.485)	0.466 (0.503)	0.483 (0.504)
Family	0.821 (0.384)	0.655 (0.479)	0.810 (0.395)	0.759 (0.475)
Friends	0.067 (0.250)	0.017 (0.131)	0.052 (0.223)	0.138 (0.348)
Religious inst.	0.021 (0.144)	0.052 (0.223)	0.000 (0.000)	0.052 (0.223)
Alone	0.006 (0.078)	0.017 (0.131)	0.000 (0.000)	0.052 (0.223)
Other safe situation	0.094 (0.292)	0.086 (0.283)	0.052 (0.223)	0.241 (0.432)
Strangers	0.073 (0.260)	0.207 (0.409)	0.138 (0.348)	0.000 (0.000)
Homeless	0.012 (0.110)	0.052 (0.223)	0.000 (0.000)	0.000 (0.000)
At risk	0.085 (0.279)	0.259 (0.442)	0.138 (0.348)	0.000 (0.000)
Observations	330	58	58	58

Legend: mean
(standard deviation)

Where

- *Parents*: Dummy equal to 1 if the respondent lived with her parents, 0 otherwise.
- *Husband*: Dummy equal to 1 if the respondent lived with her husband, 0 otherwise.
- *Other relatives*: Dummy equal to 1 if the respondent lived with other relatives, 0 otherwise.
- *Family*: Dummy equal to the sum of Parents, Husband and Other relatives.
- *Friends*: Dummy equal to 1 if the respondent lived with friends, 0 otherwise.
- *Religious inst.*: Dummy equal to 1 if the respondent lived in a religious institution (parish, convent, etc.), 0 otherwise.
- *Alone*: Dummy equal to 1 if the respondent lived alone, 0 otherwise.
- *Other safe situation*: Dummy equal to the sum of Friends, Religious institution and Alone.
- *Strangers*: Dummy equal to 1 if the respondent lived with strangers, 0 otherwise.
- *Homeless*: Dummy equal to 1 if the respondent was homeless, 0 otherwise.
- *At risk*: Dummy equal to the sum of *strangers* and *homeless*.

The descriptives show that before living at the home most girls were living with their parents or other relatives.^{5F6}

⁶ N.B. the data collected through the Entry questionnaire refer to the respondent's situation prior to entering SEGH; data collected through the Exit questionnaire refer to the respondent's situation at the time of the interview.

Table 5: Descriptive statistics – outcome indicators

	Sample	Sub-sample 1		Sub-sample 2	
	Entry	Entry	Follow-up	Entry	Exit
Happy before	0.480 (0.250) 329	0.524 (0.270) 58	0.393 (0.218) 58	0.502 (0.249) 61	0.419 (0.255) 62
Happy during	0.760 (0.136) 329	0.766 (0.188) 58	0.790 (0.095) 58	0.764 (0.139) 61	0.774 (0.133) 62
Happy after	0.833 (0.101) 329	0.903 (0.108) 58	0.807 (0.075) 58	0.839 (0.108) 61	0.677 (0.218) 62
Work	0.294 (0.456) 330	0.414 (0.497) 58		0.344 (0.479) 61	0.542 (0.502) 59

Legend: mean
 (standard deviation)
 observations

Finally, we describe the degree of happiness before, during and after staying at the SEGH and her labor market perspectives.

- *Happy before*: Happiness before entering SEGH reported on a 6 point scale from completely unhappy (0) to completely happy (1).
- *Happy during*: Happiness while at SEGH reported on a 6 point scale from completely unhappy (0) to completely happy (1).
- *Happy after*: Happiness since leaving SEGH reported on a 6 point scale from completely unhappy (0) to completely happy (1). For the entry survey we used the expected happiness after leaving the home.
- *Work*: Dummy equal to 1 if the respondent had a job before entering SEGH (Entry questionnaire) or has a job at the time of the interview (Exit questionnaire), 0 otherwise.

The pattern visible is that the home contributes to the happiness of the girls and also improves their labor market position. However, the results so far are based on these nonparametric tests and are therefore only suggestive as other confounding variables are not taken into account.

5. Analyses and results

Given the background of the beneficiaries, who should come mostly from dysfunctional households or directly from the street, it is practically impossible to identify a control group which we would later be able to locate for a follow-up survey. We therefore had to opt for a before/after comparison, using recall data as a pseudo-baseline. While this design is far from optimal in terms of its ability to precisely net out the intervention effects and limits us to rather crude estimations, we consider it the best available option given the specific nature of the evaluated project.

To find out if the high attrition rate does not lead to biased sub-samples, we run a probit estimation on Follow-up (dummy equal to 1 if the respondent was interviewed using the Follow-up questionnaire, 0 otherwise) which indicates inclusion in Sub-sample 1, and on Exit (dummy equal to 1 if the respondent was interviewed using the Exit questionnaire, 0 otherwise) which indicates inclusion in Sub-sample 2. We use several personal characteristics and dummies for living arrangements as regressors.

The results in Table 6 demonstrate that when girls have lived in risky conditions (i.e. in the street or with strangers) before coming to SEGH is a significant predictor of inclusion in both sub-samples. To interpret these findings some further, girls who lived in risky conditions before coming to SEGH are 44% more likely to remain in SEGH long enough to be included in Sub-sample 1 than girls who lived in safe conditions. Moreover, girls who lived in risky conditions before coming to SEGH are 21% more likely to

complete the stay at SEGH and be traced back for an interview in Sub-sample 2 than girls who lived in safe conditions. This suggests that girls who have nowhere safe to come back to are the most likely to stay at SEGH long or to successfully complete the stay.

Table 6: Randomness of attrition

	(1)		(2)	
	Probit Follow-up	dy/dx ⁷ Follow-up	Probit Exit	dy/dx ⁷ Follow-up
Age	-0.032 (0.031)	-0.008 (0.008)	0.031 (0.026)	0.008 (0.007)
Education	-0.012 (0.034)	-0.003 (0.008)	0.006 (0.033)	0.001 (0.008)
Mother alive	-0.026 (0.210)	-0.006 (0.051)	-0.002 (0.208)	-0.001 (0.053)
Father alive	0.034 (0.184)	0.008 (0.044)	0.471*** (0.182)	0.119*** (0.045)
Happy before	0.884** (0.376)	0.213** (0.089)	0.372 (0.182)	0.095 (0.090)
Happy during	-0.001 (0.594)	-0.000 (0.143)	-0.229 (0.638)	-0.058 (0.163)
Trust	-0.297 (0.367)	-0.071 (0.088)	0.548 (0.414)	0.140 (0.105)
Other safe situation	0.187 (0.304)	0.048 (0.084)	-0.356 (0.349)	-0.078 (0.064)
At risk	1.302*** (0.283)	0.443*** (0.106)	0.659** (0.290)	0.208** (0.108)
Constant	-0.596 (0.762)		-2.319 (0.787)	
Pseudo R ²	0.1025		0.0529	
	318		318	
Wald test:	X ² (9)			
	28.74		15.02	
	P > X ²	0.0007	0.0903	

Standard errors in parentheses

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Reported happiness before coming to SEGH seems to increase the probability of staying long enough to be included in Sub-sample 1, and having a living father. The Wald tests on the coefficients reveal that in both cases, the coefficients are jointly statistically different from 0, and that both sub-samples potentially suffer from selection bias. We correct for this in the following analysis using the Heckman selection model.

As the main objective of the project is to improve the psycho-social status of the girls, we defined two outcome indicators on which we base the effectiveness of the project. First, the labour market position of the girls. We measure this by a dummy variable taking the value 1 if the respondent has a paid job, 0 otherwise. Second, we use the happiness status of a girl as an outcome variable. We measure happiness, as already explained above, on a 6 point scale from completely unhappy (0) to completely happy (1).

⁷ Marginal effects at mean (for continuous variables) or for a discrete change from 0 to 1 (for dummies).

5.1. Research question 1: Provide the results; include sensitivity analyses; succinctly describe the major results.

5.1.1. Work

Because of the lack of a control group, we are limited to relatively simple before-and-after comparisons. To correct for the self-selection bias into Sub-sample 2, we do so through a Heckman selection model with standard errors clustered at the respondent level and the regressors from models (1) and (2) as selection predictors.

There are few possible potential confounding factors with sufficient variation to be included as regressors in the BSD: Life skills, Stay and Age. We gradually include these in the model.

We further estimate a probit model with the different types of vocational training as regressors to gauge how the choice of vocation impacts future employment.

Table 7: Work – project impact

	(3)		(4)		(5)	
	Heckman		Heckman		Heckman	
	Exit	Work	Exit	Work	Exit	Work
Exit		0.170** (0.082)		-0.362* (0.196)		-0.352* (0.395)
Exit × Life skills				0.375** (0.163)		0.395** (0.187)
Exit × Stay				0.019 (0.016)		0.013 (0.016)
Age ⁸						0.033 (0.022)
Selection predictors	yes	no	yes	no	yes	No
Constant	-2.485 (0.688)	0.903 (0.185)	-2.551 (0.674)	0.895 (0.176)	-0.2900 (0.595)	0.0125 (0.418)
Mills λ ⁹	-0.419** (0.030)		-0.408** (0.189)		-0.320* (0.171)	
Observations	633	115	633	115	631	113

Standard errors in parentheses

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

The results reported in Model (3) show that, overall, the project lead to an increase in employment of the beneficiaries. While the nature of the model does not allow for a direct interpretation of the magnitude of the coefficients as some of the resulting probabilities would fall outside of the unit interval, the descriptive statistics above show that in Sub-sample 2, employment rate increased from 34% to 54%, i.e. by 20% points.

The more detailed results in Models (4) and (5) show that this impact is conditional. The effect found in Model (3) is almost exclusively for the girls who had completed the life skills training, while those that did not complete the training in fact face lower chances of having a paid job than they had before entering SEGH.

⁸ Age at the time of the Exit interview.

⁹ All reported results come from a maximum-likelihood estimation of the Heckman selection model which allows for clustered standard errors, but which does not produce a Mills λ estimate. The reported Mills λ values therefore come from a two-step estimation. Estimating the models using the two-step approach does not significantly change the results.

Table 8: Work – vocational training impact

	(6) Probit Exit
Catering	-0.034 (0.430)
Tailoring	0.206 (0.475)
Decoration	omitted
Hairdressing	0.538 (0.501)
ICT	-0.647 (0.821)
Constant	0.021 (0.401)
Pseudo R ²	0.0301
Observations	57
Wald test: X ² (7)	2.23
P > X ²	0.6938

Standard errors in parentheses

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

The results presented in Model (6) demonstrate that none of the predictors have a significant effect on the beneficiaries' probability of having getting a job after leaving SEGH, and their joint effect is statistically indifferent from zero according to the results of the Wald test reported below. In other words, the choice of vocation does not seem to affect the likelihood of getting a job after leaving SEGH.

5.1.2. Happiness

We estimate the impact of the project on the happiness of the beneficiaries at 3 points of time:

- After their entry into SEGH
 - o We use a between subject difference (BSD) linear probability model with standard errors clustered at the respondent level and Age and Stay as confounding variables, estimated on the whole sample.
 - o Since probabilities predicted from the estimated coefficients of the linear probability model do not fall outside of the unit interval, we report results of the linear probability model instead of probit model for ease of interpretation.
- After a prolonged stay at SEGH
 - o To correct for the potential self-selection bias in Sub-sample 1, we use a Heckman selection model with Age and Stay as confounding variables and the regressors from model (1) as selection predictors.
- After leaving SEGH
 - o To correct for the potential self-selection bias in Sub-sample 2, we use a Heckman selection model with Age and Stay as confounding variables and the regressors from model (2) as selection predictors.

Table 9: Happiness – project impact

	(7) BSD Happy	(8) Heckman Follow-up	(9) BSD Happy	(10) Heckman Exit	(11) BSD Happy		
Entry	0.274 ^{***} (0.016)	0.361 ^{***} (0.033)	0.372 ^{***} (0.045)	0.338 ^{***} (0.038)	0.357 ^{***} (0.039)		
Follow-up		0.331 ^{***} (0.066)	0.332 ^{***} (0.045)				
Exit				0.104 [*] (0.063)	0.166 ^{**} (0.067)		
S × Stay	-0.000 (0.001)	0.004 (0.004)	0.005 [*] (0.002)	0.012 ^{***} (0.004)	0.008 (0.003)		
Age	0.001 (0.002)	-0.000 (0.004)	-0.000 (0.003)	-0.000 (0.005)	-0.001 (0.004)		
Selection predictors	no	yes	no	yes	no		
Constant	0.463 (0.043)	-0.596 (0.440)	0.416 (0.085)	0.397 (0.075)	-2.759 (0.482)	0.475 (0.135)	0.438 (0.087)
Observations	642	954	168	174	951	174	183
R ²	0.3198			0.5263			0.3627
Mills λ		0.006 (0.034)		0.028 (0.057)			

S ~ Entry in model (7), S ~ Follow-up in models (8) and (9), S ~Exit in model (10) and (11)

(Clustered) standard errors in parentheses

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

The results reported in Model (7) show that the girls report to be 27% (or 1 standard deviation) happier at SEGH than before. Models (8) and (9) show that the higher level of happiness persists throughout the stay. We use a Heckman selection model (8) to correct for self-selection bias in Sub-sample 1. While some selection predictors are individually statistically significant, the statistically insignificant Mills λ suggests that the bias has no effect on the outcome variable. We therefore also estimate a BSD model (9), which yields largely similar results.

Finally, Models (10) and (11) show that the reported level of happiness decreases by about half the initial increase once the girls leave SEGH, but stays well above the level before entering SEGH. We use a Heckman selection model (10) to correct for self-selection bias in Sub-sample 2, While some selection predictors are individually statistically significant, the statistically insignificant Mills λ suggests that the bias has no effect on the outcome variable. We therefore also estimate a BSD model (11), which yields largely similar results.

5.2. Research question 2: Did the project reach its objectives? Can the results be attributed to the project? If not, why not? Did other factors play a role?

Over the 3-year funding period, SEGH planned to enroll 180 girls living on the streets of Kampala or at very high risk of doing so, making sure that at least 50% of them leave the home with appropriate vocational training and find gainful and decent employment. This means that between the 1st and 3rd waves of data collection which took place 2 years apart, 180 girls should have been enrolled. With 330 girls interviewed during that period, the target was surpassed by almost 80%. By interpolation, 120 girls should have passed through SEGH during the 2-year evaluation period. 50% of them should have completed a vocational training course and found employment after leaving SEGH.

Given the lack of control a control group, it is difficult to attribute the effect to the project with absolute certainty. The only obvious factor which is likely to impact the girls' employment and which can be controlled for is their age. While older girls seem to be more likely to have a job than younger ones (as

can be expected in the target population of teenagers), controlling for age does not wash away the impact of the project.

Although the project seems to meet its output and outcome targets, it does so for beneficiaries who – for the most part – do not come from its target population of girls living on the streets of Kampala or at very high danger of doing so. Of the interviewed girls, 82% lived with their family immediately before entering SEGH – whether it be 39% with their parent(s) or 43% with other relatives. In fact, only 1% (4 girls of the 330 interviewed!) lived on the street and 7% with strangers.¹⁰ This is of course not to say that the project does not have a positive impact on the lives of its beneficiaries. It does, however, help different people than it claims.

5.3. Research question 3: How relevant are the results?

Skills development and improving the position of women are two main objectives outlined by the Uganda government, IMF and World Bank in their poverty reduction strategy. In this light, the project contributes positively to the country's macroeconomic, structural, and social policies in support of growth and poverty reduction.

During the past ten years, Ugandan cities have undergone rapid changes that have transformed the urban environment as well as the lives of millions of people who live in this setting. The impact of these changes is affecting almost everybody, particularly the urban poor. One of the growing social problems associated with these changes is the tremendous increase in unsupervised children either living alone or working on urban streets. The number of children who goes to the street has increased and the problem is especially acute in big cities like Kampala where the rates of urban population growth have been exploding amidst an intensifying and severe social and economic crisis. The majority of these children have for various reasons either abandoned or have been abandoned by their families and have migrated to urban areas in order to earn a living.¹¹

Many organizations have initiated community-based education programs with the primary objective of enabling street children and other marginalized groups to access education. Their education programs are often context specific and concentrate on the participants' true needs. The characteristics of the programs include: (a) open access; (b) it is mainly provided by the community; (c) it is part time; (d) it involves voluntary participation; (e) it can accommodate mixed age groups; (f) it is of short duration; (g) teaching is delivered by para-professionals and volunteers; and (h) it focuses on the less-fortunate and marginalized group.

5.4. Research question 4: How efficient was the project?

See the financial data in Appendix 1. During the evaluation period the average cost per girl increases. However, this is mainly due to one-time costs. We calculated the cost per girl by using the number of beneficiaries identified by the Home, which is about 200 girls annually. The expenditures per girl are well below the benchmark figures provided by the benchmarks given by the World Bank or the Ministry of Sports and Education of Uganda.

6. Discussion and conclusion

6.1. Related literature

Children living on the streets are a global and escalating problem, and girls are presumed to be especially vulnerable. Authors such as Boyden have poignantly described their situation.¹² In East Africa, this problem is comparatively new and is rapidly escalating, and most societies in this area have no or little preparedness to deal with the problem.¹³ The extended family traditions are now changing and some children are raised in poorly functioning extended families where fathers are often absent.¹⁴ The rapidly increasing number of AIDS orphans^{15,16} is contributing to the increasing number of street

¹⁰ The remaining 10% lived with friends, at a religious institution or alone.

¹¹ Lugalla, J., and J. Mbwambo (1999). "Street Children and Street Life in Urban Tanzania: The Culture of Surviving and its Implications for Children's Health," *International Journal of Urban and Regional Research*, 23(2): 329-344.

¹² Boyden J. (1991). *Children of the Cities*. London: Zed Books.

¹³ Deininger, K., M. Garcia., and K. Subbarao (2003). "AIDS-Induced Orphanhood as a Systemic Shock: Magnitude, Impact, and Program Interventions in Africa," *World Development*, 31(7): 1201-1220.

¹⁴ Kilbride, P. L., C. A. Suda, and E. H. N. Njeru (2000). *Street Children in Kenya: Voices of Children in Search of a Childhood*. Santa Barbara: Greenwood Publishing Group.

¹⁵ Foster, G., and J. Williamson (2000). "A Review of Current Literature on the Impact of HIV/AIDS on Children in Sub-Saharan Africa," *AIDS*, 14: S275-S284.

children. Additionally, many children have run away from home because of abuse.^{17,18} The violence experienced by East African street children in their families is closely connected to parental abuse,^{19,20} especially among girls.²¹

Access to education is often limited for street children, especially for girls, and levels of literacy are often low. Two thirds of those who do not attend school globally are girls —and girls in school are significantly less likely to have experienced sexual intercourse than girls who are not attending school.²² So poor young women face even more limited economic opportunities than young men and are more likely to experience human poverty — that is limited access to resources such as education, information and health services — as well as having less control over decision-making. Opportunities for employment may be restricted and decision-making is constrained by the necessity of meeting basic needs. Partly due to poverty, many young girls are forced to endure situations including discrimination, exploitation and axial isolation — that render them vulnerable to different kinds of 'street risks' such as sexual abuse.²³ There is a growing body of evidence that suggests that not just poverty, but stark economic inequalities have an impact on girls sexual and drug related behaviors.

Education is widely acknowledged to reduce poverty and thereby the chances of poor sexual and reproductive health and drug use. For instance, Lusk observed that nothing contributes more to a loss of human development potential than a childhood and a youth spent outside the framework of a family and school in the usually hostile environment of the street.²⁴ Education is known to increase girls' self-confidence, social and negotiation skills. as well as earning power — and this makes them less vulnerable to violence and sexual exploitation. Moreover, education also provides a forum in which to deliver information and build skills in relationship, Out-of-school young people are harder to reach with health messages.²⁵

The main purpose of street children education should not be limited to imparting information which is relevant for examinations, but rather to seek to provide education that is relevant to the children's impoverished circumstances and to the need they have to earn a living.²⁶ In many countries are too rigid to reach the children who, because of gender, ethnicity or poverty, don't have access to school. The challenge for schools and NGOs is to be flexible enough to adapt to the needs of disadvantaged children while offering education of sufficient quality to retain all children once they are in.²⁷

6.2. Conclusion and summary

The aim of the project is to rehabilitate girls living on the street in the attempt to escape from abusive, unpaid, underpaid or overloaded domestic work, abandonment, poverty or sickness in their homes as well as girls at high risk of joining street life. Upon identification by outreach staff, the girls are provided with shelter, psychosocial support and vocational training (including apprenticeship). Their reintegration into society is aided by job search facilitation.

The main research question underlying the evaluation therefore is: has the project improved the socio-economic situation of the beneficiaries? To answer this question, we rely mostly on standard socio-economic indicators with a focus on income and living conditions. The nature of the beneficiaries makes it nearly impossible to identify a control group that could be traced for the endline. In the absence of such a group, we opted for a before/after comparison using recall data as a pseudo-baseline. We used long-

¹⁶ Deininger, K., M. Garcia., and K. Subbarao (2003). "AIDS-Induced Orphanhood as a Systemic Shock: Magnitude, Impact, and Program Interventions in Africa," *World Development*, 31(7): 1201-1220.

¹⁷ Boyden J. (1991). *Children of the Cities*. London: Zed Books.

¹⁸ Matchinda, B. (1999). "The Impact of Home Background on the Decision of Children to Run Away: The Case of Yaounde City Street Children in Cameroon," *Child Abuse and Neglect*, 23(3): 245-255.

¹⁹ Ranji R., and M. Kudrati (1994). *Street Children of Mwanza: A Situation Analysis*. Mwanza: Kuleana Center for Children's Rights.

²⁰ Mdoe M. (1997). *Poor Urban Children at Risk in Dar es Salaam: A Participatory Research Report*. Dar es Salaam: Save the Children Fund.

²¹ Kilbride, P. L., C. A. Suda, and E. H. N. Njeru (2000). *Street Children in Kenya: Voices of Children in Search of a Childhood*. Santa Barbara: Greenwood Publishing Group.

²² Finger, B., M. Lapetina, and M. Pribila (2002). "Intervention Strategies that Work for Youth: Summary of the FOCUS on Young Adults End of Program Report." *Youth Issues Paper 1*. Research Triangle Park: Interagency Youth Working Group.

²³ Burns, A. A., C. D. Ruland, and W. Finger (2004). "Reaching Out-of-School Youth with Reproductive Health and HIV/AIDS Information and Services." *Youth Issues Paper 4*. Research Triangle Park: Interagency Youth Working Group.

²⁴ Lusk, M. W. (1989). *Street Children Programs in Latin America*. *The Journal of Sociology and Social Welfare*, 16(1): 55-77.

²⁵ UNICEF (2003). *The State of the World's Children 2003*. New York: The United Nations Children's Fund (UNICEF).

²⁶ Shorter, A., and E. Onyancha (1999). *Street Children in Africa: A Nairobi Case Study*. Nairobi: Paulines Publications Africa.

²⁷ UNICEF (1999). *The State of the World's Children 1999*. New York: The United Nations Children's Fund (UNICEF).

term recall data from beneficiaries who arrived shortly before the endline to partially compensate for the lack of a control group.

The main conclusion that can be drawn from our MDG analysis is that the psycho-social position of the girls improved after leaving the home. Besides, the project is rather financial efficient when comparing to similar benchmark projects. The table below gives a summary of the conclusions of this project on a scale of 1 to 10, with 1 being "not at all" and 10 being "completely".

Table 10: Evaluation table

Question	Score
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	7
The observed results are attributable to the project interventions	7
The observed results are relevant to the project beneficiaries	7
The project was implemented efficiently	7

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8. Appendix

Appendix 1: Financial efficiency

Description	2013		2012		2011		2010	
	TOTAL	TdH-NL	TOTAL	TdH-NL	TOTAL	TdH-NL	TOTAL	TdH-NL
OPERATIONAL COSTS								
Staff Salary and Benefits								
Director/Administrator /Human Resource	6,682,000	6,682,000						
Deputy	2,751,500	2,751,500						
Project Coordinator/Banking Agent	6,117,000	6,117,000						
Accountant	5,552,000	5,552,000						
Secretary	2,751,500	2,751,500						
Receptionist	840,000	649,000						
Socialworkers (2)	6,613,000	6,613,000						
Dean of studies	5,552,000	5,552,000						
Teaching staff/Instructors (8)	19,908,600	19,908,600						
Matron (2)	4,400,000	4,400,000						
Cooks (2)	4,102,000	4,102,000						
Night guard	2,725,000	2,725,000						
Day guard	2,190,000	2,190,000						
Driver	2,751,500	2,751,500						
Procurement/marketing officer	2,200,000	2,200,000						
Nurse	2,001,500	2,001,500						
Staff medical allowance	300,000	300,000						
10%NSSF employer's contribution	6,645,400	959,000						
Personnel cost	84,083,000	78,205,600	50,393,000	50,393,000	53,130,000		33,195,000	
Office Running Cost								
Maintenance/repairs	4,310,000	4,310,000	2,900,000	-				
Household utilities	4,700,000	4,700,000	2,402,200	-				
Electricity	5,504,527	5,504,527	3,300,000	-				
Water	2,622,500	2,622,500	2,509,124	-				
Telephone	80,000	80,000	325,000	-				
Stationery/photocopying	1,357,100	1,357,100	9,233,600	-	9,179,690		32,355,890	
Internet services	79,000	79,000	90,000	-				
Board allowances	750,000	750,000		-				
Bank Charges	1,414,220	1,414,220	1,635,980	-				
Office cost	20,817,347	20,817,347	22,395,904	-	9,179,690		32,355,890	
Total operational costs	104,900,347	99,022,947	72,788,904	50,393,000	62,309,690		65,550,890	

DIRECT PROGRAM COSTS						
Food	57,939,500	57,939,500	70,529,300	70,529,300	38,716,200	25,584,500
Firewood	6,880,000	6,880,000	6,010,000	-	1,906,000	3,805,000
Vocational Training materials	11,839,600	11,839,600	17,213,200	17,213,200	3,574,450	4,347,300
Medical Costs	2,989,000	2,989,000	3,364,300	3,364,300	2,491,500	1,252,000
Travel costs	2,512,000	2,512,000	1,675,000	1,675,000	-	-
Resettlement	7,000,000	7,000,000	9,030,000	9,030,000	7,621,500	3,462,500
Construct a class room and dormitory block	170,702,000	170,702,000	-	-	-	-
Furnishing	-	-	-	-	-	-
Total direct program costs	259,862,100	259,862,100	107,821,800	101,811,800	54,309,650	38,451,300
OTHER DIRECT COSTS						
Review Strategic Plan.	-	-	-	-	-	-
Train staff in management skills.	-	-	-	-	-	-
Stationery	-	-	-	-	-	-
Refreshments for participants	-	-	-	-	-	-
Facilitators for the Training	-	-	-	-	-	-
Staff team building/Get together	905,000	905,000	2,669,000	-	-	-
Transport	-	-	3,422,000	-	-	-
Project review	-	-	-	-	-	-
Audit	-	-	-	-	-	-
Other direct costs	905,000	905,000	6,091,000	-	-	-
Total 6000 Direct Program Cost	365,667,447	359,790,047	186,701,704	152,204,800	116,619,340	104,002,190
Exchange rate loss	3,182,183	-	-	-	-	-
Un fulfilled pledges	-	-	-	-	-	-
Grand total in Ugandan Shillings	368,849,630	359,790,047	186,701,704	152,204,800	116,619,340	104,002,190
Per girl in int\$ (student numbers based on 200 students a year)	445	434.529	225	184	141	126

Technical paper

Diocese of Jinja

1. Introduction

This technical report about the Diocese of Jinja is one of the studies within the framework of the Joint MFSII evaluation at country level - Uganda; In particular, the report serves to give input to the overall joint evaluation report on MFSII funding to the Millennium Development Goals, Capacity Development, and Civil Society Strengthening.

The outline of this technical report is as follows. First, Chapter 2 gives a description of the context, in which the Diocese of Jinja operates, highlighting the main relevant (international) political, economic, cultural and social issues with which the organization has to deal in pursuance of its objectives.

Chapter 3 gives the project description and the profile of the Diocese of Jinja e.g. its mission, vision, and strategic objectives. The data collection and analytical approach in section 3 gives attention to the methodological choice made. This study aims at giving plausible explications on the effectiveness of Cordaid/IICD's support to the Diocese of Jinja, based on empirical evidence. These explanations are given to the diocese's MDG realized outcomes. We end each part with a Discussion and Conclusion provide the findings of the analysis culminating in the conclusions with respect to the evaluation questions.

1.1. Brief summary of the analyses and the findings

In the study approach quantitative research methods are combined. The approach is centered on the comparison between triangulated baseline data (2012) and triangulated follow-up (endline) data (2014). We find a positive and statistically very significant effect of PBF on allocative efficiency (+30% at the most conservative estimate). The perceived quality of PBF facilities was between 4 and 4.5% points (or a third of a standard deviation) lower than in comparable facilities without PBF, but this gap is narrowed and becomes insignificant over time.

2. Context

Uganda's health sector was in a bad shape in the 70-ies and early 80-ies, due to military absolute rule and civil war over this period. With the advent of the National Resistance Movement (NRM) government in 1986, the country regained stability and important progress was realized by the introduction of democratic reforms and improvement of human rights. Since then the health sector also slowly started to recover. In 1986, the Expanded Program on Immunization (EPI) was re-launched; the Maternal and Child Health (MCH) program, Family Planning and the AIDS control programs were also introduced. By the early 1990s Uganda was among the African countries worst hit by the HIV/AIDS epidemic. The national government in cooperation with civil society organizations, gave a response to the epidemic with an open multi-sectoral approach.

Central to the health sector reform were decentralization, but certainly also the Structural Adjustment Programs that urged the government to reduce its responsibility for paying for social services, like health. As a consequence user fees were introduced into the public health system to meet the huge public sector deficit. The decentralization started in 1986 with the establishment of 'resistance councils', was reinforced in the 1995 constitution, and under the Local Government Act of 1997 further developed with special provisions for effective service delivery. Powers were devolved to district local authorities that belonged to the central government before.

The Ugandan health care delivery system was designed along this decentralised public system. This resulted in a multi-layered health care system from Health Centre I – IV as lower level units, with a district hospital for each district, and above this the regional and national referral hospitals.

The results of the health sector reform since 1995 until 2001 were disappointing. They showed that infant mortality figures had deteriorated and maternal mortality figures had hardly changed. The majority of the government budget appeared to be allocated to large hospitals (regional and national) and the central Ministry of Health (MoH), whose services benefits the urban population, rather than to

district level facilities providing primary health care services to the rural poor. Additionally donor projects, with high overheads, focused on investment goods and were inefficient at providing basic health care. User charges raised little revenue, and exemption schemes did not protect vulnerable groups; user fees were a significant barrier for poor people accessing services. Recognizing these failings, during the late 1990-ies, the Government of Uganda initiated a comprehensive program of radical health sector reforms. This included the decision to implement a sector-wide approach (SWAp) in August 2000, in order to improve coordination and with that efficiency and equity in the sector. The first national Health Sector Strategic Plan (HSSP-I; 2000/01- 2004/05) envisaged strengthening a minimum health care package (MHCP) within a decentralized, district-based primary health care approach.

Four main reforms aimed to improve the financing of health care from 2000 to 2005: the formal suspension of user-charges in the public sector, a substantial increase in the health budget, better coordination of donor aid, and redirection of resources away from tertiary level services towards primary level MHCP provision with the inclusion of Private Not-For-Profit Providers (PNFP), aside governmental health services. HSSP-II (2005/06 - 2009/20) represents a consolidation and extension of the achievements of HSSP I. The overall development and program goals of HSSP I remain and are to be attained through universal delivery of the Uganda National Minimum Health Care Package. The private sector however has always charged user fees and continues to do so. In the Private Not-For-Profit (PNFP) facilities, user fees provide on average more than 65% of lower level health centers and 40% of a hospital's income. Accessibility to the services of private not-for-profit facilities becomes more uncertain, due decreasing contributions from the government and the lowering of user fees. Affordability of health services still remains problematic, especially for the poorest.

Although the Ugandan Ministry of Health takes non-governmental providers into account in its planning, providing partial funding to some of them, private health facilities and practices account for half of Uganda's reported healthcare output and operate independently of public ones (Government of Uganda - Ministry of Health, 2010). The policies governing healthcare services in the country are thus logically as diverse as the service providers. In this complex situation, the Ugandan Ministry of Health piloted a large-scale PBF program for healthcare providers, which unfortunately turned out to be a failure (Morgan, 2010).

In this paper, we focus on one of the largest not-for-profit private healthcare providers in the country – the Uganda Catholic Medical Bureau (UCMB). The UCMB runs an extensive country-wide network of hospitals and health centers accounting for over a third of private healthcare facilities in Uganda (Government of Uganda - Ministry of Health, 2010).

In 2009, the UCMB – through the Diocesan Health office in Jinja and in cooperation with Cordaid/IICD – introduced a pilot PBF scheme in six of its health centers to test the practical feasibility of this new approach before possibly extending the scheme to all its health units. There are several levels of healthcare facilities in Uganda: hospitals (HC V), health centers (HC IV, HC III, HC II), and dispensaries and aid posts (HC I) (Björkman and Svensson, 2009). Our analysis focuses solely on HCs II and III, which are similar in terms of size and range of offered services and thus very suitable for comparison.¹

Performance-based financing (PBF) has, over the years, become one of the favorite ways to stimulate such improvements (Brenzel, 2009; Eldridge and Palmer, 2009; Hecht et al., 2004; Honda, 2013).² The basic idea behind PBF – reducing the principal-agent problem by conditioning funding on performance – is simple, and has in fact been extensively used in other contexts for a long time. Perhaps the best-known example are commission payments to sales representatives. In order to condition payment on performance, however, one must first be able to measure performance in a consistent manner. This is relatively straight forward in the case of a salesman who can report a simple dollar figure which easily captures his success, but considerably more complicated in the case of a healthcare facility whose output is much more multi-dimensional and the quality of whose work can hardly be monetized.

Even if performance is understood in its most limited sense as output, the many different types of output produced by a healthcare provider have to be taken into account when assessing its performance –

¹ Selected facilities all belong to the historically well-performing diocese of Jinja. Parallel trends can therefore not be assumed, precluding the possibility of using standard diff-in-diff approaches when measuring the effect of PBF. Instead, we use a time-series or panel-data structural-break approach.

² The acronym PBF is used interchangeably with terms such as Pay for Performance (P4P) and the World Bank's Results-Based Financing (RBF) (Honda, 2013; Oxman and Fretheim, 2009).

either individually or according to some conversion logic.³ Expanding the notion of performance to include the quality of produced output naturally complicates the matter even further. Some PBF schemes have nonetheless made attempts to condition funding on performance in quality indicators (Perrot et al., 2010). In Basinga et al. (2011) for example, quality is measured as an index of observable structural and process measures, and enters the payment formula as a multiplicative factor that may lower the output-based payment. Soeters et al. (2011) instead ensure quality maintenance through comprehensive agreements with providers and with regulators, and measure it through patient-perceived quality surveys that do not directly influence bonuses.

Besides the various ways in which they define and measure performance, PBF schemes differ along three major lines (Perrot et al., 2010):

- performance targets and associated payments may apply to individual employees or to entire facilities;
- conditional payments may make up the entire funding of the facility (or salary of the individual) or there may be a fixed component; and
- payments may be conditional on fixed targets or incremental.

Each PBF program is thus quite unique, and operates in a unique setting. It is therefore hard – if not impossible – to proclaim any combination of approaches as best practice (Ireland et al., 2011). In our case, incentives are targeted at the facility level, and make up only a fraction of total facility income with capped incremental bonuses.⁴ This set-up naturally minimizes direct monetary incentives, but if intrinsic motivation is at play, the resulting improved working conditions should increase effort and efficiency across the board.⁵

Literature identifies several potential pitfalls related to PBF. Oxman and Fretheim (2008) warn against the danger of widening the already existing gap between poorly- and well-performing facilities.⁶ Other concerns include the risk of increased gaming, i.e. systematic reporting bias (Lu, 1999), target-led distortions resulting in the production of services with negative marginal value (Wynia, 2009), and cherry-picking of patients who are most suited to achieve targets (Ireland et al., 2011). Finally, the bureaucratization of healthcare delivery, which is – to an extent – necessary to implement a PBF program, may end up crowding out motivation (Frey and Jegen, 2001), inducing a decline in physician professionalism and morale (Wharam et al., 2009).

Despite these issues, PBF is receiving increasing attention from academics as well as policy-makers. Several studies show how PBF has helped achieve specific (mostly output) targets (Basinga et al., 2011; Hecht et al., 2004; Meessen et al., 2007, 2006; Sekabaraga et al., 2011; Soeters et al., 2011, 2006), while accounts of unsuccessful implementation are much rarer (Banerjee et al., 2008; Morgan, 2010). However, to date, evidence is somewhat weak (Oxman and Fretheim, 2008), as even the most rigorous studies suffer from various methodological shortcomings (Fretheim et al., 2012).

3. Project description

The Health Office Diocese of Jinja (HODOJ) is a department of the Catholic Diocese of Jinja and was founded in 1987 to support and to coordinate the diocesan health facilities and community health and HIV/AIDS related issues. It is a semi-autonomous department that has its own governance and management systems. A diocesan health board provides governance and policy decision making while a team of dedicated staff coordinate and supervise the operations of the 6 health centers and two hospitals under the diocese. Health service delivery largely takes place at health facility levels. The core mandate of the health office is therefore supervision, coordination and representation of the health institutions under the diocese.

³ The former can lead to an overly complex set of performance targets, the latter runs a danger of over- or underestimating some types of output at the expense of others.

⁴ Bonuses make up about 5% of the total income of the health centers. User fees constitute the majority of funds.

⁵ According to Oxman and Fretheim (2008), qualified healthcare professionals may respond with increased effort to both extrinsic (monetary) and intrinsic (non-monetary) incentives with a possible substitution effect between the two. Leonard and Masatu (2010) take the argument further by showing that contrarily to non-professionals, intrinsically motivated Tanzanian clinicians with few extrinsic incentives, work as hard as those with strong extrinsic incentives. Exposing the other side of the coin, Reinikka and Svensson (2010) find that intrinsically motivated Ugandan not-for-profit practitioners respond positively to facility-level increases in funding.

⁶ However, if – as in our case – PBF brings in additional funding as an extra bonus for successful facilities, rather than at the expense of the poorly performing ones, the resulting improvements will be Pareto-efficient even if heterogeneous.

One of the core roles of the diocesan health office is to ensure adequate financing of health services in the diocese. For long, this has been a key challenge not only in Jinja but throughout the country. Private not for profit health facilities especially lower levels have mainly two sources of income namely user fees and government of Uganda grants. The later accounts for between 30 – 40% of the total income. User fees take up the other percentage. It is important to note though that lower level health facilities constantly operate in deficit budgets. The result is a disoriented and demotivated health workforce, poor quality services and dilapidated infrastructure. In 2008 the Diocese started with PBF with the following major objectives

- Increase on the accessibility of service delivery in the 6 Diocesan Health Units.
- To ensure efficient health service delivery by improving staff productivity and reducing of the costs of services
- Offer equitable service delivery by increasing the number of the vulnerable groups accessing (Equity) health services in the Diocesan Health Units.
- Improve on the safety and quality of service delivery at all levels.
- Build the capacity of the DHO staff for effective and efficient coordination of diocesan health service delivery.

As a result, the allocative efficiency (output per expenditure) should improve as well as the perceived quality. A variable bonus (up to about 5% of total income) is awarded to facilities based on their output in the previous fiscal year.

4. Data collection

To gauge the effect of PBF on healthcare output and on the allocative efficiency of healthcare delivery, we use a range of output and expenditure measurements collected by the UCMB from all its health units, which amount to a panel spanning up to 211 small-sized health centers over a period of thirteen years (FY 2001/2002 – FY 2013/2014). The last six fiscal years follow the introduction of PBF financing in the treated centers.

Output is measured using the Standard Unit of Output (SUO) – a unit in which the PBF targets are defined. The SUO is constructed from common services typically provided by small health facilities, taking into account their relative input requirements in terms of cost and time:

$$SUO = OPD + 5 * IPA + 2 * DEL + 0.3 * ANC + 0.2 * IMM \quad (1)$$

where *OPD* are outpatient visits, *IPA* inpatient admissions, *DEL* deliveries, *ANC* ante-natal care visits (including family planning) and *IMM* immunizations. Total expenditures (*EXP*) are measured in millions of 2010 Ugandan Shillings (USh.). Allocative efficiency (*EFF*) is consequently expressed in SUO per million USh. (inflation adjusted). The panel descriptive statistics for these variables – as well as for facility size measurements expressed as the total number of staff (*STF*) and as bed capacity (*BED*) – are presented in Table 1.

Table 1: Panel descriptive statistics

FY	Obs.	PBF	SUO	EXP	EFF	STF	BED
2001/02	78	No	10,471 (8,753)	78.1 (95.3)	196.8 (253.8)	11.7 (7.4)	19.8 (16.7)
2002/03	60	no	9,787 (6,209)	79.9 (56.9)	145.0 (94.0)	12.0 (8.0)	22.7 (16.8)
2003/04	120	no	11,982 (8,760)	86.7 (88.1)	181.5 (123.6)	11.7 (7.8)	19.4 (15.6)
2004/05	122	no	13,587 (9,543)	93.9 (91.2)	181.4 (121.5)	12.1 (8.3)	20.7 (16.0)
2005/06	145	no	12,798 (9,917)	87.7 (89.6)	183.4 (101.9)	10.8 (7.4)	19.8 (15.7)
2006/07	151	no	13,180 (10,012)	84.5 (81.9)	194.0 (122.4)	11.0 (7.7)	20.3 (15.7)
2007/08	170	no	12,956 (10,729)	72.3 (77.2)	225.8 (171.1)	10.4 (7.4)	19.5 (16.9)
2008/09	167	yes	15,533 (12,370)	75.9 (79.9)	266.1 (192.5)	9.8 (6.6)	18.3 (15.2)
2009/10	183	yes	18,361 (14,918)	97.7 (127.0)	246.7 (147.1)	10.7 (6.7)	21.3 (16.4)
2010/11	184	yes	15,635 (12,963)	90.6 (105.4)	235.4 (164.5)	11.0 (7.6)	20.8 (16.0)
2011/12	173	yes	14,660 (11,803)	91.3 (135.4)	250.8 (188.4)	11.2 (8.3)	22.0 (16.0)
2012/13	184	yes	15,063 (11,799)	83.8 (111.8)	284.3 (457.2)	11.5 (6.9)	21.9 (16.1)
2013/14	164	yes	15,042 (10,295)	92.4 (116.1)	248.2 (162.7)	12.1 (7.7)	22.3 (15.8)

Standard deviations in parentheses.

While our sample contains facilities belonging to the same size class, we further use the output and expenditure data along with several other characteristics to match the six PBF facilities with six similar ones receiving fixed funding, identified among other facilities in linguistically affine areas. The matches are based on a propensity score calculated from a set of indicators not constituting a building block of the SUO score, as measured in the last year prior to the introduction of the scheme. By matching on values collected before the implementation of PBF, we ensure that the propensity scores are not influenced by any potential confounding effects of the intervention. The indicators include the average length of hospitalization (*STY*), the total number of admissions (*ADM*), the total number of immunizations (*IMM*), the number of tetanus immunizations (*TET*) and the catchment population (*POP*). This results in two statistically similar groups of six facilities, balanced across a wide range of indicators.

shows that treatment and control groups do not differ significantly not only with respect to the matching characteristics, but also with respect to the two variables determining our allocative efficiency measure: *SUO* ($p=0.629$) and *EXP* ($p=0.770$).

Table 2: Sample balance – facility characteristics

	Control		PBF		Diff.	p
	Mean	Std. dev.	Mean	Std. dev.		
STY	1.52	1.34	1.38	1.22	0	0.898
IPD	1,418	1,647	1,148	1,910	-270	0.850
ADM	496	530	1,123	703	627	0.208
BED	13	10	19	8	7	0.362
IMM	3,726	2,118	8,334	7,089	4,607	0.179
TET	814	645	1,469	1,242	656	0.286
STF	8	7	9	6	1	0.805
POP	6,795	3,639	10,000	3,246	3,223	0.137
SUO	7,374	6,411	9,673	9,147	2,299	0.629
EXP	110	180	85	150	-29	0.770

In 2012 and in 2014 we conducted a HCAHPS-type patient satisfaction survey in these facilities to gauge the perceived quality of their service. While patient satisfaction is subjective, several studies endorse its validity as an instrument for measuring quality of healthcare (e.g. Andaleeb, 2001; Davies and Ware, 1988; Johansson et al., 2002) and it has recently been placed at the core of policy recommendations regarding PBF in the United States (e.g. Ryan, 2009; Wharam et al., 2009). Leonard (2008) uses the Hawthorne effect as an instrument to examine the responsiveness of patients to measurable increases in quality. The study shows that satisfaction is indeed jointly produced with quality during the course of a consultation and that patients respond to increased quality by being more likely to be satisfied. Moreover, patient satisfaction reflects both process quality and clinical quality (Marley et al., 2004), making it a good measure of the overall quality of healthcare delivery. To address concerns that perceived quality might be highly dependent on the relative differences vis-à-vis the nearest available alternatives, each of the units was further matched with the nearest similarly-sized public facility as well as a village half-way between the catchment areas of each private-public pair, resulting in a final sample of 24 facilities and 12 neighboring villages.

The sampling method used in the villages was stratified randomization, with 12 people (20 in 2014) randomly selected from a previously recorded census in each village. At the facilities, ad-hoc quota haphazard sampling was used instead, interviewing the first 10 people (18 in 2014) exiting the facility on a random day. In total, 384 interviews were carried out in 2012 and 672 in 2014, which – excluding respondents who had not visited the catholic facilities in since the introduction of PBF – resulted in 204 not incidentally truncated interviews in 2012 and 402 in 2014. From answers to a set of questions regarding various aspects of perceived quality of service, we factor out an index of perceived quality (*PQ*). Other personal-level confounding characteristics measured through the survey include a physical health index⁷ (*PHI*), an asset index⁸ (*ASI*) approximating wealth, functional literacy (*LIT*) – a dummy equal to one if the respondent reads a newspaper on a regular basis, sex (*FEM*) – a dummy equal to one if the respondent is female, and age (*AGE*).⁹ Finally, *MQS* is the mean perceived quality of the matched state-owned facility measured in the same way as *PQ*.¹⁰ The specific survey instruments are attached in Appendices 1–5. As can be seen in Table 3 and Table 4, the sample was well balanced across all the confounding characteristics (except for *MQS*) in 2012, but completely unbalanced in 2014. This issue will be addressed below.

⁷ The physical health index is based on the SF-12 Health Survey as proposed by Ware et al. (1996).

⁸ The asset index is obtained by principal factor, following Sahn and Stifel (2003).

⁹ Due to the fact that some personal-level confounding characteristics are not available for all observation, the usable sample decreases to 165 for a full specification. Nonetheless, given the sample distribution of *PQ* we can pick up relatively small effects of over 4.1 percentage points, with statistical power of 0.80.

¹⁰ We use the mean perceived quality of the main public facility rather than the quality perceived by each respondent, *de facto* controlling for the relative reputation of the public competitor.

Table 3: Sample balance – individual characteristics and MQS

	Control		PBF		Diff.	t
	Mean	Std. dev.	Mean	Std. dev.		
PHI	0.551	0.267	0.492	0.274	-0.059	1.56
ASI	0.252	0.177	0.258	0.195	0.005	-0.197
LIT	0.404	0.493	0.318	0.468	-0.086	1.278
FEM	0.713	0.455	0.718	0.452	-0.005	-0.085
AGE	37.438	19.008	35.857	14.685	-1.581	0.653
MQS	0.412	0.004	0.447	0.074	0.035	4.164***

Table 4: Follow-up sample balance – individual characteristics and MQS

	Control		PBF		Diff.	t
	Mean	Std. dev.	Mean	Std. dev.		
PHI	0.638	0.273	0.611	0.262	-0.027	-0.982
ASI	0.259	0.167	0.213	0.141	-0.046	-2.949***
LIT	0.297	0.458	0.127	0.333	-0.127	-4.316***
FEM	0.745	0.437	0.835	0.372	0.90	4.156***
AGE	40.624	15.561	34.418	14.120	-6.207	-31.068***
MQS	0.345	0.002	0.390	0.005	0.045	7.479***

5. Analyses and results

5.1. Research question 1: Provide the results; include sensitivity analyses; succinctly describe the major results.

5.1.1. Output and efficiency

To date, evidence concerning PBF is considered relatively weak. Most evaluations lack proper comparison groups, or confound the effect of performance incentives with additional elements of the program that might impact practices (Scheffler, 2010). Even the most rigorously designed randomized control trials (RCTs) are often unworkable, or prone to last-minute political and organizational interferences that might weaken the validity of the findings, especially in the context of developing countries (e.g. Soeters et al., 2006). In 2012, an editorial of the Bulletin of the World Health Organization about PBF in low- and middle-income countries advocated the use of “other robust evaluation designs [...] if conducting an RCT is not feasible. [...] One option is an interrupted time series, in which outcome data are collected at regular intervals during baseline and post-intervention periods” (Fretheim et al., 2012: p. 559). The UCMB dataset not only provides a large number of comparison facilities and variables collected yearly, but does so for a relatively long period of time prior (7 years) and after (6 years) the start of the intervention. This allows for rigorous panel-data estimations that can net out time and spatial facility-level effects as well as plausible first-degree autocorrelation. Moreover, the relatively washed-down version of PBF – monetary incentives are derived by the simple output formula presented in the previous chapter – allows for a straightforward measurement of the effects of output-based targets on performance.

Typically, productivity and efficiency analyses of healthcare delivery involve stochastic frontier analysis or data envelopment analysis approaches (Hollingsworth, 2008). Yet, Giuffrida & Gravelle (2001) find that econometric approaches estimating a production/cost function by fitting a regression plane to the data show highly correlated efficiency scores. We exclude the possibility of using linear programming techniques to construct a credible frontier enveloping all observations, given the noisiness of measures present in the dataset. Instead, we estimate the effect of PBF on allocative efficiency through a series of increasingly cautious panel regressions of the inflation adjusted SUO per million US\$ (EFF).¹¹

Panel data analysis helps reduce – if not resolve – key econometric problems often arising from empirical studies that use conventional cross-sectional or time-series datasets. The large number of data points increases the efficiency of econometric estimates and, by utilizing information on both the inter-temporal dynamics and the individuality of the entities being investigated, it better controls for the effects of

¹¹ The WHO-led Roundtable on Performance Based Financing voiced the concern that only one of the evaluations carried out at the time could isolate the effects of PBF incentives from increased resources (Ireland et al., 2011). While average additional finances in our sample approximate no more than 5% of the total, dividing the SUO by inflation adjusted expenditures ensures that additional resources are accounted for.

missing or unobserved variables (Hsiao, 2003). Also, by following facilities over a 13-year time span, we can construct a proper recursive structure to study the before–after effect, addressing concerns over the short-lived nature of PBF-induced increases in performance (Maynard, 2012; Oxman and Fretheim, 2008).

We start with a simple pooled OLS estimation, which yields a large, positive and statistically very significant effect of PBF on allocative efficiency, but which is biased due to the presence of fixed effects. We therefore proceed with estimating a fixed-effects (FE) model. To account for possible time effects, we include restrictions for fiscal years to produce a restricted fixed-effects (RFE) model. As more key econometric problems are accounted for, the estimates become increasingly smaller in magnitude, but remain significant and consistent:

$$\ln EFF_{it} = \beta_0 + \beta_1 PBF_{it} + \beta_2 \ln EXP_{it} + \beta_3 \ln STF_{it} + \beta_4 \ln BED_{it} + \eta_i + \varepsilon_{it} \quad (2)$$

where *EXP* represents total expenditures, *STF* is the total number of staff, *BED* is bed capacity. The static models developed so far produce quite consistent results, with *PBF* having a large, statistically significant, positive effect on cost-efficiency of service delivery. However, 48% of observations are missing, making the panel severely unbalanced.¹² Also, it can be expected that performance in one period is heavily influenced by performance in previous time periods (Scott & Coote, 2010), making it imperative to introduce dynamics into the model.¹³ Our final estimator is therefore a panel-robust two-step system GMM, which allows for correcting both autocorrelation and imbalances in the panel (Table 5).¹⁴

As assumptions are progressively relaxed and various problems corrected for in the above sequence of model specifications, the magnitude of the estimated effect of the introduction of PBF on allocative efficiency of service delivery decreases drastically from a hardly believable value of 80% in the pooled OLS model to a more realistic 31% in the system GMM model. Its statistical significance also decreases in the process, but always remains safely below the 10% level. The result thus seems to be quite robust.

¹² This is mostly the result of the expansion of the dataset through time (there are 78 observations in 2001, against 184 in 2013), and to a lesser extent to attrition. To verify the possibility of non-random censoring we apply the procedure proposed by Nijman and Verbeek (1992) to test for non-random attrition in unbalanced panels, which suggests that the censoring of the data is not random and should be addressed.

¹³ To verify the assumption of stationarity we run a series of augmented Dickey-Fuller (ADF) tests such as the Fisher-type test suggested by Choi (2001) and that of Im, Pesaran and Shim (2003). All tests lead to reject the null of non-stationarity at the 1% level. Likewise, we reject the null of no first-order autocorrelation in panel data (Wooldridge, 2002).

¹⁴ Following Roodman (2009), we use a (panel-robust) two-step Blundel-Bond system GMM estimator with forward orthogonal-deviations, both first differences and levels of the independent variables as standard instruments, and a GMM-style instrument that collapses all available lags of the lagged dependent variable for each time period into one moment. This model is successful in eliminating serial correlation (AR(2)), and the Nijman-Verbeek tests show no further evidence of detectible selection bias.

Table 5: Regression results

	(1) OLS	(2) FE	(3) RFE	(4) sysGMM
Dep. var.	<i>lnEFF</i>	<i>lnEFF</i>	<i>lnEFF</i>	<i>lnEFF</i>
<i>PBF</i>	0.738*** (0.131)	0.735*** (0.131)	0.486*** (0.104)	0.307* (0.167)
<i>lnSTF</i>	0.367*** (0.0431)	0.262*** (0.0520)	0.253*** (0.03429)	0.360*** (0.0407)
<i>lnEXP</i>	-0.674*** (0.0292)	-0.709*** (0.0314)	-0.733*** (0.0204)	-0.648*** (0.0309)
<i>lnBED</i>	0.168*** (0.0325)	0.255*** (0.0422)	0.160*** (0.0256)	0.159*** (0.0248)
<i>L.lnEFF</i>				0.124*** (0.0329)
Const.	6.691*** (0.105)	6.830*** (0.174)	6.801*** (0.107)	6.051*** (0.242)
Time FE	no	no	yes	yes
Space FE	no	no	no	yes
N	1903	1903	1903	1562
R ²	0.445	0.405	0.476	
Instruments				46
AR(2) z				-0.24
Sargan X ²				9.06
Hansen X ²				11.64
X ² df				11

Robust standard errors in parentheses, cluster robust s.e. (211) in columns 1-3 * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

5.1.2. Quality

Explicitly or not, quality improvements represent one of the core objectives of most PBF schemes. In the previous chapter we already outlined our choice to investigate quality through a HCAHPS-type survey rather than through observable structural and process measures. A meaningful measure of perceived quality of the health facilities can only be obtained from respondents who have recently received treatment in that same facility. This can potentially introduce a serious self-selection bias. Before proceeding to a full difference-in-differences model specification for estimating the effect of introducing PBF on the perceived quality of healthcare delivery, we therefore first estimate a bivariate sample-selection model as proposed by Heckman (1979) to check for such bias. While some of the observed characteristics affect the likelihood of visiting the private facility since the introduction of PBF, the coefficient on the inverse Mills ratio is statistically insignificant (Table 6, column 1). In other words, the observed patient characteristics determine – to an extent – their decision to visit the private facilities, but this does not significantly affect the results of the second-stage estimation. We therefore estimate the PBF effects using a simple difference-in-differences model with cluster-robust standard errors, on the sub-sample of not incidentally truncated interviews.

We first estimate a specification with only the PBF dummy as a regressor, and then gradually include the individual-level confounding characteristics and MQS until reaching the full cross-sectional specification:

$$PQ_i = \beta_0 + \beta_1 PBF_i + \beta_2 (PBF * FU)_i + \beta_3 FU_i + \beta_4 PHI_i + \beta_5 ASI_i + \beta_6 LIT_i + \beta_7 FEM_i + \beta_8 AGE_i + \beta_9 MQS_c + \varepsilon_i \quad (3)$$

where FU is a dummy equal to one for all observations from 2014, PHI is a physical health index of the respondent, ASI is an asset index of the respondent approximating wealth, LIT is a dummy equal to one

when if the respondent reads a newspaper on a regular basis, *FEM* is a dummy equal to one if the respondent is female, *AGE* is the age of the respondent and *MQS* is the mean perceived quality of the nearby state-owned health facility. Estimations results are presented in Table 6. To account for possible biases resulting from the imbalance in the 2014 sample, we further estimate a kernel propensity score difference-in-differences model, the results of which are presented in Table 7.

Table 6: Perceived quality of healthcare provision

	(1) Heckman		(2) OLS	(3) OLS	(4) OLS
	<i>PRV</i> ¹⁵	<i>PQ</i>	<i>PQ</i>	<i>PQ</i>	<i>PQ</i>
PBF		-0.0449*** (0.0156)	-0.0453* (0.0233)	-0.0399 (0.0222)	-0.0407* (0.0214)
PBFEL		0.0367* (0.0189)	0.0373* (0.0184)	0.0357* (0.0180)	0.0359* (0.0176)
EL		0.0377*** (0.0141)	0.0366*** (0.0116)	0.0355** (0.0119)	0.0354** (0.0120)
PHI	0.266 (0.162)			0.0333 (0.0235)	0.0335 (0.0237)
ASI	0.758*** (0.275)			-0.0166 (0.0218)	-0.0152 (0.0199)
LIT	-0.0600 (0.0979)			0.00628 (0.0107)	0.00632 (0.0107)
FEM	0.00415 (0.101)			0.00417 (0.0132)	0.00418 (0.0132)
AGE	0.00494* (0.00291)			0.000465 (0.000261)	0.000468 (0.000264)
MQS	1.987*** (0.654)				0.0179 (0.0874)
Const.	-1.071*** (0.353)	0.899*** (0.0342)	0.878*** (0.0180)	0.839*** (0.0261)	0.832*** (0.0441)
N	1028	592	602	592	592
P	0.0000	0.0000	0.0000	0.0000	0.0000
Mills λ	-0.0330 (0.0459)				
R ²			0.0748	0.0789	0.0790

Marginal effects; Standard errors in parentheses
(d) for discrete change of dummy variable from 0 to 1
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

¹⁵ *PRV* is a dummy equal to one if the respondent had visited the private facility within 3 years prior to the interview.

Table 7: Perceived quality of healthcare provision – Kernel PSM Difference-in-Differences

	Control	PBF	Diff (2012)	Control	PBF	Diff (2014)	Diff-in-diff
PQ	0.849	0.802	-0.047	0.923	0.907	-0.016	0.031
Std. error	0.015	0.016	0.022	0.007	0.007	0.01	0.02
T	58.28	50.16	-2.18	135.12	131.16	-1.69	1.52
P> t	0.000	0.000	0.052*	0.000	0.000	0.120	0.156

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

The results suggest that in 2012 (three years after the introduction of PBF) the perceived quality of PBF facilities was between 4 and 4.5% points (or a third of a standard deviation) lower than in comparable facilities without PBF. This effect seems to have washed away by 2014 as perceived quality increases faster in PBF facilities than in the control group.

5.2. Research question 2: Did the project reach its objectives? Can the results be attributed to the project? If not, why not? Did other factors play a role?

The efficiency results can be attributed to the project. The difference in quality in 2012 could be as much a result of the project as a remnant of previously lower quality.

5.3. Research question 3: How relevant are the results?

As the size effects are not negligible the results are rather relevant in achieving the MDG goals related to health. Though, the impact of PBF on allocative efficiency should be interpreted carefully as the most conservative estimate is still 30 percent.

5.4. Research question 4: How efficient was the project?

The detailed financial information is given in Appendix 1. As the financial information provided is not detailed enough on the expenditure/cost per treatment, it is hard to judge the financial performance and compare it with the provided benchmarks..

6. Discussion and conclusion

Using a panel of output and expenditure data in combination with a HCAHPS-type patient satisfaction survey focused on the perceived quality of healthcare, we estimated the contribution of performance-based financing towards achieving its objectives in the diocese of Jinja. First, we find that healthcare providers respond strongly to the output targets introduced by PBF by increasing output. Output growths are achieved primarily through a greater cost-effectiveness of service provision, of approximately 30% in the most conservative estimate. Second, this seems to come at the cost of a 4% lower service quality, at least as perceived by the patients. However these quality differences disappear in the follow-up study. Unfortunately, the timing of the evaluation prevents us from gauging whether initial lower perceived quality is because PBF was introduced into lower-quality facilities to begin with, or whether it was the introduction of PBF itself that led to a decrease in perceived quality cannot be determined as no baseline data exist. In any case, even if this initial negative effect is attributable to PBF, the fact that it washes away over time is at least reassuring that it is only short-lived. If the faster growth rate in perceived quality persists, an additional follow-up round of data collection could further reveal that PBF facilities show a higher perceived quality in the long-run—but this statement should be interpreted as purely speculative at this point.

The panel-data approach solves some of the methodological issues previously highlighted in literature (e.g. Fretheim et al., 2012). Yet, our findings are based on a non-random setting with a very small treatment group (only 6 facilities), and should therefore be taken with a pinch of salt. It is essential that these preliminary results be verified by further investigations, using more comprehensive quality data and a larger number of treated facilities than in the present study. Also, in case an expansion of the current scheme is envisaged, it would have to include not only carefully designed output targets, but also meaningful incentives for improvements in the quality service. Quality indicators such as the Comorbidity Adjusted Complications Index (Brailer et al., 1996), or selected Agency for Healthcare Research and Quality (AHRQ) Patient Safety Indicators (Romano et al., 2009), are either absolutely impracticable in a developing country context, or at high risk of creating further unintended distortions, but others could be implemented successfully. Raw readmission rates can easily be registered, while keeping track of 30-day

mortality rates is increasingly more feasible given the rapid adoption of mobile devices by even the poorer strata of population. Both would increase the risk of patient cherry-picking and avoidance, but that can be taken care of by expanding reporting systems in each community and by organizing independent audits along the lines of the current post-episode-of-care verifications.¹⁶

In short, PBF demonstrates great potential and a promising scope for success—the 30% increase in efficiency of output is beyond satisfactory. Yet, different PBF designs should be tested taking into consideration alternative ways of incorporating quality into the meaning of performance, minimizing the ills that come with it.

Table 8 reports a summary of our findings on a scale of 1 to 10, with 1 being “not at all” and 10 being “completely”.

Table 8: Evaluation table

Question	Score
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	9
The observed results are attributable to the project interventions	9
The observed results are relevant to the project beneficiaries	10
The project was implemented efficiently	N/A

7. References

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¹⁶ In fact, to spot any plausible fallacies in reporting, the Diocese of Jinja has activated additional post-episode-of-care verification system at the community level for PBF facilities. This could be expanded to control for patient avoidance.

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8. Appendix

Appendix 1: Instruments – Personal and household information

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
101	IS THE RESPONDENT MALE OR FEMALE?	<input type="checkbox"/>	1. Male 2. Female	
102	In what month and year were you born?	MM YYYY	RECORD THE DATE. IF THE RESPONDENT DOESN'T KNOW, ENTER 99 / 9999	
103	How old were you at your last birthday? COMPARE WITH 102 IF CONSISTENT. IF NOT, PROBE UNTIL CONSISTENT.	<input type="text"/> years	ENTER AGE IN COMPLETED YEARS.	
104	Are you married? PROBE FOR THE RESPONDENT'S MARITAL STATUS	<input type="checkbox"/>	1. Single 3. Divorced 5. Widowed 2. Married 4. Separated	
105	Have you ever attended school?	<input type="checkbox"/>	1. Yes 2. No	→ 106 → 109
106	What is the highest level of school you attended?	<input type="checkbox"/>	1. Primary 3. Upper secondary (A) 2. Lower secondary (O) 4. Tertiary / University	
107	What is the highest class you completed at that level?	<input type="text"/>	RECORD CLASS	
108	How often do you read a newspaper?	<input type="checkbox"/>	1. Almost every day 3. Less than once a week 2. At least once a week 4. Not at all	
109	How often do you listen to news on the radio or TV?	<input type="checkbox"/>	1. Almost every day 3. Less than once a week 2. At least once a week 4. Not at all	
110	What tribe do you belong to?	<input type="text"/>	1. Muganda 6. Mukiga 11. Munyoro 2. Muteso 7. Lango 12. Mutoro 3. Musoga 8. Mugisu 13. Karamojong 4. Munyankole 9. Acholi 14. Other, specify: 5. Munyarwanda 10. Lugbara	
111	What is your religion?	<input type="checkbox"/>	1. Christian 3. Traditional 2. Muslim 4. Other, specify: _____	
112	How many people live in your household, including yourself?	<input type="text"/>		
113	How many rooms in your homestead are used by your household?	<input type="text"/>		
114	Do you or anyone in your household own any of the following? a. phone? b. radio? c. television? d. generator? e. bicycle? f. motorbike? g. car?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Yes 2. No	
115	What is the main material of your roof?	<input type="checkbox"/>	1. Thatch 3. Other, specify: 2. Iron	
116	What is the main material of your walls?	<input type="checkbox"/>	1. Mud 3. Bricks 2. Mud block 4. Other, specify: _____	
117	What is the main material of your floor?	<input type="checkbox"/>	1. Mud / earth / dung 3. Tiles 2. Cement 4. Other, specify: _____	

Appendix 2: Instruments – Health status

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
201	In general, would you say your health is...	<input type="checkbox"/>	1. Excellent 2. Very good 3. Good 4. Fair 5. Poor	
202	Compared to one year ago, how would you rate your health in general now?	<input type="checkbox"/>	1. Much better than one year ago 2. Somewhat better than one year ago 3. About the same 4. Somewhat worse than one year ago 5. Much worse than one year ago	
203	Does your health now limit you in moderate activities such as carrying water or carrying a child?	<input type="checkbox"/>	1. Yes, limited a lot 2. Yes, limited a bit 3. No	
204	Does your health now limit you in climbing a steep hill?	<input type="checkbox"/>		
205	During the past 4 weeks, have you accomplished less than you would like as a result of your physical health?	<input type="checkbox"/>	1. Yes 2. No	
206	During the past 4 weeks, were you limited in the kind of work you could do as a result of your physical health?	<input type="checkbox"/>		
207	During the past 4 weeks, have you accomplished less than you would like as a result of any emotional problems?	<input type="checkbox"/>		
208	During the past 4 weeks, have you done your work less carefully than usual as a result of any emotional problems?	<input type="checkbox"/>		
209	During the past 4 weeks, how much did pain interfere with your normal work?	<input type="checkbox"/>	1. Not at all 2. A little bit 3. Moderately 4. Quite a bit 5. Extremely	
210	During the past 4 weeks, have you felt calm and peaceful?	<input type="checkbox"/>	1. All the time 2. Most of the time 3. A good bit of the time 4. Some of the time 5. A little of the time 6. Never	
211	During the past 4 weeks, have you had a lot of energy?	<input type="checkbox"/>		
212	During the past 4 weeks, have you felt downhearted and blue?	<input type="checkbox"/>		
213	During the past 4 weeks, have your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc...)?	<input type="checkbox"/>		
214	Have you ever been vaccinated?	<input type="checkbox"/>	1. Yes 2. No 3. Don't know	

Appendix 3: Instruments – Usage of facility¹⁷

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
301	!!! WHERE IS THE INTERVIEW TAKING PLACE?	└─┘	1. Catholic facility 2. Government facility 3. Elsewhere	→ 302 → 305 → 305
302	Did you just receive treatment in [CATHOLIC]?	└─┘	1. Yes 2. No	→ 303 → 305
303	What were you treated for?	└─┘	1. Injury, specify: _____ 2. Illness, specify: _____ 3. Check-up, specify: _____ 4. Delivery 5. Other, specify: _____	
304	How much did you pay for the treatment, excluding transportation but including all costs incurred at the hospital?	└─┘└─┘└─┘└─┘ 000 USh.	RECORD THE AMOUNT (ROUND TO THE NEAREST THOUSAND USH.) ENTER 999 IF THE RESPONDENT DOESN'T REMEMBER	→ 310
305	Have you ever received treatment [CATHOLIC] before?	└─┘	1. Yes 2. No	→ 306 → 5.
306	When was the last time you received treatment there?	MM YYYY	RECORD MONTH AND YEAR IF UNKNOWN, ENTER 99 / 9999	
307	What were you treated for?	└─┘	1. Injury, specify: _____ 2. Illness, specify: _____ 3. Check-up, specify: _____ 4. Delivery 5. Other, specify: _____	
308	How much did you pay for the treatment, excluding transportation but including all costs incurred at the hospital?	└─┘└─┘└─┘└─┘ 000 USh.	RECORD THE AMOUNT (ROUND TO THE NEAREST THOUSAND USH.) ENTER 999 IF THE RESPONDENT DOESN'T REMEMBER	
309	Did you later have to seek medical attention with the same problem?	└─┘	1. Yes 2. No	
310	Have you ever received treatment in [CATHOLIC] before that?	└─┘	1. Yes 2. No	→ 311 → 315
311	When?	MM YYYY	RECORD MONTH AND YEAR IF UNKNOWN, ENTER 99 / 9999	
312	What were you treated for?	└─┘	1. Injury, specify: _____ 2. Illness, specify: _____ 3. Check-up, specify: _____ 4. Delivery 5. Other, specify: _____	
313	How much did you pay for the treatment, excluding transportation but including all costs incurred at the hospital?	└─┘└─┘└─┘└─┘ 000 USh.	RECORD THE AMOUNT (ROUND TO THE NEAREST THOUSAND USH.) ENTER 999 IF THE RESPONDENT DOESN'T REMEMBER	
314	Did you later have to seek medical attention with the same problem?	└─┘	1. Yes 2. No	
315	What is the most important reason why you came to [CATHOLIC] instead of another health centre?	└─┘	1. It is cheap 2. It provides services of good quality 3. It provides the services I need 4. It is nearby 5. Other, specify: _____	

¹⁷ Questions related to catholic facilities are shown here. Questions related to government facilities were analogous.

Appendix 4: Instruments – Satisfaction with facility¹⁸

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
401	I will now read to you some statements about [CATHOLIC]. For each one, please tell me if you agree or disagree with it. a. The health personnel are compassionate, support and respect the patients. b. The health personnel allow sufficient time for each patient. c. The health personnel follow up on the patients and provide good clinical examination.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Agree completely 2. Agree just a bit 3. Disagree just a bit 4. Disagree completely 5. Don't know	
402	a. The medical equipment is adequate. b. There is an adequate number of health personnel. c. There is good availability of drugs and it is easy to obtain them.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
403	a. Drugs are prescribed when needed. b. The drugs are of good quality. c. Most people recover after the treatment.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
404	a. The cost of care is adequate. b. The cost of care is clear and transparent from the start. c. The health personnel are honest.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
405	How satisfied were you with... a. the way the hospital staff treated you? b. the competence of the staff c. the availability of treatment at the hospital? d. the quality of treatment? e. the waiting time at the hospital? f. the cleanliness of the hospital facilities? g. the way [CATHOLIC] listens to comments, complaints and suggestions? h. the overall quality of [CATHOLIC]?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Completely satisfied 2. Quite satisfied 3. A little bit satisfied 4. A little bit dissatisfied 5. Quite dissatisfied 6. Completely dissatisfied	

¹⁸ Questions related to catholic facilities are shown here. Questions related to government facilities were analogous.

Appendix 5: Instruments – Satisfaction with facility continued¹⁹

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
406	How did the following things change in [CATHOLIC] over the past 5 years in your opinion? a. the way the hospital staff treated you? b. the competence of the staff c. the availability of treatment at the hospital? d. the quality of treatment? e. the waiting time at the hospital? f. the cleanliness of the hospital facilities? g. the way [CATHOLIC] listens to comments, complaints and suggestions? h. the overall quality of [CATHOLIC]?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Improved a lot 2. Improved a little bit 3. No change 4. Deteriorated a little bit 5. Deteriorated a lot 6. Don't know	
407	CHECK QUESTION 406: IS ANY ANSWER CODED AS "1"?	<input type="checkbox"/>	1. Yes 2. No	→ 408 → 409
408	Can you give one example of how [CATHOLIC] improved a lot over the past 5 years? RECORD ANY COMMENTS BELOW:			
409	CHECK QUESTION 406: IS ANY ANSWER CODED AS "5"?	<input type="checkbox"/>	1. Yes 2. No	→ 410 → 5.
410	Can you give one example of how [CATHOLIC] deteriorated a lot over the past 5 years? RECORD ANY COMMENTS BELOW:			

¹⁹ Questions related to catholic facilities are shown here. Questions related to government facilities were analogous.

Appendix 6: Financial information

TOTAL EXPENDITURE, Diocese of Jinja, project 158/10147, 'Jinja: Integrated Health Care Program'

<i>Expenditure in Uganda Shilling</i>	jul 09 - jun 10	jul 10 - jun 11	jul 11 - jun 12	jul 12 - dec 12	TOTAL
HEALTH CENTRES					
Buswale Health Unit	20,498,814	26,772,945	26,669,871	14,360,500	88,302,130
Budini Health Unit	21,170,456	32,744,498	26,282,814	13,398,000	93,595,768
Wesunire Health Unit	19,570,691	27,595,328	26,996,021	12,894,000	87,056,040
Nawanyago Health Unit	20,507,907	24,180,228	25,362,650	12,991,000	83,041,785
St. Benedict Health Unit	18,040,200	22,203,640	22,018,359	11,751,400	74,013,599
Irundu Health Unit	1,482,344	-	-	-	1,482,344
DIOCESAN HEALTH OFFICE					
Personnel	34,083,192	42,153,061	44,100,000	(*)	120,336,253
Administration Costs (Cost of Office)	45,314,100	47,876,829	62,801,700	(*)	155,992,629
Equipment	3,726,000	380,000	3,751,000	(*)	7,857,000
Transport	1,901,000	2,691,424	5,499,800	(*)	10,092,224
PBF Training Mombasa	-	-	-	(*)	-
External Evaluation	-	-	12,400,000	(*)	12,400,000
TOTAL EXPENDITURE IN UGANDA SHILLING	186,294,704	226,597,953	255,882,215	65,394,900	734,169,772
Exchange rate Ushs/Euro	2,845	3,039	3,594	3,215	
TOTAL EXPENDITURE IN EURO	65,481	74,563	71,197	20,341	231,582
Total Cordaid funding	67,500	72,700	72,500	20,000	232,700
% of total	103%	98%	102%	98%	100%
Of which MFS II funds	-	9,500	72,500	20,000	102,000
% of total	0%	13%	102%	98%	44%

(*) costs of the Diocesan Health Office were accounted for under a different project, no. 106211

Technical paper

Health Child

1. Introduction

This technical report about Health Child is one of the studies within the framework of the Joint MFSII evaluation at country level - Uganda; In particular, the report serves to give input to the overall joint evaluation report on MFSII funding to the Millennium Development Goals, Capacity Development, and Civil Society Strengthening.

The outline of the technical report is as follows. First, Chapter 2 gives a description of the context, in which Health Child operates, highlighting the main relevant (international) political, economic, cultural and social issues with which the organization has to deal in pursuance of its objectives.

Chapter 3 gives a project description and the profile of Health Child e.g. its mission, vision, and strategic objectives. After chapter 3, the report is split up in to two parts. Chapter 4.1 deals with the contribution of Health Child to the millennium development goals, while chapter 4.2 explores the capacity development of Health Child. Both parts have the same remaining structure. The data collection and analytical approach section gives attention to the methodological choice made. This study aims at giving plausible explications on the effectiveness of Connect4Change's support to Health Child, based on regression, descriptive and theoretical evidence. These explanations are given to Health Child's capacity development and realized MDG outcomes. We end each part with a Discussion and Conclusion concerning the evaluation questions.

1.1. Brief summary of the analyses and the findings

In the study approach qualitative and quantitative research methods are combined. The approach is centered on the comparison between triangulated baseline data (2012) and triangulated follow-up (endline) data (2014).

1.1.1. Millennium development goals

The project had some positive impact on 8 of the 12 measured health outcome indicators. 2 of the remaining 4 (maternal care awareness and child immunization) had already high levels to begin with. Thanks to our use of a control group and to the inclusion of standard socioeconomic confounding factors into the models, we can safely attribute the reported results to the project. However, other factors also play a role in the actual levels of the outcome indicators, especially the age and the level of education of the mothers.

1.1.2. Capacity development

For this background documents, Focus groups/group interviews, workshops, and organizational self-assessments in August/September 2012 and June/September 2014, resulting in 2 sets of capability scores. Endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, were qualified in terms of 'improved', 'stable', or 'worsened'. The qualifications and their reasons were peer reviewed in a workshop.

In 2012 capacity development was given attention along with the MFS2 funded activities through Connect4Change (Cordaid & IICD). Cordaid was mostly focused on Maternal Child Health (MCH), but its role in developing core capability 1 -To act and commit, was clear: the support was given pragmatically, i.e. in line with the issues coming up in the area of program implementation. The clear progress in Core capability 1 can certainly be related to the efforts by Cordaid and IICD in the course of 2012 and after 2012 by Cordaid's involvement on its own.

With respect to Core capability 2 -To adapt & self-renew, and Core capability 3 -To deliver on development objectives, other funding agencies played their roles in addition to what Cordaid provided, especially in the execution of MCH / community involvement studies.

The change in the core capability 4 -To relate, showed overall improvement; Engagement in national networks became stronger, and engagement with target groups remained high. Clear improvement was reached in internal teambuilding. All improvements were realized on the organization's own merits and sometimes with the help of Cordaid.

Core capability 5 -To achieve coherence remained firmly stable; internal rules & regulations were updated; for seeking synergies there is room for improvement. Cordaid's involvement in this core capability was on incidental basis.

Cordaid's actual pragmatic and needs based approach can the best be maintained. However: Cordaid as main development partner of Health Child can better concentrate more on the organization's sustainability, but only when Health Child shows a proactive attitude towards acquisition of new assignments that fall in the organization's mandate. Cordaid is recommended to support Health Child in its funding base, by searching new options for diversifying international organizations that are involved in or linked to Health Child 's current programs and related package of activities.

In the current setup with other development partners, Cordaid is recommended to continue its involvement in Health Child also beyond the MFS2 program funding with program funding, but then on a more modest level. In case Health Child succeeds in diversifying its donor base, Cordaid is then recommended to phase out and to confine itself to punctual support. This should not necessarily entail support to further capacity development.

In the assessment of the project design the statements The project was well designed , The project was implemented as designed, and The project reached all its objectives were all rated respectively 8, 8, and 7 (out of 10).

2. Context

Uganda's health sector was in a bad shape in the 70-ies and early 80-ies, due to military absolute rule and civil war over this period. With the advent of the National Resistance Movement (NRM) government in 1986, the country regained stability and important progress was realized by the introduction of democratic reforms and improvement of human rights. Since then the health sector also slowly started to recover. In 1986, the Expanded Program on Immunization (EPI) was re-launched; the Maternal and Child Health (MCH) program, Family Planning and the AIDS control programs were also introduced. Central to the health sector reform were decentralization, but also the Structural Adjustment Programs that urged the government to reduce its responsibility for paying for social services, like health. As a consequence user fees were introduced into the public health system to meet the huge public sector deficit.

The Ugandan health care delivery system was designed along with the decentralized of the public system. This resulted in a multi-layered health care system from Health Centre I – IV as lower level units, with a hospital for each district, and above this the regional and national referral hospitals.¹

The results of the health sector reform since 1995 until 2001 were disappointing. They showed that infant mortality figures had deteriorated and maternal mortality figures had hardly changed. The majority of the government budget appeared to be allocated to large hospitals (regional and national) and the central Ministry of Health (MoH), whose services benefits the urban population, rather than to district level facilities providing primary health care services to the rural poor.

Additionally donor projects, with high overheads, focused on investment goods and were inefficient at providing basic health care. User charges raised little revenue, and exemption schemes did not protect vulnerable groups; user fees were a significant barrier for poor people accessing services.² Recognizing these failings, during the late 1990-ies, the Government of Uganda initiated a comprehensive program of radical health sector reforms. This included the decision to implement a sector-wide approach (SWAp) in August 2000, in order to improve coordination and with that efficiency and equity in the sector. The first

¹ Kirunga Tashobya, K., and P. Ogwang Ogwal (2004). "Primary Health Care and Health Sector Reforms in Uganda," Health Policy and Development 2(1)

² Yates, R., C. Kirunga Tashobya, V. Oliveira Cruz, B. McPake, F. Ssengooba, G. Murindwa, P. Lochoro, J. Bataringaya, H. Nazerali, and F. Omaswa (2006). "The Ugandan hHealth Systems Reforms: Miracle or Mirage?" In C. Kirunga Tashobya, F. Ssengooba, and V. Oliveira Cruz (Eds.), Health Systems Reforms in Uganda: Processes and Output. Kampala: Institute of Public Health, Makerere University, Health Systems Development Programme, London School of Hygiene & Tropical Medicine, Ministry of Health Uganda, p. 16.

national Health Sector Strategic Plan (HSSP-I; 2000/01- 2004/05) envisaged strengthening a minimum health care package (MHCP) within a decentralized, district-based primary health care approach.

Four main reforms aimed to improve the financing of health care from 2000 to 2005: the formal suspension of user-charges in the public sector, a substantial increase in the health budget, better coordination of donor aid, and redirection of resources away from tertiary level services towards primary level MHCP provision. HSSP-II (2005/06 - 2009/20) represents a consolidation and extension of the achievements of HSSP I. The overall program goals of HSSP I remained and were to be attained through universal delivery of the Uganda National Minimum Health Care Package (UMHCP).³

The strategy of the government of Uganda is to reduce maternal and infant mortality comprises a set of initiatives aim at improving reproductive health indicators. Emphasis is placed on three interventions which comprise Goal oriented Antenatal Care, Revitalization of Family Planning and Scaling up of Emergency Obstetric Care (EmOC).⁴ Although community oriented models herein are highlighted in government policy and programs (for example related to the UMHCP)⁵, their utility is never given full attention neither their contribution really measured.

Despite all interventions, access to and utilization of services remain very poor. Only 42 percent of the mothers deliver with skilled care. An estimated 2.6 percent of women have obstetric fistula. Approximately 297,000 unsafe abortions occur yearly, which means an estimated 16 abortions out of every 100 pregnancies; 55% of abortions are among those aged 15 to 20. Hence the unavailability of skilled attendance at birth, unmet need for family planning especially among the youth, HIV and AIDS, and a high maternal mortality, are Uganda's key reproductive health challenges.⁶ A community oriented approach can enhance uptake of post-partum care by helping the recording of referral and follow-up on women, who have delivered in the community, to turn up for post-partum care. Such approach can play a critical role in supporting family planning services, postpartum care, preventing mother to child transmission (PMTCT) of HIV and early infant HIV diagnosis and treatment.⁷

According to the Abuja declaration of April 2001, Uganda committed itself to allocate 15% of the National Budget to the health sector,^{8,9} however the health budget takes only 7.1% of the national budget in 2012.¹⁰ Uganda according to the Millennium Development Goals ought to have reduced the maternal Mortality ratio to 131 per 100,000 live births by 2015,¹¹ yet currently maternal mortality stands at 438 deaths per 100,000 live births.¹² The government of Uganda in search to accelerate achievement of the millennium development goals 4 and 5, developed the Roadmap for Reduction of Maternal and Newborn Mortality and Morbidity, aims at accelerating the reduction of maternal and neonatal morbidity and mortality and helping the country achieve the health related MDGs.¹³

Health Child is a community organization oriented on promoting knowledge, behavior and practices in mother and child care, and family planning within communities with the aim to decrease mother and child mortality rates. The organization works in the described health care arena and is for this supported by Cordaid and IICD with MFS2 funds since October 2010.

³ MoH (2005). Health Sector Strategic Plan II 2005/06 – 2009/2010, Volume 1. Kampala: Ministry of Health, p. ix.

⁴ GoU, UNFPA (2005). Country Programme Action Plan 2006 – 2010. Kampala: The Government of Uganda (GoU), The United Nations Population Fund (UNFPA), p. 6-8.

⁵ Ministry of Health (2005). Health Sector Strategic Plan II 2005/06 – 2009/2010, Volume 1. Kampala: Ministry of Health, p. ix.

⁶ GoU, UNFPA (2005). Country Programme Action Plan 2006 – 2010. Kampala: The Government of Uganda (GoU), The United Nations Population Fund (UNFPA), p. 53-54.

⁷ Government of Uganda (GoU), UNFPA (2009). Country Programme Action Plan 2010 – 2013. Kampala: The Government of Uganda (GoU), The United Nations Population Fund (UNFPA), p. 2-3.

⁸ Health Child (2011). "Using a Community Based approach to reduce maternal and infant mortality in Uganda: Accelerating uptake of post-partum care and promotion child health including early infant HIV diagnosis," project proposal submitted to Cordaid and IICD, p. 4.

⁹ WHO (2011). The Abuja Declaration: Ten Years On. Geneva: World Health Organization (WHO), p. 1.

¹⁰ This concerns the general government health expenditures from exclusively domestic financing sources (GGHE-FS).

¹¹ WHO (2015). "Health Expenditure Ratios: Data by Country," Global Health Observatory Data Repository. <<http://apps.who.int/gho/data/view.main.1900ALL?lang=en>>, Accessed 6 Jan. 2015.

¹² MoF (2013). Millennium Development Goals Report for Uganda 2013. Kampala: Ministry of Finance, Planning & Economic Development (MoF), p. 67.

¹³ UBOS (2012). Uganda Demographic and Health Survey 2011. Kampala: Uganda Bureau of Statistics (UBOS), p. 237.

¹⁴ MoH (2006). Roadmap for Accelerating the Reduction of Maternal and Neonatal Mortality and Morbidity in Uganda 2007-2015, Republic of Uganda. Kampala: Ministry of Health (MoH), p. 7.

3. Project description

3.1. Profile Southern Partner Organization (SPO)

Health Child is a registered Non-Government Organization in Uganda operating in Eastern, Northern and Central Uganda, currently in Jinja, Wakiso, Apac and Lira Districts.¹⁴ The organisation was established in 2006; the focus of Health Child's interventions lies on improving the health and wellbeing of young children aged 0-8 years and women in child bearing age. The organisation's aim at promoting child and maternal health, early childhood education, child nutrition and child protection.

In general Health Child works in underserved communities without adequate access to social services, which primarily include the fishing communities, urban slum dwellers and hard to reach geographical areas.

In the mission statement the organization's main orientation is formulated in its Strategic Plan 2010-2014; the formulation focuses on the organization's way of working:

"Health Child strives to be an effective bridge maker between grassroots communities and service providers including government and social partners, in accelerating accessibility to quantity and quality health and other services for prevention of child morbidity and mortality, and enhancing the care environment for early childhood development in underserved communities."¹⁵

Later in its Annual Report 2013 the mission was formulated; this formulation focused on final outcomes to be reached:

"To create a safe, secure and healthy environment for children and caregivers so that children both girls and boys, can experience a safe and fruitful childhood to grow and become responsible and productive persons in their communities."¹⁶

Health child has been working in the past five years in Eastern and Central Uganda i.e. in Jinja and Wakiso. At the period of its inception, the organisation also briefly worked in Kampala district. Health Child has expanded its activities by adding one more region i.e. Northern Uganda to its scope. In this area its interventions are focused on the districts Apac and Lira/Kitgum. Given the growing demand for Health Child's work in the fishing communities, interventions to that end are currently scaled up in other districts i.e. Mayuge (Eastern) and Buikwe (Central), where the need for child protection and development services is critical.

In summary the organisation addresses currently the following outcomes:

- Reduced maternal and infant mortality
- Increased safe deliveries
- Increased access to health services through improved ability for communities to lobby for the services
- Reduced levels of infant and child malnutrition
- Increased government/district commitment to improve health services
- Increased levels of school enrolment
- Improved and effective demand for health services by the communities¹⁷

These outcomes have to be reached in a mix of field activities, networking, advocacy, ICT applications, and the acquisition of funds. To this end the Strategic Plan 2010-2014 formulates six main goals:

1. Promotion of child health in underserved communities (later reformulated in: Reduce maternal and Child mortality in Uganda)
2. Promotion of early learning
3. Improving the general care environment
4. Research and community advocacy
5. Promotion of ICTs for health and learning communities
6. Strong resource mobilisation and sustainability¹⁸

¹⁴ Health Child (2014). <<http://www.healthchild.org.ug>> Accessed 6. Jan. 2015.

¹⁵ Health Child (2009). "Health Child Strategic Plan 2010-2014," Draft, p. 1.

¹⁶ Health Child (2014). "Strengthening Interventions: Enabling Communities to Create a Safe Environment for Children," Health Child Annual Report 2013, p. 3.

¹⁷ ETC (2014). "Health Child within MFS2 Evaluation Capacity Development Uganda" Report from endline workshop held on 10 June 2014, p. 7.

¹⁸ Health Child (2009). "Health Child Strategic Plan 2010-2014," Draft, p. 2-3.

A strategic plan for the next five years has not been issued, but from recent data collection on the organisation (endline workshop, interviews, annual reports, research studies for example) cannot be derived that the organisation will drastically change its course. Health Child's actual and future activities concern the following:¹⁹

- *Maternal and child health* (Refresher training and support supervision of health workers on neonatal care, Delivering maternal and child health services by village health teams -VHT's-)
- *Mobilisation community knowledge to reduce malnutrition* (Grandmother mentors for improving children's nutrition)
- *Creating livelihood options for urban families* (Credit and savings systems for poor families)
- *Enacting laws for sanitation* (By laws at sub-county level with indicators)
- *Communication tools for improved health outcomes* (dissemination parents' testimonies on simple steps in improving child health, community radio broadcasts, mobile phone text messaging)
- *Improved quality early learning for children* (Supervision of Early Childhood Development -ECD- focal persons, Sustain Health Child supported ECD community based centers)
- *Community based child protection* (Equipping children to protect their rights (school debates, counselling, drama, regarding child neglect, physical abuse, domestic violence, child labour, emotional abuse, sexual abuse, children in conflict with the law)
- *Knowledge management* (sharing successes, research assignments MCH)

The size of Health Child's staff increased over time, but also changed of character. In June 2012 Board and staff consisted of: 5 Board members, 10 staff members, of which 8 program staff, 2 supporting staff, and 2 volunteers working in 1 field office (in Jinja), and 1 head office (in Kampala).²⁰ Per December 2013 the staff consisted of 16 members, of which in 4 Jinja; new partnerships with Lira and Apac district health offices was then started.²¹

Per August 2014 the organisation's staff still consists of 16 members, but now 6 Mother & Child Health officers instead of 4 were employed, due to increased activities in the region. The Scheme fund manager and monitoring & evaluation officer that were in the 2013 staff are not anymore there. In view with the organisation's funding perspective beyond 2015, this looks as a risk for the organisation.²²

Expenditures over the years 2012 and 2013 give an indication about the financial size of Health Child Actual yearly expenditures over the years 2011 and 2012 are shown in the following table.²³

Table 1: Health Child actual disbursements 2012 & 2013 in €²⁴

	2012	%	2013	%
Direct program costs	127,250		171,976	
	% of total	68%		53%
Project support costs	20,322		58,341	
	% of total	11%		18%
Personnel costs	38,379		78,821	
	% of total	21%		24%
Capital costs	0		16,867	
	% of total	0%		5%
Totals	185,951	100%	326,005	100%

¹⁹ Health Child (2014). "Strengthening Interventions: Enabling Communities to Create a Safe Environment for Children," Health Child Annual Report 2013, p. 6-17.

²⁰ Bulte, E., J. Klomp, J. Duchoslav, E. Kamphuis, and B. Lof (2013). Joint MFS-II Evaluation Uganda: Baseline Report, p. 20.

²¹ December 2013 16 staff: 1 Executive director, 1 Programmes manager, 1 Project coordinator MCH, 1 Finance & human resources officer, 4 MCH programme officers, 2 ICT officers (IICD), 1 Project officer early childhood development, 1 Project nurse, 1 Child nutrition officer / Livelihood support, 1 Scheme fund officer, 1 Child protection / sanitation officer, 1 Monitoring & evaluation officer

²² August 2014 16 staff: 1 Executive director, 1 Programmes manager, 1 Project coordinator MCH 1 Finance & human resources officer, 6 MCH programme officers (4 in Lira, 2 in Jinja), 1 Project nurse 1 Project officer early childhood development, 2 ICT officers (IICD), 1 VSLA field supervisor, 1 volunteer (Kampala officer)

²³ Health Child (2014). "Strengthening Interventions: Enabling Communities to Create a Safe Environment for Children," Health Child Annual Report 2013, p. 19.

²⁴ Exchange rate UGX 3,330 = € 1

The overview shows a distinct increase in total expenditures, which is mainly related to increased project activities. It should be noticed that the relative parts of the project support costs and the personnel increased (i.e. respectively to 18% and 24%, whereas the relative part of the direct program costs decreased (to 53%); this indicates that overheads were going up.

Health Child stated that its funding situation is secure up to the end of 2015. The following table gives an overview of realised donor contributions over the period 2011 - February 2014²⁵.

Table 2: Realized donor contributions to Health Child October 2011 - September 2013 in €²⁶

Donor	Project name	Disbursed Funding			
		10/2011 - 9/2012		10/2012 - 9/2013	
		€	%	€	%
Cordaid	Enabling access to Health: Increasing Community Involvement, participation and Responsibility towards Maternal and Child Health	42,862	20%	97,603	30%
Bernard van Leer Foundation	Home grown resources for enhancing Child nutrition, Early childhood education , and Child protection in poor fishing communities	67,806	31%	58,132	18%
Connect4Change (Cordaid)	Addendum Sept-Dec 2012 Using ICT to "Accelerate uptake of postpartum care and child health including early infant HIV diagnosis"	52,654	24%	41,849	13%
Connect4 Change (Cordaid)	Using ICT to Enabling Access to Health: Increasing Community Involvement, participation and Responsibility towards Maternal and Child Health (March 2013-February 2014)	-		56,373	17%
Connect4 Change (IICD)	Training partners in developing Information, Education and Communication (IEC) materials	33,614	16%	-	0%
Connect4 Change (IICD)	Training partners to develop recorded drama	2,911	1%	-	0%
Connect4 Change (Text to Change)	Extra funds for using ICT to accelerate uptake of post-partum care	2,613	1%	2,406	1%
University of Carolina	Measure evaluation, Study of E-health and family planning in Uganda	10,915	5%	-	0%
Canadian Grand Challenge	Enabling access to Health: Increasing Community Involvement, participation and Responsibility towards Maternal and Child Health	-	0%	69,642	21%
TOTALS		213,375	100%	326,005	100%

The realized funding coming from MFS2 over the period June 2012 - June 2014 is listed based on this overview and additional information of the organization; see next paragraph.

3.2. Support Co-funding Organization (CFA) to SPO

MFS2 support provided to Health Child is realized through the alliance Connect4Change. Cordaid is in this alliance Health Child's main partner. Cordaid's support to the organization started in 2006 with a small project and per 01-10-2007 with 3 year full program²⁷. Then afterwards the cooperation was continued for a period of 24 months partially under MFS2. The organization got MFS2 funds within this cooperation over the period October 2011 - February 2014. Over this period a total of € 290,023 was disbursed on MFS2 funds, as Table 3 shows.²⁸

²⁵ Health Child (2014). "Strengthening Interventions: Enabling Communities to Create a Safe Environment for Children," Health Child Annual Report 2013, p.18.

²⁶ Exchange rate UGX 3,330 = € 1

²⁷ Bulte, E., J. Klomp, J. Duchoslav, E. Kamphuis, and B. Lof (2013). Joint MFS-II Evaluation Uganda: Baseline Report, p. 19.

²⁸ This table is based on the previous on all donor disbursements.

Table 3: Disbursements MFS2 funds to Health Child October 2011 - February 2014 in €

Period	Connect4Change (Cordaid)	Connect4Change (IICD, Text2Change)	Totals
October 2011 - September 2012	52,654	39,138	91,792
October 2012 - September 2013	139,452	2,406	141,858
October 2013 - February 2014	56,373		56,373
Totals	248,479	41,544	290,023

The overview shows that provided MFS2 funds over the period October 2011 - February 2014 under Cordaid was under the alliance Connect4Change the most prominent donor. As before the start of MFS2, Cordaid continued providing funding for the community based Maternal and Child Health (MCH) programs within MFS2. Under the Connect4Change alliance complementary support was given by IICD and Text2Change²⁹ with respect to ICT applications in the areas of IEC trainings, recorded drama, and post-partum care; IICD's activities were oriented on 'add-ins' i.e. punctual contributions to different Health Child program activities. Besides this support IICD provided Technical advice, Coaching and Capacity building activities to Health Child, as part of what the organisation does for all Connect4Change partners. For these activities separate MFS2 funds were provided, also for the year 2014.³⁰

Table 4 shows the commitments from Cordaid, IICD (and partners), on which above disbursements of MFS2 funds to Health Child have been made.

Table 4: Commitments of Cordaid to Health Child 2010 - 2014 in €³¹

Projects	Period	Committed amounts (€)	
Mother and Child Care through ICT Approach (project 103825)	01-10-2010 - 30-09-2012 € 92,500 - under MFS2:	All:	98,800
		Cordaid:	42,500
		Other parties:	56,300
Enabling Access to Health through ICT (project 109403)	01-01-2013 - 31-12-2014	All:	149,094
		Cordaid:	144,844
		Other parties:	4,250
Enabling Access to Health Services (project 108626)	01-01-2014 - 31-12-2015	Cordaid:	177,137
		Other parties:	0
		Health Child-Reduce maternal & Infant Mortality through ICT (project 106212)	01-10-2011 - 31-12-2012
Total			525,562

When is counted with the total committed amount all coming from MFS2, from the total committed amount (being € 525,562), € 235,539 remains to be spent for the period March 2014 - December 2015 from MFS2 funding through the alliance Connect4Change. Over the period October 2011 - February 2014 (29 months) average monthly expenditures were € 10,008; for the remaining period March 2014 - December 2015 (22 months) this average would be € 10,706. It looks plausible that when Health Child maintains its pace of expenditures neither underspending nor over spending will occur.

Besides the commitments shown in Table 4, did IICD spend from its overheads funded under MFS2, salary costs specifically related to its support to Health Child. Table 5 gives an overview over the period 2011-2015. For 2015 it concerns an estimated projection.

Table 5: IICD Salary costs related to IICD support to Health Child 2011 -2014 in €³²

Years	2011	2012	2013	2014	2015
Salary costs	17,500	11,780	11,570	9,608	5,719

Table 6 and Table 7 show how these salary expenditures targeted the core capabilities during the baseline and the endline measurements.

²⁹ IICD (2014). IICD Website. <<http://www.iicd.org/>> Accessed 6 Jan. 2015.

³⁰ Huizinga, B. (2015). Personal communication on 9 Feb. 2015. IICD.

³¹ Cordaid (2014). "Projects," Cordaid Website. <<http://www.cordaid.org/>> Accessed 6 Jan. 2015.

³² Lenoir, M. (2015). Personal communication on 20 Feb. 2015. IICD.

3.3. Cordaid's/IICD's targeting Health Child's capacity development

As stated Cordaid continued its broad involvement in Health Child's activities on MCH and along these activities attention was given to the organization's capacity development. In the baseline report Core Capabilities To Deliver on Development Objectives and To relate were equally the most targeted at a relative intensive level, but always in service of the implementation of the MCH program. The next table shows Cordaid/IICD's orientation towards Health Child with respect to capacity development in 2012.³³

Table 6: Cordaid's targeting core capabilities Health Child - Baseline report measurement

1. Act and commit	3
Training trajectory financial management, partial core funding (Cordaid);	
2. Adapt and self-renew	3
M&E, data entry trainings, strategic advice in field visits (Cordaid); digital M&E, knowledge sharing, storytelling (IICD)	
3. Deliver on development objectives	4
Funding pilots, evaluation management child illnesses/health of young mother (Cordaid); integration ICT (IICD)	
4. Relate to external stakeholders	4
Partial core funding for networking (Cordaid)	
5. Achieve coherence	2
Not special extra attention	

(1-5: 1 - not targeted, 5 - intensively targeted)

Coaching/mentoring was given by Cordaid's programme officer(s), financial officer(s), and the business development manager. This support regarded the organisational setup of Health Child (relation board - Health Child team, specific needed human resources, as well as its financial management). The last was a follow-up of the original trajectory on financial management, done in 2010.

Maternal and Child Health (MCH) programs using MFS2 funds were mainly used for program implementation; the costs for Cordaid's capacity development contributions were mainly covered by the 12% management costs of Cordaid's general MFS2 budget. The focus on specific core capability 1 (To act and commit) became more intense than in 2012 and before; the focus on core capability 3 (To deliver on development objectives), and core capability 4 To relate, became on the contrary less intense; for the other core capabilities (2 To adapt and self-renew, and 5 To achieve coherence) the situation remained generally unchanged. These changes are reflected in Table 7.

Table 7: Cordaid's targeting core capabilities Health Child - Endline report measurement

1. Act and commit	4
Relation board - Health Child team, specific human resources, financial management	
2. Adapt and self-renew	3
M&E, strategic advices in field visits	
3. Deliver on development objectives	2
General feedback on implementation	
4. Relate to external stakeholders	2
Cordaid support to networking during field visits	
5. Achieve coherence	2
General feedback on	

(1-5: 1 - not targeted, 5 - intensively targeted)

IICD continuously supported health in Health Child's capacity development through technical assistance. This assistance entailed: support to proposal writing (resource mobilisation), implementation planning, on the job coaching /advising, specific technical support, workshops / trainings through IICD's Capacity Building Program, ICT for Development (ICT4D) workshops³⁴, Connect4Change learning days, Cross Country Learning Events (CCLE)³⁵, knowledge sharing, and action research.³⁶ IICD's support to Health Child was mainly done in kind by facilitating mentioned activities; hence no separate disbursements for

³³ Bulte, E., J. Klomp, J. Duchoslav, E. Kamphuis, and B. Lof (2013). Joint MFS-II Evaluation Uganda: Baseline Report, p. 25-26.

³⁴ Workshops in which the use ICT solutions in health programs is promoted and practiced.

³⁵ In Cross Country Learning Events is IICD aiming at facilitating exchanges between stakeholders from different countries on ICT applications in a/o healthcare, education through open, interactive exchanges, and peer assistance.

³⁶ IICD facilitates identification and assessment of the ongoing impact of projects by using range of ICT tools.

these were realised. An estimation of IICD's specific expenditures for its Health Child related activities over the period 2011-2014 is given in Table 5 (see above). This estimation shows that during the years 2011, 2012, and 2013 IICD's support to Health Child's capacity development was the most intensive, followed by a gradual phasing out of its hands-on capacity development support during the years 2014 and 2015.

3.4. Key features project

Cordaid's support to Health Child within MFS2 relates mainly to Maternal and Child Health (MCH) program activities, which represents in the organization's Strategic Plan 2010-2014 one of its 6 main goals: The reduction of maternal and child mortality in Uganda. Within this goal Health Child has overall project objective: Increased number of women and children accessing maternal and child health services in Jinja, Lira and Apac Districts. Two specific objectives should serve this overall objective:

- Strengthened capacity of Village Health Teams (VHT) to deliver quality maternal and child health information in health facilities and at community level
- Increased community awareness of issues of maternal and child health

Related to these objectives yearly targets starting from a defined baseline, indicators, and sources of information are defined.

All activities needed for the fulfilment of the objectives are not oriented on Health Child's own capacity development. Over the period June 2012-2014 the attention for capacity development became less intensive, less specific, and more ad-hoc. Cordaid's support to the organization's capacity development regards regular project management (feedback on proposals and reports, strategic advice, field visits, program development) and the management of project funds (mainly concentrated on project interventions and staff salary). Besides that, Cordaid gave a follow-up on financial capacity building trajectory started in 2010.

IICD continues to take care of hands-on capacity development up to the end of 2015. A new strategic plan for the next 5 years has not been issued as yet. Such plan has to come soon, in view of the termination of the MFS2 funding to Health Child and its further perspectives in the area of Maternal and Child Health and possible related capacity development issues.

4. Impact evaluation

4.1. Millennium Development Goals

4.1.1. Data collection

In the summer of 2012 we conducted a baseline survey where we selected randomly 30 communities in the area. We divided the communities as follows. In 10 communities the intervention was under way in 2012 (Group 1), in another 10 communities the intervention was about to start in 2013 (Group 2), while the final 10 communities were identified by Health Child according to the criteria used for selection of beneficiaries, i.e. an area where they would have expanded had they had sufficient resources (Group 3)

In each community from Group 1, 11 randomly selected mothers from the mother club and the VHT (Village Health Team worker) were interviewed. In each community from Groups 2 and 3, 11 mothers were randomly selected from a list of mothers provided by the VHT. Also in these groups 11 mothers and the VHT were interviewed. Problematic was that several communities had fewer than 11 mothers. The shortfall was compensated for by expanding the sample in other communities so as to ensure a sufficiently large size of each group. Using the last group as a control, this design would have allowed us to gauge both the short term impact and the medium-term impact of the project.

In 2014 a follow-up survey was held. The same 10 communities from Group 1, where the intervention was completed by the end of 2012, were revisited. Yet, there was no intervention in Group 2. Instead, 10 communities were randomly selected in the area where intervention took place were visited (Group 4). So, there is thus no baseline for Group 4, and no follow-up for Group 2. For parts of the analysis, Groups 2 and 4 are pooled together over the common support of basic socioeconomic indicators (wealth and education, adjusted for time trends). The same 10 communities from group 3 were revisited.

In the end line we followed a similar strategy to select our sample. In more detail, In each community from Groups 1 and 4, 11 randomly selected mothers from the mother club and the VHT were interviewed, while in each community from Group 3, 11 mothers were randomly selected from a list of mothers provided by the VHT. The 11 mothers and the VHT were interviewed. Several communities had fewer than 11 mothers. The shortfall was compensated for by expanding the sample in other communities so as to ensure a sufficiently large size of each group.

Table 8: Sample overview

	Group 1		Group 2		Group 3		Group 4	
	2012	2014	2012	2014	2012	2014	2012	2014
Planned intervention	Yes	No	No	Yes	No	No	No	No
Implemented intervention	Yes	No	No	No	No	No	No	Yes
Observations (Mothers)	112	116	118	-	114	120	-	103
Observations (VHTs)	10	7	10	-	10	9	-	9

For each group we have gathered data on health awareness and quality at the level of the VHT and mother. The tables below report some of the descriptive statistics.

Table 9: Village Health Team workers

	Treated 2012		Treated 2014		Control		ALL
	Group 1		Group 2	Group 4	Group 3		
	2012	2014	2012	2014	2012	2014	
General health awareness	0.975 (0.053) 10	0.893 (0.086) 7	0.913 (0.084) 10	0.847 (0.121) 9	0.825 (0.087) 10	0.875 (0.108) 9	0.889 (0.101) 55
Maternal care awareness		0.786 (0.094) 7		0.861 (0.132) 9		0.781 (0.160) 8	0.813 (0.133) 24
Perceived quality	0.860 (0.195) 110	0.886 (0.184) 113	0.570 (0.368) 102	0.887 (0.217) 100	0.502 (0.353) 111	0.675 (0.332) 106	0.730 (0.324) 642
Involvement	0.503 (0.303) 112	0.684 (0.348) 116	0.390 (0.293) 118	0.767 (0.295) 103	0.368 (0.214) 114	0.356 (0.302) 120	0.506 (0.334) 683

Legend: mean
(standard deviation)
observations

The data on VHT workers is obtained as follows.³⁷

- *General health awareness*: Index on a scale of 0 to 1 constructed from true/false answers by VHTs to questions on HIV, malaria and maternal health
- *Maternal care awareness*: Index on a scale of 0 to 1 constructed from true/false answers by VHTs to further questions on maternal health and childcare
- *Perceived quality*: Index on a scale of 0 to 1 constructed from 4-point Likert-type scale answers by mothers to questions about their VHT's knowledgeability, approachability and trustworthiness
- *Involvement*: Index on a scale of 0 to 1 constructed from yes/no answers by mother to questions about their VHT's involvement with their pregnancy and maternity

The results indicate generally that the maternal awareness is well above 0.8, while the perceived quality is more dispersed and ranges between 0.6 and 0.9.

³⁷ See Appendix 2 and Appendix 13 for specific survey instruments.

Table 10: Mothers' awareness

	Treated 2012		Treated 2014		Control		ALL
	Group 1		Group 2	Group 4	Group 3		
	2012	2014	2012	2014	2012	2014	
General health awareness	0.787 (0.158) 112	0.829 (0.137) 116	0.782 (0.151) 118	0.773 (0.142) 103	0.760 (0.149) 114	0.765 (0.138) 120	0.783 (0.147) 683
Maternal care awareness		0.737 (0.174) 116		0.730 (0.164) 102		0.717 (0.183) 120	0.728 (0.174) 338
Women's rights awareness	0.716 (0.242) 112	0.882 (0.151) 115	0.615 (0.258) 118	0.861 (0.181) 103	0.864 (0.280) 114	0.765 (0.236) 120	0.732 (0.257) 682

Legend: mean
(standard deviation)
observations

The data on the health awareness of the mother is obtained as follows.³⁸

- *General health awareness*: Index on a scale of 0 to 1 constructed from true/false answers by mothers to questions on HIV, malaria and maternal health
- *Maternal care awareness*: Index on a scale of 0 to 1 constructed from true/false answers by mothers to further questions on maternal health and childcare
- *Women's rights awareness*: Index on a scale of 0 to 1 constructed from 4-point Likert-type scale answers by mothers to questions about their women's rights and freedoms

Table 11: Mothers' behavior

	Treated 2012		Treated 2014		Control		ALL
	Group 1		Group 2	Group 4	Group 3		
	2012	2014	2012	2014	2012	2014	
Family planning usage		0.931 (0.254) 116		0.854 (0.354) 103		0.708 (0.456) 120	0.829 (0.377) 339
Number of ANC visits	4.369 (1.142) 111	3.912 (1.283) 102	3.438 (1.790) 112	3.809 (1.080) 94	3.863 (1.561) 102	3.384 (1.582) 99	3.800 (1.516) 620
Delivery at facility	0.946 (0.226) 112	0.940 (0.239) 116	0.676 (0.470) 111	0.893 (0.310) 103	0.876 (0.331) 97	0.332 (0.251) 105	0.877 (0.328) 644
Child immunized		0.983 (0.131) 116		0.961 (0.195) 102		0.922 (0.270) 102	0.956 (0.205) 320
Health status	0.583 (0.217) 112	0.644 (0.235) 116	0.481 (0.226) 116	0.726 (0.244) 102	0.508 (0.217) 114	0.536 (0.274) 119	0.577 (0.250) 679

Legend: mean
(standard deviation)
observations

³⁸ See Appendix 4 and Appendix 5 for specific survey instruments.

The data on the health behavior of the mother is obtained as follows.³⁹

- *Family planning usage*: Dummy equal to 1 if any family planning method was used in the year prior to the most recent pregnancy, 0 otherwise
- *Number of ANC visits*: Total number of ANC visits during the last pregnancy if concluded since the start of the current intervention
- *Delivery at facility*: Dummy equal to 1 if the last delivery since the start of the current intervention took place in a healthcare facility, 0 if elsewhere
- *Child immunized*: Dummy equal to 1 if the last child born alive since the start of the current intervention was immunized, 0 if not immunized
- *Health status*: Index on a scale of 0 to 1 based on the SF-12 Health Survey⁴⁰

The descriptive analysis shows that the majority of the women used family planning methods. The number of ANC visits is about 4 during the last pregnancy, while a large majority of the deliveries take place in a health care facility.

4.1.2. Analyses and results

We estimate short-term effects (STE) using data from pooled Groups 2 and 4 (treated in 2014) and Group 3 (control). As some outcome measures were only included in the follow-up survey, we first estimate between-subject difference (BSD) and propensity score matched (PSM) effects. Where possible (i.e. where data from 2012 and 2014 are available), we also estimate difference-in-differences (DID) and difference-in-differences with propensity score matching (DID-PSM) models

We gauge medium-term trends () by comparing indicator levels in Group 1 (treated in 2012) with those of Group 3 (control). Since no baseline is available for Group 1, DID estimations could be misleading if not carefully interpreted. Graphical representations of the average indicator levels are thus more illustrative. Additionally, we estimate changes in indicator levels in Group 1 using BSD and PSM approaches.

4.1.2.1. *Research question 1: Provide the results; include sensitivity analyses; succinctly describe the major results.*

Table 12: Village Health Team workers

Indicator	Short-term effect				Medium-term trend	
	BSD	PSM	DID	DID-PSM	BSD	PSM
General health awareness	0.051** (0.024)	0.027 (0.036)	-0.098 (0.083)	-0.105 (0.076)	-0.077** (0.029)	-0.061 (0.038)
Maternal care awareness	0.040 (0.061)	0.059 (0.061)				
Perceived quality	0.265*** (0.042)	0.287*** (0.026)	0.128 (0.078)	0.151* (0.075)	0.012 (0.027)	0.018 (0.023)
Involvement	0.242*** (0.043)	0.283*** (0.024)	0.369*** (0.083)	0.380*** (0.082)	0.168 (0.110)	0.196*** (0.045)

OLS: Standard errors clustered at the respondent level (first two outcome indicators) or village level (last two outcome indicators) in parentheses.

PSM: Bootstrapped standard errors clustered at the respondent level (first two outcome indicators) or village level (last two outcome indicators) in parentheses

The first set of regression reports that the project seems to have little – if any – impact on general health awareness of participating VHTs. Moreover, any positive effect seems to dissipate in the medium term. This could, however, be due to high baseline levels of the indicators (between 80% and 90%). We do not detect any significant impact on maternal care awareness of participating VHTs. The project seems to have large (over 20% points) and significant impact on the quality of the participating VHTs as perceived by the women they work with. The impact seems to persist in the medium term. Female VHTs and those

³⁹ See Appendices 6–12 for specific survey instruments.

⁴⁰ Ware, J., M. Kosinski, and S. Keller (1996). "A 12-Item Short-Form Health Survey of Scales and Preliminary Construction Tests of Reliability and Validity," *Medical Care* 34(3): 220-233.

with high involvement in their communities are generally perceived better (see Appendix 17). The project has a large (over 20% points) and significant impact on the intensity of interaction between the participating VHTs and the women in their communities. The positive effect seems to persist – and possibly even grow – in the medium term. Female VHTs tend to be more involved with their communities than female ones (see Appendix 18).

Table 13: Mothers' awareness

Indicator	Short-term effect				Medium-term trend	
	BSD	PSM	DID	DID-PSM	BSD	PSM
General health awareness	0.018 (0.014)	0.015 (0.014)	-0.018 (0.033)	-0.022 (0.033)	0.050* (0.024)	0.046** (0.019)
Maternal care awareness	0.010 (0.022)	0.018 (0.019)				
Women's rights awareness	0.101*** (0.021)	0.150*** (0.022)	0.023 (0.037)	0.006 (0.038)	0.142*** (0.024)	0.158*** (0.023)

OLS: Standard errors clustered at the village level in parentheses.

PSM: Bootstrapped standard errors clustered at the village level in parentheses

The second set of regressions indicates that the project seems to have no immediate effect on the general health awareness of the mothers. While this could potentially be a result of pre-existing high levels of awareness, which are comparable to the average achieved by the VHTs, the MTT estimations suggest that the effects might simply take a while to manifest themselves. Unsurprisingly, more educated and wealthier women exhibit better awareness of general health issues (see Appendix A1.5).

We do not detect any project effects on the maternal care awareness of the mothers. Unsurprisingly, more educated women exhibit better awareness of maternal care issues. We find some evidence of positive project effects on the mothers' awareness of women's rights, though this is not robust across all specifications. Older women tend to be more aware of women's rights than younger ones. So do – interestingly – single women (see Appendix 21).

Table 14: Mothers' behavior

Indicator	Short-term effect				Medium-term trend	
	ATT		DID		MTT	
	OLS	PSM	OLS	PSM	OLS	PSM
Family planning usage	0.164*** (0.053)	0.165*** (0.049)				
Number of ANC visits	0.361*** (0.117)	0.341*** (0.117)	0.531 (0.343)	0.538 (0.375)	-0.383** (0.154)	-0.356 (0.219)
Delivery at facility	0.037 (0.029)	0.028 (0.023)	0.070 (0.090)	0.109 (0.088)	0.004 (0.028)	-0.005 (0.032)
Child immunized	0.013 (0.028)	0.011 (0.023)				
Health status	0.112*** (0.024)	0.131*** (0.021)	0.209*** (0.057)	0.225*** (0.059)	0.071** (0.028)	0.049 (0.030)

OLS: Standard errors clustered at the village level in parentheses.

PSM: Bootstrapped standard errors clustered at the village level in parentheses

The results on the mother behavior demonstrate that the treatment has a large positive (16.5% increase) and significant effect on family planning uptake. Older and more educated women are more likely to use a family planning method. So do women attended by a female VHT (see Appendix 22). The evidence of project effects on the number of ANC visits per pregnancy is very mixed, with ATT estimations yielding significantly positive results, DID estimations yielding statistically insignificant results, and the MTT estimation yielding a significantly negative result. Nonetheless, the average number

of ANC visits in all groups is close to the optimum of 4 per pregnancy. Additionally, we find that more educated women tend to go for more ANC visits, while single women tend to go to fewer visits (see Appendix 23).

Furthermore, we detect no project effect on the probability of delivering in a healthcare facility, which instead seems to be driven mainly by the wealth of the level of the mother's education and the wealth of her household (see Appendix 24). Likewise, we find no project effect on the probability that a newborn child is immunized. However, the levels of this indicator are already quite high at over 90% in all areas. Finally, the project seems to have a large, positive and persistent effect on the overall health status of the women, though the mechanism of this is unclear.

We can summarize our main findings as follows:

Table 15: Impact overview

Outcome indicator		Short-term effect	Medium-term trend
VHT	General health awareness	+	-
	Maternal care awareness	0	
	Perceived quality	+	0
	Involvement	++	+
Mothers' Awareness	General health awareness	0	++
	Maternal care awareness	0	
	Women's rights awareness	+	++
Mothers' Behavior	Family planning usage	++	
	Number of ANC visits	+	-
	Delivery at facility	0	0
	Child immunized	0	
	Health status	++	+
Legend:	++	Conclusively positive effect / increasing trend	(all estimations yield a significantly positive result)
	+	Likely positive effect / increasing trend	(some estimations yield a significantly positive result)
	0	No effect / stable trend detected	(no significant results)
	-	Likely negative effect / decreasing trend	(some estimations yield a significantly negative result)
	--	Conclusively negative effect / decreasing trend	(all estimations yield a significantly negative result)

It should, nonetheless, be noted that given the relatively wide range of observed outcomes, some of the detected positive effects could be the result of the multiple comparisons problem rather than of the project intervention itself. In other words, some of the statistical significance may simply be a matter of probability, which increases in the number of tested indicator differences.⁴¹ A range of methods of adjusting critical p-values to correct for the multiple comparisons problem exist, from the most conservative Bonferroni correction⁴² to the less stringent Benjamini-Hochberg procedure.⁴³ The appropriateness of the various available correction method and thus the critical p-values, however, a non-trivial matter and still subject to academic discussions. We therefore prefer to point the issue out rather than make arbitrary choices regarding statistical significance.

The fact that we find no statistically significant project effects on many of the outcome indicators could in theory be due to an insufficient sample size and a consequent low power of our estimations. However, our sample was as large as budget and time considerations as well as project specifics allowed, so increasing the sample size based on ex-ante power analysis would not have been possible. Conducting an retrospective power analysis to compute the minimum detectable effect sizes (and thus to determine whether statistically insignificant results reflect no actual deference between the treatment and control groups or just a low-powered estimation) is a controversial issue,⁴⁴ often considered fundamentally

⁴¹ Gerber, Alan S., and Donald P. Green (2012). *Field Experiments: Design, Analysis and Interpretation*. New York: W. W. Norton & Company, p. 300.

⁴² Dunne, O. J. (1959). "Estimation of the Medians for Dependent Variables," *The Annals of Mathematical Statistics* 30(1): 192-197.

⁴³ Benjamini, Y., and T. Hochberg (1995). "Controlling the False Discovery Rate: a practical and powerful approach to multiple testing," *Journal of the Royal Statistical Society, Series B*, 57(1): 289-300.

⁴⁴ Thomas, L. (1997). "Retrospective Power Analysis," *Conservation Biology* 11(1): 276-280.

flawed.⁴⁵ The main reason is that it is immediately obvious that as the significance level increases, retrospective power decreases. Hence in case there is a significant effect, the power will be high, while the power will by definition be low if there is no significant effect. This implies that if we find a significant effect, a power analysis becomes redundant for apparently the power of the test is big enough. It also implies that if we do not find a significant effect the power is apparently too low to pick up the observed effect size. A similar reasoning holds for the reverse power analyses: if the impact is insignificant apparently the sample is too small to pick up the possible effect. Additional information that can be obtained by conducting the reverse power analyses is minor. Retrospective power analyses, also in the form of reverse power analyses suffer from the “power approach paradox.”⁴⁵ Considering the fundamental critiques of retrospective analyses, we do not report and power calculations or minimum detectable effect sizes.

4.1.2.2. *Research question 2: Did the project reach its objectives? Can the results be attributed to the project? If not, why not? Did other factors play a role?*

The project had some positive impact on 8 of the 12 measured outcome indicators. 2 of the remaining 4 (maternal care awareness and child immunization) had already high levels to begin with. Thanks to our use of a control group and to the inclusion of standard socioeconomic confounding factors into the models, we can safely attribute the reported results to the project. However, other factors also play a role in the actual levels of the outcome indicators, especially the age and the level of education of the mothers.

Table 16: *Other factors*

Outcome indicator		ASI	eduysr	age	single	female	vhtinv
VHT	General health awareness	0	+	0		0	
	Maternal care awareness	0	0	0		0	
	Perceived quality	0	0	0		++	++
	Involvement	0	0	0		++	
Mothers' Awareness	General health awareness	+	+	0	0	-	0
	Maternal care awareness	0	+	+	-	0	0
	Women's rights awareness	0	0	++	++	0	-
Mothers' Behavior	Family planning usage	0	++	++	0	+	0
	Number of ANC visits	0	+	0	---	0	0
	Delivery at facility	++	++	0	0	0	0
	Child immunized	0	0	+	0	0	0
	Health status	0	0	---	0	0	0

Legend: ++ Conclusively positive effect / increasing trend (all estimations yield a significantly positive result)
+ Likely positive effect / increasing trend (some estimations yield a significantly positive result)
0 No effect / stable trend detected (no significant results)
- Likely negative effect / decreasing trend (some estimations yield a significantly negative result)
--- Conclusively negative effect / decreasing trend (all estimations yield a significantly negative result)

4.1.2.3. *Research question 3: How relevant are the results?*

The positive impact of the project found indicates that the results are relevant in that it helps reach MDGs 4, 5 and 6. Besides, it helps to achieve Objective 2 in Uganda's Health and Nutrition sector (“Ensure universal access to quality Uganda National Minimum Health Care Package, with emphasis on vulnerable populations”) through Strategy 1 (“Provide integrated promotive, preventative, curative and rehabilitative services that have been proven effective, cost effective and affordable in conjunction with the private sectors”), Interventions 6 (“Improve people's awareness about health and related issues in order to bring about desired changes in knowledge, attitudes, practices and behavior regarding the prevention and control of major health and nutrition problems in Uganda”) and 9 (“Strengthen community health services”).⁴⁶

Placing our results in a broader context, between 1990 and 2010, substantial improvements were noted in maternal and child survival around the world—maternal mortality decreased by 47% and the mortality

⁴⁵ Hoenig, J. M. , and D. M. Heisey (2001). “The Abuse of Power: The Pervasive Fallacy of Power Calculations for Data Analysis,” *The American Statistician*, 55(1): 19-24.

⁴⁶ GoU (2009). *National Development Plan (2010/11 – 1014/15)*. Kampala: The Government of Uganda (GoU), p. 273-274.

in children younger than 5 years fell by 37%. Achievement of the Millennium Development Goals 4 and 5 requires a doubling of the reduction in maternal mortality ratio and a renewed focus on neonatal survival. Community based interventions are crucial for the attainment of these goals. Most of these maternal deaths occur between the third trimester and the first week after the end of pregnancy,⁴⁷ particularly during childbirth and the first and second days after birth.⁴⁸ Almost 80 per cent of the maternal deaths are due to direct obstetric causes including severe bleeding, infection, complications of unsafe abortion, eclampsia, and obstructed labor, with other causes being related to the unfavorable conditions created by lack of access to healthcare, illiteracy and factors related to poverty.⁴⁹ The death or illness of a woman of reproductive age has clear implications for a country's productive capacity, labor supply, and economic well-being, and also translates into substantial economic loss and social hardship for her family.

4.1.2.4. *Research question 4: How efficient was the project?*

The financial information is given in Appendix 27. As the financial information is not detailed enough, we cannot compare the financial efficiency with the benchmarks that are provided.

4.1.3. Discussion and conclusion

Birth preparedness is a key component of globally accepted safe motherhood programs and is widely promoted by international agencies. To ensure the success of such approaches, they should be adapted to specific local contexts with community involvement throughout the entire process. There is growing evidence that well-designed behavior change interventions can be effective in producing a desired change in order to achieve a health objective.^{50,51} These interventions do not focus on increasing knowledge alone, but consider a number of contextual factors such as the behaviors of family and community, that also influence individual behavior change. One type of behavior change intervention is behavior change communication (BCC), which is designed to promote, elicit, support, and stimulate specific behavior change via communication.⁵⁰ In the context of maternal health, BCC strategies can play a key role in promoting certain attitudes, knowledge, skills and capacity. Behavior change communications strategies that use various reinforcing messages through multiple channels that target both men and women can be effective in promoting healthy behaviors that help improve maternal health outcomes. Community engagement, ownership and empowerment are critical to sustaining behavior change. Although it may take some time to achieve changes, behavior change is an important element of an effective maternal health program.

Prost et al. (2013) did a systematic review and meta-analysis of randomized controlled trials undertaken in Bangladesh, India, Malawi, and Nepal in which the effects of women's groups practicing participatory learning and action were assessed to identify population-level predictors of effect on maternal mortality, neonatal mortality, and stillbirths. In a subgroup analysis of the four studies in which at least 30% of pregnant women participated in groups showed a 49% reduction in maternal mortality and a 33% reduction in neonatal mortality. The tables below summarize the outcome on a number of randomized control trial studies on mother and child health in other developing countries used in this meta-analysis. What is especially tragic is the fact that most of these maternal deaths could be averted with very cost-effective interventions, even where resources are limited.^{52,53} Poor maternal health and health care (for example, lack of skilled care) not only affects women's survival but has serious implications for the survival of their newborns as well.⁵⁴

⁴⁷ Ronsmans, C., and W. J. Graham (2006). "Maternal Mortality: Who, When, Where, and Why?" *The Lancet*, 368(9542): 1189-1200.

⁴⁸ Hurt, L. S., and C. Ronsmans (2002). "Time since pregnancy and mortality in women of reproductive age in Matlab, Bangladesh." Paper presented at the British Society for Population Studies; December 2002; London.

⁴⁹ Høj, L., D. da Silva, K. Hedegaard, A. Sandström, and P. Aaby (2003). "Maternal mortality: only 42 days?" *BJOG: An International Journal of Obstetrics and Gynaecology*, 110(11): 995-1000.

⁵⁰ Fishbein M. (1995). "Developing Effective Behavior Change Interventions: Some Lessons Learned from Behavioral Research." In T. Becker, S. David, and G. Saucy (Eds.) *Reviewing the Behavioral Science Knowledge Base on Technical Transfer*. NIDA Research Monograph 155. Rockville: National Institute on Drug Abuse.

⁵¹ Middlestadt S. E., R. Pareja, O. Hernandez, S. Maguire, A. Jimerson, and J. Randell (2003). *The Catalyst Behavior Change Diagnostic Framework*. Washington, D.C.: Academy for Educational Development.

⁵² Koblinsky M. (2003). *Reducing Maternal Mortality: Learning from Bolivia, China, Egypt, Honduras, Indonesia, Jamaica, and Zimbabwe*. Washington, D.C.: The World Bank.

⁵³ WHO (2004). *Beyond the Numbers: Reviewing Maternal Deaths and Complications to Make Pregnancy Safer*. Geneva: World Health Organization (WHO).

⁵⁴ Lawn, J., S. Cousens, and J. Zupan (2005). "4 Million Neonatal Deaths: When? Where? Why?" *The Lancet*, 365(9462): 891-900.

Case studies of maternal and newborn indicators in Pakistan and Uganda show how primary health-care interventions can be used effectively. Inclusion of evidence-based interventions in maternal and newborn programs in primary health care at pragmatic coverage in these two countries could prevent 20–30% of all maternal deaths (up to 32% with capability for caesarean section at first-level facilities), 20–21% of newborn deaths, and 29–40% of all post-neonatal deaths in children aged less than 5 years. Strengthening MNCH at the primary health-care level should be a priority for countries to reach their Millennium Development Goal targets for reducing maternal and child mortality.⁵⁵

While it is crucial to address health systems, it is also important to involve communities in efforts to improve maternal health through complementary strategies such as community mobilization and behavior change interventions. One goal of these activities should be to ensure that appropriate health-seeking behaviors become part of local social and cultural norms. Most women in developing countries continue to deliver outside of health facilities, and thus most maternal deaths occur in the community, and not in health facilities. Women and their families may sometimes fail to recognize serious or life-threatening obstetric complications, or wait too long to seek help when a problem occurs during labor or delivery. Timely use of appropriate medical care in the event of an obstetric emergency can mean the difference between life and death. Involvement at the community level can have an enormous influence on whether women seek health services. Community mobilization is important for generating demand for, access to, and use of maternity care services. One area in which community mobilization can be valuable is in increasing birth preparedness (birth planning) and complication readiness, helping a family to know where or from whom to seek help, and providing access to funds or transportation during an emergency, thereby addressing many of the delays (deciding to seek care, and reaching services) that contribute to maternal morbidity and mortality. Increasing community awareness of signs of emergency obstetric complications and motivating families to seek services can also help improve women's chances of survival.⁵⁶

⁵⁵ Bhutta, Z., S. Ali, S. Cousens, T. M. Ali, B. Haider, A. Rizvi, P. Okong, and R. Black (2008). "Alma-Ata: Rebirth and Revision 6 Interventions to Address Maternal, Newborn, and Child Survival: What Difference Can Integrated Primary Health Care Strategies Make?" *The Lancet*, 372(9642): 972-989.

⁵⁶ Kwast B. (1995). "Building a Community-Based Maternity Program," *International Journal of Gynaecology and Obstetrics*, 48: S67–82.

Table 17: Other studies⁵⁷

	Study population and setting	Intervention	Control	Outcomes
Manandhar et al, ¹² 2004 (Nepal)	24 clusters; population of about 7000 per cluster Closed cohort of married women of reproductive age (15-49 years) living in Makwanpur district, rural Nepal; pregnancies registered during Nov 1, 2001, to Oct 31, 2003, were followed up	12 clusters (2972 births) Each cluster had a local literate female facilitator who was given a brief training in perinatal health issues and a facilitation manual; facilitators supported women's groups through ten monthly meetings using a participatory learning and action cycle and a picture card game that addressed prevention and treatment for typical problems in mothers and infants; one supervisor supported three facilitators Health service strengthening and training of traditional birth attendants were as in the control group	12 clusters (3303 births) Health service strengthening activities and training of traditional birth attendants: primary health centres given resuscitation equipment, phototherapy units, and warm cots; essential newborn-care training for local health staff and traditional birth attendants; and newborn-care kits given to community-based workers	Primary: neonatal mortality rate Secondary: stillbirth rate, maternal mortality ratio, uptake of maternity services, care practices at home, neonatal morbidity, and health-care seeking
Tripathy et al, ¹³ 2010 (India)	36 clusters; mean population 6338 per cluster (SD 2101) Open cohort of women aged 15-49 years, living in rural areas of three districts of Jharkhand and Orissa, eastern India, who gave birth between July 31, 2005, and July 30, 2008	18 clusters (9770 births) A local woman facilitated 20 monthly meetings with women's groups after 7 days of training; each facilitator convened 13 groups per month; groups followed a four-phase participatory learning and action cycle and were open to all members of the community though primarily targeting pregnant women and new mothers Facilitators and group members used stories, participatory games, and picture cards to facilitate discussions about prevention and care-seeking Health service strengthening was as in the control group	18 clusters (9260 births) Health service strengthening activities: health committees formed so community members could express opinions about local health services; committees met every 2 months to discuss maternal and newborn health entitlement issues; and workshops using appreciative inquiry provided to frontline government health staff	Primary: neonatal mortality rate and maternal depression scores Secondary: stillbirths, maternal mortality ratio, and perinatal mortality, uptake of maternity services, care practices at home, and health-care seeking
Azad et al, ¹⁴ 2010 (Bangladesh)	18 clusters; mean population 27 953 per cluster (SD 5953) Open cohort of women aged 15-49 years living in three rural districts of Bangladesh, who gave birth between Feb 1, 2005, and Dec 31, 2007	Nine clusters (15 695 births) A local woman facilitated groups using a participatory learning and action cycle after receiving five training sessions that covered communication, maternal and neonatal health issues; she visited every tenth household in the intervention clusters and invited married women of reproductive age to join the groups; mothers-in-law, adolescent girls, and other women joined at a later date Health service strengthening and training of traditional birth attendants were as in the control group	Nine clusters (15 257 births) Health service strengthening activities and training of traditional birth attendants: improvements to referral systems and links between communities and health services; and provision of basic and refresher training in essential maternal and newborn care	Primary: neonatal mortality rate Secondary: maternal mortality ratio, stillbirths, perinatal mortality, uptake of maternity services, care practices at home, neonatal morbidity, and health-care seeking
More et al, ¹⁴ 2012 (India)	48 clusters; mean population 5865 per cluster (SD 1077) Women were recruited between Oct 1, 2006, and Sept 30, 2009, in urban Mumbai slums; women from transient communities and areas for which resettlement was being negotiated were excluded	24 clusters (9155 births) A facilitator (local woman with secondary education and leadership skills) set up ten groups in a cluster of 1000 households; groups met fortnightly, and the facilitator met weekly with other facilitators and her supervisor; women's groups followed a cycle of 36 meetings and were open to all women. Participatory methods with seven phases, based on the principles of appreciative inquiry, were used in the meetings	24 clusters (9042 births); no details were provided about control clusters	Primary: stillbirths, neonatal mortality rate and extended perinatal mortality rate, perinatal care, and maternal morbidity Secondary: maternal mortality ratio, antenatal care, institutional delivery, breastfeeding, and care-seeking for newborn illness

(Continues on next page)

⁵⁷ Prost, A., T. Colbourn, N. Seward, K. Azad, A. Coomarasamy, A. Copas, T. Houweling, E. Fottrell, A. Kuddus, S. Lewycka, C. MacArthur, D. Manandhar, J. Morrison, C. Mwansambo, N. Nair, B. Nambiar, D. Osrin, C. Pagel, T. Phiri, A. Pulkki-Brännström, M. Rosato, J. Skordis-Worrall, N. Saville, N. Shah, B. Shrestha, P. Tripathy, A. Wilson, and A. Costello (2013). "Women's Groups Practising Participatory Learning and Action to Improve Maternal and Newborn Health in Low-Resource Settings: A Systematic Review and Meta-Analysis," *The Lancet* 381(9879): 1736-1746.

Table 18: Other studies⁵⁸

Design	Interventions	Comparison Group	Results	
Bang (1999), Maharashtra, India ³¹	Controlled trial (not randomised); baseline phase (1993–95), observational phase (1995–96), and the 7 years of intervention (1996–2003)	Village health workers trained in maternal and newborn health asked to visit pregnant women in the third trimester, at the time of birth, and eight times after birth; they managed birth asphyxia, premature birth or low birthweight, hypothermia, and breastfeeding problems; they diagnosed and treated neonatal sepsis with oral cotrimoxazole and injectable gentamicin; assistance by TBAs, health education, and fortnightly supervisory visits were also provided	Usual care available in the local health system	Significant (62%) reduction in neonatal, and perinatal mortality rates (71%) in the intervention area compared with the control area; case fatality in neonatal sepsis declined from 16.6% (163 cases) before treatment, to 2.8% (71 cases) after treatment by village health workers (p<0.01)
Manandhar (2004) Makwanpur, Nepal ²⁹	Cluster randomised controlled trial	Trained female facilitators supported women groups through an action-learning cycle in which they identified local perinatal problems and formulated strategies to address them	Health service strengthening activities done in both areas (primary health care equipment with neonatal resuscitation facilities), training of health staff, community health workers, and TBAs in essential newborn care and provision of kits to community health workers	From 2001 to 2003, the neonatal mortality rate was 26.2 per 1000 (76 deaths per 2899 livebirths) in intervention clusters compared with 36.9 per 1000 (119 deaths per 3226 livebirths) in controls (adjusted OR 0.70, 95% CI 0.53–0.94); women in intervention clusters were more likely to have antenatal care, institutional delivery, trained birth attendance, and hygienic care than were controls
Jokhio (2005), Sind, Pakistan ²⁸	Cluster randomised controlled trial	TBAs were trained and issued disposable delivery kits. TBAs were asked to visit pregnant women at least three times during the pregnancy (months 3, 6, and 9) to check for danger signs and to encourage women to seek emergency obstetrical care; LHWs linked TBAs with established services and documented processes and outcomes; outreach clinics for antenatal care were provided by obstetrical teams	TBAs did not receive any training and were not given delivery kits; LHWs enrolled and followed up all pregnant women in their catchment area in the course of their normal monthly home visits; no outreach clinic was organised and women received usual care	Significant reduction in perinatal deaths in intervention clusters (RR 0.70, 0.59–0.82) and in maternal deaths (0.74, 0.45–1.23)
Bhutta (2008), Hala, Pakistan ²⁹	Cluster controlled trial	LHWs received additional training on essential maternal and home-based newborn care; LHWs were encouraged to visit all pregnant women twice during pregnancy, within 24 h of birth and four times in the first postnatal month and were encouraged to link up with local Dais; LHWs were supported by the creation of voluntary community health committee which helped to do community education group sessions; TBAs received a voluntary training programme in basic newborn care	The government's LHW-training programme continued as usual, with regular refresher sessions, but no attempt was made to link LHWs with the TBAs; special training in basic and intermediate newborn care was offered to all public-sector rural health centre and hospital-based medical and nursing staff, irrespective of whether the intervention was implemented in their community	The average rate of stillbirth decreased from 65.9 to 43.1 per 1000 births (Mantel-Haenszel RR 0.66, 0.53–0.83, p<0.001), while the neonatal mortality rate decreased from 57.3 to 41.3 per 1000 livebirths (0.72, 0.56–0.91, p=0.006); the proportion of deliveries by skilled attendants at public-sector facilities also increased, from 18% at baseline to 30%, whereas the proportion of home births decreased from 79% to 65%
Baqui (2008), Sylhet, Bangladesh ²⁷	Cluster randomised controlled trial	Intervention 1: Home-care model with training of CHWs in BCC and ENC; CHWs visited pregnant women in antenatal and postnatal period to promote preparedness for birth or newborn care, to provide iron folate supplements, and to counsel on breastfeeding issues; also included home screening, management, or referral of sick newborns; Intervention 2: community-care model with community meetings with pregnant women and family members and advocacy meetings with local leaders; TBA training on cleanliness during delivery, maternal danger signs, and newborn care; specific recruitment of volunteer community-resource people to improve attendance at community meetings, and care-seeking for maternal and neonatal complications	Government health-system strengthening, including refresher training for facility-level health providers in treating neonatal infections and supply of antibiotics for treatment of neonatal infections at facilities	Neonatal mortality was reduced in the home-care arm by 34% (adjusted RR 0.66, 0.47–0.93) during the last 6 months versus that in the comparison arm; no mortality reduction was noted in the community-care arm (0.95, 0.69–1.31)
Darmstadt (2005), Shivgarh, India ²⁴	Cluster randomised controlled trial	CHWs provided ENC preventive package through home visits to community-newborn care stakeholders and households, with or without thermospot for detecting hypothermia; CHWs promoted preventive package of ENC including skin-to-skin care using behaviour-change management through group meetings and home visits; the target groups included community stakeholders, newborn care stakeholders, households; CHWs provided two antenatal and two postnatal household visits	Usual services of governmental and non-governmental organisation providers in the area	Improvements in birth preparedness, hygienic delivery, thermal care (including skin-to-skin care), umbilical-cord care, skin care, breastfeeding, and care-seeking were observed in intervention arms; adjusted neonatal mortality rate in the ENC arm and the ENC plus thermospot arms was lower by 51% (0.49, 0.38–0.63) and 47% (0.53, 0.38–0.74), respectively

TBA=traditional birth attendants. CHW=community health worker. LHW=lady health worker. OR=odds ratio. RR=relative risk. BCC=behaviour change communication. ENC=essential newborn care.

Table 3: Controlled trials of community-based intervention packages

⁵⁸ Bhutta, Z., S. Ali, S. Cousens, T. M. Ali, B. Haider, A. Rizvi, P. Okong, and R. Black (2008). "Alma-Ata: Rebirth and Revision 6 Interventions to Address Maternal, Newborn, and Child Survival: What Difference Can Integrated Primary Health Care Strategies Make?" *The Lancet*, 372(9642): 972-989.

We find that the project had positive effects on some of the areas described above, especially on the knowledge and involvement of health extension workers (VHTs), the uptake of family planning methods and the general health status of targeted women. On we do not detect any significantly positive effects on mother behavior directly related to ante- and post-natal care. These results are reflected in the overall evaluation scores summarized in Table 19. Whether or not this should be addressed by focusing more on the successful areas so as to maximize the potential benefits, or on the less successful ones so as to improve the impact there, is beyond the scope of this evaluation.

Table 19: Evaluation table

Question	Score ⁵⁹
The project was well designed	9
The project was implemented as designed	7
The project reached all its objectives	7
The observed results are attributable to the project interventions	8
The observed results are relevant to the project beneficiaries	10
The project was implemented efficiently	N/A

4.2. Capacity development.

4.2.1. Data collection and analytical approach

For putting up the baseline on capacity development for the SPO Health Child the evaluation tools are shortly explained. For the field research for the baseline and endline (follow up assessment) studies two special Research Manuals were written.^{60,61}

4.2.1.1. Background documents

For both the baseline as the endline initially on strategy, context and activities were studied and verified with concerned SPO (Health Child) and related CFA (Cordaid/IICD).

4.2.1.2. Focus groups/group interviews

Focus group interviews were held with Health Child's management and the important stakeholders for getting data on the organizations development and its working environment. In these interviews attention was given to the organization's *Timeline* until the baseline year 2012, its *Theory of Change*, and the *Results Chain CFA - SPO - Target groups / stakeholders*. *Observation* of the SPO's office and working environment gives additional information about the SPO.

A complementary approach was followed in the fieldwork of the endline study that has taken place during the period June - July 2014; herein interview formats were used emphasizing *key changes and wished changes* within the SPO, as seen by interviewees from the SPO personnel, from externals and from the supporting CFA.

4.2.1.3. Organizational self-assessment

In the baseline as well as the endline organizational self-assessments were done with respondents of the SPO; in the endline assessment was aimed at a participation of at least 30% of the respondents present in the baseline assessment;⁶² for Health Child this was 50%; the endline workshop has taken place on 10 June 2014. The same questionnaire covering 5 Core Capabilities and connected indicators with prompting questions was used, in order to facilitate comparability between the baseline and endline outcomes.

Outcomes of the self-assessment in the baseline were related to all elements of *Focus groups/group interviews* for making up a *Synthesis scoring form* that is the basis for the evaluation of each core capability and its underlying aspects. After processing the *Synthesis scoring form* a debriefing feedback meeting with Health Child has taken place to discuss determining factors for the given scores. After these debriefing additional *self-reporting* was requested from the respondents; they were asked to issue their remarks/comments on the synthesis scoring form. Final scoring and related explanations were given by the evaluators in a special feedback meeting on 1 October 2012 and peer reviewed.

⁵⁹ Score reported on a scale of 1 to 10, with 1 being "not at all" and 10 being "completely."

⁶⁰ Kamphuis, E. (2012). "Evaluation Study Capacity Development of Southern Partner Organisations – Baseline – Uganda." Research Manual. Molenrij/Kampala: ETC International.

⁶¹ Kamphuis, E. (2014). "Evaluation Study Capacity Development of Southern Partner Organisations – Endline – Uganda." Research Manual. Molenrij/Kampala: ETC International.

⁶² This proved to be possible in the case of Health Child, as the key persons in the organization were still in place.

Outcomes in the endline were related to interview findings (with Health Child personnel, externals, and Cordaid). Then endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, reflecting changes in core capabilities and their underlying aspects over the period June 2012 - June 2014, were qualified in terms of 'improved', 'stable', or 'worsened'. These qualifications were generated by an Excel tool that was specially developed for this purpose; the tool generated endline scores per core capability and their underlying aspects, based on multiple choice answers on 64 questions; the other 18 questions regarded open requests for additional comments per different aspect/core capability and did not influence the scoring. The tool thus firstly determined endline scores per core capability and their underlying aspects and these scores were then related with the scores of the baseline study for getting the change qualifications⁶³. The change qualifications of the core capabilities and their underlying aspects were linked with an inventory of determining factors for these changes. This was done in workshop sessions and interviews; for Health Child's change qualifications, determining factors and open comments provided in the questionnaire were captured in a workshop report and interview reports. The workshop report was reviewed in a special feedback meeting with Health Child on 28 August 2014; subsequently the workshop report was peer reviewed, and served as input for the evaluator's final assessment.

4.2.1.4. Observation forms

Regarding Health Child a detailed chronology of study/research activities was recorded on Observation forms. In the forms was also space for the researchers to make observations on the research process, the collected data, or the cooperation extended by Health Child and Cordaid/IICD as related CFA's.

4.2.1.5. Reasons for choice of mentioned methods

Organizational assessments regard essentially interactive processes between the evaluated organization and the evaluators. Taking a baseline does not only concern the handling of measurement tools, but also the triangulation of collected findings in interviews/focus groups. The followed approach is thus a mixture of two perspectives. Firstly: the application of survey research and feedback, and secondly: the strong attention for people working in organizations that face changes. For that reason data gathering through a questionnaire and self-assessment went hand in hand.

Respecting the two perspectives simultaneously means that research techniques like Difference-in-Differences are not applicable in this assessment framework. Factors influencing organizational development are complex and multidimensional and cannot be captured in the 5C research within the timeframe given.

Organizational assessments combine different measuring and observation methods as mentioned above with assessment based on expertise in the area of organizational development. Difference-in-Differences and Randomized Controlled Trial (randomized assignment) for example can hardly be matched with such combination.

The choice for the mentioned methods has implications for type of evidence the endline study can generate and consequently in what terms effectiveness of interventions can be qualified. The next table gives an overview of the 4 possible levels of evidence, the related parameters of evidence / types of research, and hence the qualifications of the effectiveness of interventions.⁶⁴

⁶³ The scores of the baseline study were in 2012 not made up by means of this tool; the final scores were then determined by putting up the Synthesis scores. For consistency sake the original 2012 scores were reviewed with the Excel tool, in order to get a comparison between the baseline and endline scores on the same basis; in a view cases baseline scores had to be adapted; these adaptations were in general marginal. Through the review of the baseline scores with the Excel tool, both baseline and endline scores are given with one decimal.

⁶⁴ This overview is based on the various 'ladders of evidence' that are in use in health research; the overview takes the realities of developmental research into account.

Table 20: Evidence ladder

Levels of evidence	Parameter of evidence	Types of research	Effectiveness of interventions
4. Causal	As in 1, 2, and 3, but there is now sound and substantial evidence that the outcome is caused by the intervention and/or clear evidence showing which ingredients of the intervention are responsible for the outcome.	<ul style="list-style-type: none"> - Randomized Control Trial - Repeated case studies (N=1 designs) 	Efficacious
3. Indicative	As in 1 and 2, but it has now been demonstrated that the intervention clearly leads to the desired outcomes (e.g. goals are attained, target problems decrease, competencies increase, clients are satisfied).	<ul style="list-style-type: none"> - Quasi-experimental studies - Theory of Change studies - Norm referenced approaches - Benchmark studies - Client satisfaction studies - Goal attainment studies - Quality assurance studies 	Functional
2. Theoretical	As in 1, but the intervention now has a plausible rationale (i.e. a program theory) to explain why it should work with whom	<ul style="list-style-type: none"> - Reviews - Meta-analysis - Expert knowledge studies 	Plausible
1. Descriptive	The essential elements of the intervention (e.g. goals, target group, methods and activities, requirements) have been made explicit	<ul style="list-style-type: none"> - Descriptive studies - Observation studies - Analysis of documents - Conduct of interviews 	Potential

The approach followed in the capacity development component of the MFS2 regarding the Capacity development of Southern partner organizations is mainly related to the evidence level 'theoretical'. So the effectiveness of the interventions can the best be qualified as 'plausible'. The types of research related to the levels of evidence 1 and 2 (Descriptive and Theoretical) corresponds with the described earlier in this chapter.

The use of the 5 Core capabilities conceptual framework made it possible to compare baseline and endline scores of core capabilities and thus to reach to a certain extend the level of evidence 'indicative'. One should however realize that for the determination of the final score and the qualifications of capability changes interviews, workshops, and core group discussions were vital, besides observation studies. Time constraints made it also not possible to carry out a profound Theory of Change study or client satisfaction studies. Hence the capacity development study can the best generate plausible explanations of the effectiveness of researched interventions.

4.2.2. Results

This chapter gives a descriptive analysis of the findings collected during the follow-up assessment (endline study) following the approach described in the previous chapter. The endline study generated scores per core capability and their underlying aspects that are based on scores per indicator. The comparison between baseline and endline scores are here not given at indicator level, as the scores on aspects underlying the core capabilities give sufficient insight in the major changes per each core capability⁶⁵ and thus on the organisation's capacity development over the period June 2012 - June 2014 (i.e. baseline scoring and endline scoring periods). Per each aspect an explanation given on the finally assigned change qualifications, based on the change qualifications given stemming from the questionnaires used in the organisational self-assessment. If the difference between the baseline and endline scores was between -0.25 and + 0.25, the aspect change was qualified as "stable", if the

⁶⁵ Detailed data at indicator level are captured in the Excel scoring tool and can be made available.

difference was more than + 0.25, then the qualification was "improved", and if the difference was less than -0.25, the aspect change was qualified as "worsened". The final change qualifications, set by the evaluator, take into account what emerged in the workshops, interviews, focus group meetings and the final feedback meeting with Health Child⁶⁶. The baseline and endline scores are given with one decimal to make clear how the Change qualifications stemming from the questionnaires were given. After the explanations of the change qualifications per aspect an explanation is given on the overall change qualifications per entire core capability.

Table 21: Capability to act and commit

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
1 Capability to act and commit	3.2	3.6	Improved	Improved
1a Level of effective leadership	3.4	3.7	Improved	Improved
1b Level of realistic strategic planning	3.3	3.6	Improved	Improved
1c Level of translation of strategy into operations	3.3	3.8	Improved	Improved
1d Level of staff capacity and motivation	3.5	3.5	Stable	Stable
1e Level of financial resource security	2.4	3.5	Improved	Improved

1a. *Improved:* Level of effective leadership improved as a result of existence and continued prevalence of staff meetings, where project officers share activity implementation issues with program managers. High degree of decentralization of powers with increased delegation and consultation (2012). E.g. staff is free to propose and make decisions. Leadership accepted, as needed for good operations, but sufficient openness to inputs staff. Staff size increased from 10 (2102) to 16 (2104); staff turnover (it concerned 2 members) can be explained by linked to better opportunities outside the organisation and also observed lack of effective competence of individual staff members.

1b. *Improved:* Level of realistic strategic planning improved since all activities are implemented according to the strategic plan developed by staff. The entire Health Child team is involved in decision making: strategic planning meetings where resolutions are planned and agreed upon, weekly review meetings, related budgeting processes, and annual review meetings organised. And also development of personal work plans on a monthly basis takes place, which are shared with supervisors; work plans are drawn from objectives of the strategic plan. IICD was instrumental in these processes.

1c. *Improved:* Strategies and plans are always collectively discussed/digested in the weekly program review and planning meetings. Strategic plans are always reviewed when staff are engaged in making of work plans basing on the objectives in the strategic plan; Operational strategies are discussed with staff to ensure that they understand the linkage they have to their work.

1d. *Stable:* Staff generally motivated; staff capacity has improved through trainings, i.e. frequently training opportunities offered a/o through learning framework NCDC (National Curriculum Development Center on ECD - Early Childhood Development) funded by Connect4Change; Building ICT capacity by IICD, and financial management skills. Some staff have attended international workshops (2012 and further). Coaching/mentoring was given by Cordaid's programme officer(s), financial officer(s), and the business development manager. Monitoring of personal professional growth better done; this is not always translated in salary increments, but in providing opportunities for further growth. However some staff's salaries have increased, and some titles have been changed. There are also end of year retreats for all staffs (since 2012). The overall level of staff appreciation was maintained.

1e. *Improved:* Level of financial resource security improved, as more donors came on board; however there is still an issue of sustainability, as the funding is short-term; now situation changed due to new commitments of Cordaid and Bernard van Leer Foundation. Resource mobilization and allocation collectively and openly done for strategy development and proposal writing is organised (by means of a core team of 3 staff and coached by IICD). Health Child received funds from: Cordaid, IICD, Connect 4Change, Bernard van Leer Foundation, Measure Evaluation, Canadian Grand Challenge, Text to change (October 2012-2013). Health Child initiated making of children's (0-10 years) clothes to ensure its financial stability, as funding from many donors will not continue after 2015 (2014). Cordaid supported to advice on entrepreneurial plans of Health Child and in exploring possibilities for further cooperation.

⁶⁶ The workshop took place on 10 June 2014; interviews were held in the period June-July 2014

Table 22: Capability to adapt and self-renew

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
2 Capability to adapt and self-renew	3.3	3.5	Stable	Stable
2a Level of effective application of M&E	3.4	3.3	Stable	Stable
2b Level of strategic use of M&E	3.4	3.4	Stable	Stable
2c Level of openness to strategic learning	3.5	3.9	Improved	Improved
2d Level of context awareness	2.9	3.5	Improved	Improved

2a. Stable: The application of M & E has improved because staff actively participate in the planning basing on the target output stipulated in the M & E plan (2013). Activities are implemented and monitored according to the M & E document (for Bernard van Leer Foundation)(2013). Level of effective application of M&E has improved, due to transparency of staff regarding activities implemented against set objectives in the work plan; increased involvement of staff in M&E however needed (2012-2013); the involvement of University of Carolina was also instrumental (2013). Cordaid provided strategic advices in field visits.

2b. Stable: Level of strategic use of M&E improved as all staff is involved, ensuring that planning is achieved. Monthly work plan is broken down to weekly activities and updates are given on a weekly basis to monitor and evaluate extent of implementing results achieved (2013). New strategies have been designed based on the M & E reports. These form also inputs for proposal writing. The organization has written two research proposals(for the University of Carolina, and Grant Challenges Canada) based on lessons learnt from the annual M & E report (2013).

2c. Improved: Learning is much embraced, encouraged and open to everyone. On regular times staff members engage in discussing ways of improving the implementation of activities. Staffs are given chance/ priority to engage in planning. New strategies in the way working have been initiated and staff has gone ahead to implement them. Training and support giving has been key to strategic learning (2013). IICD facilitated learning, knowledge sharing, action research, and ICT4D.

2d. Improved: Level of context awareness has improved through the organization's collaboration with different stakeholders like at the district, sub county and communities; meetings are held with the district to help identify gaps (2012). Level of context awareness has improved since the organization conducts needs assessment before intervention, does satisfaction surveys and reviews national policies to work within the national priorities e.g. when the Ministry of Health changed the Mother –Child passport since Health child was participating in the Maternal and Child Health TWG for MOH, it supported its extension in its intervention areas (2013).

Overall score core capability To adapt and self-renew was qualified as stable; half of underlying components have shown improvement; other half as stable. Developments regarding all underlying aspects were recent (2013); they established clear conditions for their (further) improvement.

Table 23: Capability to deliver on development objectives

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
3 Capability to deliver on development objectives	3.4	3.5	Stable	Stable
3a Extent to which organization delivers on planned products and services	3.5	3.6	Stable	Stable
3b Extent to which delivered products and services are relevant for target population in terms of the effect they have	3.4	3.7	Improved	Improved
3c Level of work efficiency	3.3	3.3	Stable	Stable

3a. Stable: Health Child's commitment to improve lives of babies and mothers as always remained the same. Past targets were attained (2012), due to the organization's belonging to networks, like Connect for Change and also seeking of services from doctors of Royal College of Paediatrics. Health Child has been recognized by Connect4Change for implementing action research and was selected to showcase to other organizations. Doctors from Royal College of Paediatrics instructed Health Child to conduct neonatal training among health workers in the health centers it collaborates with (2013).

3b. Improved: Delivered products and services are relevant for target population, since areas of implementation are led by national statistics on health obtained from the Uganda Demographic Health Survey (UDHS)(2012); their effects on target groups improved (2013). Communities have learnt to lobby for services like the case of Kisima Islands has gotten a health facility constructed through lobbying to the government; this is evidenced by testimonies by the community about the organization's projects, and are showcased on a quarterly basis at health centers with which Health Child collaborates: Mafubira, Wairaka and Musima (2013). The organization has also initiated selling of mamma kits at a subsidized rate to promote safe motherhood (2103). The kits were purchased from funding given by Cordaid. Execution of MCH / community involvement studies through the Canadian Grand Challenge was also instrumental strengthening Health Child's capability to deliver relevant products and services.

3c. Stable: Health Child claims that level of work efficiency improved through: implementation of multiple activities with same resources, and the increase in the number of health worker (2013). Health Child sees measurement of efficiency related to the organization of fieldwork; here emphasis on self-mobilization of group work. Efficiency data can also be derived from management information system of Village Saving and Loan Associations (VSLA) on the level of spending per each household on healthcare. These are important elements for efficiency measuring, but Health Child thus far does not have consistent method for efficiency measuring.

Overall score core capability To deliver on development objectives was qualified as stable; the organization could improve the relevance of its services; its high standard of service delivery was maintained. Its notion of efficiency is however not yet consistent.

Table 24: Capability to relate

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
4 Capability to relate	3.5	3.9	Improved	Improved
4a Level of involving external parties in internal policy/strategy development	3.4	3.6	Stable	Stable
4b Level of engagement of organization in networks, alliances and collaborative efforts	3.3	4.0	Improved	Improved
4c Extent to which organization is actively engaging with target groups	3.8	3.9	Stable	Stable
4d Level of effective relationships within the organization	3.4	3.9	Improved	Improved

4a. Stable: Health Child is highly participative in making networking collaborations that call it for opportunities to benefit its beneficiaries. Views are sought from beneficiaries and stakeholders like local leaders, Village Health Teams to develop work plans through consultative meetings (2012).

4b. Improved: Organization maintained networks and expanded on the list (2012); there is some space for improvement, as current activities already intensive. Health Child continues to network with organizations such as NEMACY, FENU District Jicafe and I-network. Health child has made new alliances e.g. Royal College of Paediatrics and Child health; participation in conferences e.g. the Global Maternal and Child Health conference, Arusha, Tanzania (January 2013, International conference on Family Planning, Addis Ababa, Ethiopia - (November 2013), regional (child protection departments Jinja District) and national networks e.g. National Council of Children and Technical Working Groups (2013).

4c. Stable: Engagement with target groups remained high; Village Health Teams' capacity in neonatal care was built (2012). They are able to pass on neonatal care information to the target groups during home visits. Before Health Child enters into any community inception, meetings are held at district and village level. Review meetings with communities on a regular basis conducted for feedback and input (2013).

4d. Improved: Internal relationships have become more effective, because teamwork increased as supervisors and project staffs interact freely to solve challenges. Internal relations stabilized, because since the different implemented projects are now directed to the same target populations (2013). What effects improved internal relations have on the organization's external relations became not clear.

Overall score core capability To relate was qualified as improved, as two underlying aspects showed improvements; many improvements are recent (2013), but have potential for further improvement.

Table 25: Capability to achieve coherence

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
5 Capability to achieve coherence	3.7	3.8	Stable	Stable
5a Existence of mechanisms for coherence	3.7	3.8	Stable	Stable
5b Level of coherence of various efforts of organization	3.7	3.9	Stable	Stable

5a. Stable: Health Child has standard operation procedures for activity planning, implementation and reporting. The organization has grown recently from 10 staff (2102) to 16 (2104), which makes existence of coherence mechanisms more important. Yet is it not clear, whether the organization has internal rules and regulations regarding procurement, transport, or human resources management. The organization's mission, goals and objectives are displayed in the office premises. The organization's anthem is sung before any meeting (2012). All organization's proposals, abstracts are written within its three core areas: child survival, child protection and early learning and stimulation.

5b. Stable: Health Child adheres to its coherence in line with project implementation. All projects are implemented using the same implementation model. Frameworks of implementation exist for the organization and the projects. However: clear examples of synergies in the organization are not given, e.g. on the ways same resources /inputs can be combined for realizing outcomes and outcomes in different projects/programs; on the ways the same resources/inputs can create new solutions for existing challenges.

4.2.3. Discussion

4.2.3.1. Followed CFA-SPO approach related to the findings

The general overview of the results shows that Health Child remained firmly stable in its capacity development. Distinct improvement of the core capabilities To act and commit and To Relate can be observed. The next core capability table shows only changes at core capability level.

Table 26: Capability overview

Core capability	Baseline	Endline	Final change qualification
1 To act and commit	3.2	3.6	Improved
2 To adapt and self-renew	3.3	3.5	Stable
3 To deliver on development objectives	3.4	3.5	Stable
4 To relate	3.5	3.9	Improved
5 To achieve coherence	3.7	3.8	Stable

The progress in Core capability 1 can certainly be related to the effects of the capacity development efforts by Cordaid and IICD in the course of 2012 and after 2012 by Cordaid's involvement on its own. In 2012 capacity development was given attention along with the MFS2 funded activities through Connect4Change (Cordaid & IICD); Health Child's staff personnel was enlarged from 10 (2102) to 16 (2104)⁶⁷(see 1a); this went along with increased Connect4Change (Cordaid/IICD) funded MCH project activities. Health Child staff capacity has improved through Connect4Change (mainly IICD and partially Cordaid) funded MCH activities through the learning framework NCDC (National Curriculum Development Centre on ECD - Early Childhood Development; see 1d). Also complementary ICT capacity was built through funding and interventions by IICD for dissemination/awareness raising on MCH (see 1e).

IICD and Cordaid contributed both to strengthening Health Child's organisational structure, development of strategic planning, and a strategic master budget; additionally a financial manual was developed with an accounting system Training of program staff in the use of financial information in planning implementation, monitoring & evaluation, and reserve fund policy was provided as well. Cordaid and IICD staff (from different business units - Programme Officer(s), Financial Officer(s), Business Development Manager) visited Health Child, as well as its business development manager to advice on entrepreneurial plans of Health Child and exploring possibilities for further cooperation with Health Child (see 1b).

Cordaid was mostly focused on MCH program design and execution; IICD's role in the development of core capability 1 -To act and commit, cannot be underestimated. The support was given pragmatically, i.e. in line with the issues coming up in the area of program implementation.

With respect to Core capability 2 (To adapt & self-renew) and Core capability 3 (To deliver on development objectives) other funding agencies played their roles: for Core capability 2 Bernard van Leer Foundation, IICD and the University of Carolina were important (their M&E document was development and put in practice; see 2a and 2b); for Core capability 3 the support by Canadian Grand Challenge to enabling access to health by increasing community involvement, participation and responsibility towards maternal and child health was substantial in addition to what Cordaid provided (see 3b). Especially for the execution of MCH / community involvement studies the Canadian donor was instrumental strengthening Health Child's delivery capability (see 3a).

The change in the core capability 4 -To relate showed overall improvement; Engagement in national networks became stronger (see 4a, 4b) and engagement with target groups remained high (see 4c). Clear improvement was reached in the internal teambuilding within the organisation (see 4d). All improvements were realised on the organisation's own merits and sometimes with the help of Cordaid.

Core capability 5 -To achieve coherence remained firmly stable; internal rules & regulations were updated (see 5a); for seeking synergies there is room for improvement (see 5b). Cordaid's involvement in this core capability was on incidental basis, in cases needed.

A different emphasis with respect to capacity development is not expected that for the remaining period of Cordaid / IICD's support to Health Child within the MFS2 program funding. Cordaid IICD's needs based and pragmatic approach to Health Child's capacity development worked well.

⁶⁷ Staff turnover remained low over 2012-2104 (it concerned 2 members)

4.2.3.2. Recommendations

Cordaid / IICD's actual pragmatic and needs based approach can the best be maintained. However: Cordaid / IICD as development partner of Health Child can better concentrate more on the organisation's sustainability, but only when Health Child shows a proactive attitude towards acquisition of new assignments that fall in the organisation's mandate.

Cordaid / IICD are recommended to support Health Child in its funding base, by searching new options for diversifying international organisations that are involved in or linked to Health Child's current programs and related package of activities.

Since 2011 Cordaid / IICD's involvement in Health Child's capacity development proved to be steady. There is no reason to change this approach, even given the realised improvements in the capacity of Health Child's organisation.

In the current setup with other development partners, Cordaid / IICD are recommended to continue its involvement in Health Child also beyond the MFS2 program funding with program funding, but then on a more modest level. In case Health Child succeeds in diversifying its donor base, Cordaid and IICD are then recommended to phase out and to confine itself to punctual support. This should not necessarily entail support to further capacity development.

4.2.3.3. Remarks on evaluation approach

The evaluation of Health Child's capacity development itself, especially concerning the impact of Cordaid / IICD's support could not be reasonably based on reported expenditures, that originate from program funding provided by Connect4Change. Amounts that were clearly earmarked per distinct capacity development activity were partially complete, and also were there capacity development activities that came from Cordaid / IICD's general overheads. As Cordaid / IICD's support to capacity development was pragmatic and needs based the recording of outputs and envisaged outcomes could stay uncomplicated and tangible. Health Child's program/project reporting on activity progress needs to be further developed, in line with new M&E protocol introduced through the Bernard van Leer Foundation, which makes the evaluation of Health Child's capacity development more robust.

The chosen qualitative approach to assess the capacity development of SPO's, as described in Chapter 4, appeared to work well. The use of capability scoring requires a careful approach: scores can serve a comparison between baseline and endline outcomes, but this comparison needs to be thoroughly triangulated through interviews, focus group discussions, or joint analysis and verification workshops with stakeholders. In the current evaluation setup triangulation was an integral part of the evaluation, but to honour fully the requirements triangulation requires more research time was needed; then the qualification of effectiveness of interventions can then be firmly plausible and to a certain extent functional.⁶⁸

4.2.4. Conclusion

In this chapter conclusions are drawn with respect to the 3 evaluation questions of the MFS2 Evaluation Study Capacity Development of Southern Partner Organizations - Uganda, e.g.:

- What are the changes in partner organizations' capacity during the 2012–2014 period?
- To what degree are the changes identified in partner capacity attributable to development interventions undertaken by the MFS II consortia (i.e. measuring effectiveness)?
- What factors explain the findings drawn from the questions above?

4.2.4.1. Changes in Health Child's capacity during the 2012–2014 period

Health Child's organization has shown improvements and stability at the same time during the period June 2012 - June 2014; the organization's sustainability stands out as the main issue for attention. Its abilities related to implementation improved (Core capability 1), its strategic orientation and related use of monitoring remained stable (Core capabilities 2 and 3), whereas its relation networks became stronger (Core capability 4), and its organizational coherence stable (Core capability 5).

⁶⁸ See Table 20.

4.2.4.2. Cordaid's influence on identified changes

Changes in Health Child's capacity since June 2012 can be certainly attributed in part to Cordaid's (and IICD's) interventions thereafter. Cordaid's capacity development support was regularly given with a concentration on the first half of the period June 2012-June 2014. Cordaid mainly focused on Health Child's organization structure, staffing, financial management and funding raising.

Cordaid / IICD has been the largest donor to Health Child and did in this position contribute the most to Health Child's capacity development. In certain areas the contributions from other donors were certainly there: the interventions by the Bernard van Leer Foundation and the study assignment through the University of Carolina were instrumental with respect to M&E. Their contributions are however not part of this evaluation.

4.2.4.3. Explaining factors to identified changes

Cordaid's support to Health Child still contributes to the organization's profile regarding Maternal Child Health (MCH) within underprivileged groups. This has led to increased involvement of Health Child in MCH policy development at national level, and related assignments from the Government of Uganda in this area. Health Child's donors made it possible for the organization to continue operating and settling its position. Cordaid proved to be steady in its MCH program support and pragmatic in its capacity development support. Whether this is sufficient for the organization's to operate on its own account, remain a question. The organization is however in a good position to maintain, but also to strengthen its existing relations with the government, (I)NGO's and the private sector.

4.2.4.4. Assessment project design

Previous considerations and observations result in an assessment of the project design. Cordaid's interventions however cannot be considered as a separate project, but more to a set of pragmatic capacity development oriented actions based on clear organizational needs. *The assessment concerns this approach to the capacity development support extended to Health Child.* The next table serves for giving an assessment scores on 3 statements: The project was well designed, The project was implemented as designed, and The project reached all its objectives. Cordaid / IICD provided support to Health Child's capacity development based on observed needs, and these were leading in sequencing of Cordaid / IICD's capacity development intervention to Health Child. With this in mind the following assessment along the 3 statements is given.

Table 27: Evaluation table

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	8
The project was implemented as designed	8
The project reached all its objectives	7

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6. Appendix

Appendix 1: Instruments – Personal and household information (VHT questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
101	IS THE RESPONDENT MALE OR FEMALE?	<input type="checkbox"/>	1. Male 2. Female	
102	In what month and year were you born?	MM YYYY	RECORD THE DATE. IF THE RESPONDENT DOESN'T KNOW, ENTER 99 / 9999	
103	How old were you at your last birthday? COMPARE WITH 102 IF CONSISTENT. IF NOT, PROBE UNTIL CONSISTENT.	<input type="checkbox"/> years	ENTER AGE IN COMPLETED YEARS.	
104	Are you married? PROBE FOR THE RESPONDENT'S MARITAL STATUS	<input type="checkbox"/>	1. Single 3. Married 5. Separated 2. Engaged 4. Divorced 6. Widowed	
105	Have you ever attended school?	<input type="checkbox"/>	1. Yes 2. No	→ 106 → 109
106	What is the highest level of school you attended?	<input type="checkbox"/>	1. Primary 3. Upper secondary 2. Lower secondary 4. Higher	
107	What is the highest grade you completed at that level?	<input type="checkbox"/>	RECORD GRADE (FOR PRIMARY: P1 etc., SECONDARY: S1, etc. TERTIARY: 01 etc.)	
108	How often do you read a newspaper?	<input type="checkbox"/>	1. Almost every day 3. Less than once a week 2. At least once a week 4. Not at all	
109	How often do you listen to news on the radio or tv?	<input type="checkbox"/>		
110	What tribe do you belong to?	<input type="checkbox"/>	1. Muganda 6. Mukiga 11. Munyoro 2. Muteso 7. Lango 12. Mutoro 3. Musoga 8. Mugisu 13. Karamojong 4. Munyankole 9. Acholi 14. Other, specify: _____ 5. Munyarwanda 10. Lugbara	
111	What is your religion?	<input type="checkbox"/>	1. Christian 3. Traditional 2. Muslim 4. Other, specify: _____	
112	Do you or anyone in your household own any of the following? a. phone? b. radio? c. television? d. generator? e. bicycle? f. motorbike? g. car?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Yes 2. No	
113	What is the main material of your roof?	<input type="checkbox"/>	1. Thatch 3. Other, specify: _____ 2. Iron	
114	What is the main material of your walls?	<input type="checkbox"/>	1. Mud 3. Bricks 2. Mud block 4. Other, specify: _____	
115	What is the main material of your floor?	<input type="checkbox"/>	1. Mud / earth 3. Tiles 2. Cement 4. Other, specify: _____	

Appendix 2: Instruments – Awareness (VHT questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
301	<p>I am now going to read out some statements about healthcare. For each one, please tell me whether you think it is true or false:</p> <p>a. Avoiding mosquito bites helps prevent HIV / AIDS.</p> <p>b. Staying with one faithful partner helps prevent HIV / AIDS.</p> <p>c. Using condoms during sexual intercourse helps prevent HIV / AIDS.</p> <p>d. If you don't have any complications during a pregnancy, you don't need to seek antenatal care</p> <p>e. Dirty water causes malaria.</p> <p>f. Avoiding mosquito bites helps to prevent against malaria.</p> <p>g. It's dangerous to feed an infant with powder milk mixed with non-boiled water</p> <p>h. If a child is born healthy, there is no need to seek postnatal care</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>1. True 2. False</p>	
302	<p>I am now going to read out some statements about delivery. For each one, please tell me whether you think it is true or false:</p> <p>a. One should wrap a baby in a warm cloth immediately after birth.</p> <p>b. One should try to breastfeed as soon as possible after birth.</p> <p>c. One should bathe the baby thoroughly immediately after birth.</p> <p>d. One should not apply anything to the cord and leave it dry and open.</p> <p>e. One should never immunize or vaccinate a baby in its first year since birth.</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>1. True 2. False</p>	

Appendix 3: Instruments – Personal and household information (mother questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
101	In what month and year were you born?	MM YYYY	RECORD THE DATE. IF THE RESPONDENT DOESN'T KNOW, ENTER 99 / 9999	
102	How old were you at your last birthday? COMPARE WITH 101 IF CONSISTENT. IF NOT, PROBE UNTIL CONSISTENT.	____ years	ENTER AGE IN COMPLETED YEARS.	
103	Are you married? PROBE FOR THE RESPONDENT'S MARITAL STATUS	<input type="checkbox"/>	7. Single 9. Married 11. Separated 8. Engaged 10. Divorced 12. Widowed	
104	Have you ever attended school?	<input type="checkbox"/>	3. Yes 4. No	→ 105 → 108
105	What is the highest level of school you attended?	<input type="checkbox"/>	5. Primary 7. Upper secondary 6. Lower secondary 8. Tertiary	
106	What is the highest grade you completed at that level?	____	RECORD GRADE (FOR PRIMARY: P1 etc., SECONDARY: S1, etc. TERTIARY: 01 etc.)	
107	How often do you read a newspaper?	<input type="checkbox"/>	5. Almost every day 7. Less than once a week 6. At least once a week 8. Not at all	
108	How often do you listen to news on the radio or tv?	<input type="checkbox"/>		
109	What tribe do you belong to?	_____	15. Muganda 20. Mukiga 25. Munyoro 16. Muteso 21. Lango 26. Mutoro 17. Musoga 22. Mugisu 27. Karamojong 18. Munyankole 23. Acholi 28. Other, specify: 19. Munyarwanda 24. Lugbara	
110	What is your religion?	<input type="checkbox"/>	5. Christian 7. Traditional 6. Muslim 8. Other, specify: _____	
111	Do you or anyone in your household own any of the following? a. phone? b. radio? c. television? d. generator? e. bicycle? f. motorbike? g. car?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	3. Yes 4. No	
112	What is the main material of your roof?	<input type="checkbox"/>	4. Thatch 6. Other, specify: _____ 5. Iron	
113	What is the main material of your walls?	<input type="checkbox"/>	5. Mud 7. Burnt bricks 6. Unburnt bricks 8. Other, specify: _____	
114	What is the main material of your floor?	<input type="checkbox"/>	5. Mud / earth / dung 7. Tiles 6. Cement 8. Other, specify: _____	

Appendix 4: Instruments – Women's rights awareness (mother questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
301	<p>I am now going to read out some statements about liberties that a woman should or should not be allowed to take. For each one, please tell me how much you agree:</p> <p>a. A woman should be allowed to go alone to the market to buy products</p> <p>b. A woman should be free to visit a doctor without the permission of the husband</p> <p>c. It should be normal for a woman to have her own savings, which she can spend the way she prefers</p> <p>d. It should be normal for a woman to have a voice on the most critical decisions in the household</p> <p>e. After delivery a woman should take sufficient time to rest, should drink a lot of water and eat abundantly to regain strength</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>1. Agree completely 2. Agree just a bit 3. Disagree just a bit 4. Disagree completely</p>	

Appendix 5: Instruments – Health and maternal care awareness (mother questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
401	<p>I am now going to read out some statements about healthcare. For each one, please tell me whether you think it is true or false:</p> <p>a. Avoiding mosquito bites helps prevent HIV / AIDS.</p> <p>b. Staying with one faithful partner helps prevent HIV / AIDS.</p> <p>c. Using condoms during sexual intercourse helps prevent HIV / AIDS.</p> <p>d. If you don't have any complications during a pregnancy, you don't need to seek antenatal care.</p> <p>e. Drinking dirty water causes malaria.</p> <p>f. Avoiding mosquito bites helps to prevent against malaria.</p> <p>g. It's dangerous to feed an infant with powder milk mixed with non-boiled water.</p> <p>h. If a child is born healthy, there is no need to seek postnatal care.</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>1. True 2. False</p>	
402	<p>I am now going to read out some statements about delivery and maternal care. For each one, please tell me whether you think it is true or false:</p> <p>a. One should wrap a baby in a warm cloth immediately after birth.</p> <p>b. One should try to breastfeed as soon as possible after birth.</p> <p>c. One should bathe the baby thoroughly immediately after birth.</p> <p>d. One should not apply anything to the cord and leave it dry and open.</p> <p>e. One should never immunize or vaccinate a baby in its first year since birth.</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>	<p>1. True 2. False</p>	

Appendix 6: Instruments – Family planning (mother questionnaire)

NO.	501	502	503
	Do you know of any family planning methods? DO NOT PROMPT!	Have you ever used this method?	Did you use this method in the year prior to your most recent pregnancy?
CIRCLE ALL THAT APPLY	A. Abstinence / moon beads / calendar days B. Prolonged breastfeeding / "lam" C. Withdrawal / pullout D. Male/female condoms E. Intrauterine device / coil F. Pills G. Shots H. Male/female sterilization / vasectomy / ligation I. Traditional methods, specify: _____ J. Other, specify: _____	A. Abstinence / moon beads / calendar days B. Prolonged breastfeeding / "lam" C. Withdrawal / pullout D. Male/female condoms E. Intrauterine device / coil F. Pills G. Shots H. Male/female sterilization / vasectomy / ligation I. Traditional methods, specify: _____ J. Other, specify: _____	A. Abstinence / moon beads / calendar days B. Prolonged breastfeeding / "lam" C. Withdrawal / pullout D. Male/female condoms E. Intrauterine device / coil F. Pills G. Shots H. Male/female sterilization / vasectomy / ligation I. Traditional methods, specify: _____ J. Other, specify: _____

Appendix 7: Instruments – Health status (mother questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
601	In general, would you say your health is...	<input type="checkbox"/>	1. Excellent 2. Very good 3. Good 4. Fair 5. Poor	
602	Compared to one year ago, how would you rate your health in general now?	<input type="checkbox"/>	1. Much better than one year ago 2. Somewhat better than one year ago 3. About the same 4. Somewhat worse than one year ago 5. Much worse than one year ago	
603	Does your health now limit you in moderate activities such as carrying water or carrying a child?	<input type="checkbox"/>	1. Yes, limited a lot 2. Yes, limited a bit 3. No	
604	Does your health now limit you in climbing a steep hill?	<input type="checkbox"/>		
605	During the past 4 weeks, have you accomplished less than you would like as a result of your physical health?	<input type="checkbox"/>		
606	During the past 4 weeks, were you limited in the kind of work you could do as a result of your physical health?	<input type="checkbox"/>	1. Yes 2. No	
607	During the past 4 weeks, have you accomplished less than you would like as a result of any emotional problems?	<input type="checkbox"/>		
608	During the past 4 weeks, have you done your work less carefully than usual as a result of any emotional problems?	<input type="checkbox"/>		
609	During the past 4 weeks, how much did pain interfere with your normal work?	<input type="checkbox"/>	1. Not at all 2. A little bit 3. Moderately 4. Quite a bit 5. Extremely	
610	During the past 4 weeks, have you felt calm and peaceful?	<input type="checkbox"/>	1. All the time 2. Most of the time 3. A good bit of the time 4. Some of the time 5. A little of the time 6. Never	
611	During the past 4 weeks, have you had a lot of energy?	<input type="checkbox"/>		
612	During the past 4 weeks, have you felt downhearted or depressed?	<input type="checkbox"/>		
613	During the past 4 weeks, have your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc...)?	<input type="checkbox"/>		
614	Have you ever been vaccinated?	<input type="checkbox"/>	1. Yes 2. No 3. Don't know	

Appendix 8: Instruments – Children (mother questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
701	Now I would like to ask you about all the births you have had during your life. Have you ever given birth?	<input type="checkbox"/>	1. Yes 2. No	→ 702 → 711
702	Do you have any sons or daughters to whom you have given birth who are now living with you?	<input type="checkbox"/>	1. Yes 2. No	→ 703 → 705
703	How many sons live with you?	<input type="text"/>		
704	How many daughters live with you?	<input type="text"/>		
705	Do you have any sons or daughters to whom you have given birth who are alive but do not live with you?	<input type="checkbox"/>	1. Yes 2. No	→ 706 → 708
706	How many sons are alive but do not live with you?	<input type="text"/>		
707	How many daughters are alive but do not live with you?	<input type="text"/>		
708	Have you ever given birth to a boy or a girl who was born alive but later died?	<input type="checkbox"/>	1. Yes 2. No	→ 709 → 711
709	How many boys have died?	<input type="text"/>		
710	How many girls have died?	<input type="text"/>		
711	Some women lose their pregnancy spontaneously, that is they have a miscarriage. Have you ever had a miscarriage? That is have you ever lost a pregnancy spontaneously?	<input type="checkbox"/>	1. Yes 2. No	→ 712 → 713
712	How many miscarriages have you had in your lifetime?	<input type="text"/>		
713	Women sometimes take steps to end their pregnancy, because they find themselves pregnant when they do not want to be, or when it is difficult for them to continue with their pregnancy because of opposition from their husband, partner, relatives or others. Have you ever been in a situation when you or someone else have had to do anything to end your pregnancy?	<input type="checkbox"/>	1. Yes 2. No	→ 714 → 715
714	How many pregnancies have ended this way in your lifetime?	<input type="text"/>		
715	Some women have stillbirths, that is they give birth in late pregnancy to a dead child. Have you ever had a still birth?	<input type="checkbox"/>	1. Yes 2. No	→ 716 → 717
716	How many stillbirths have you had in your lifetime?	<input type="text"/>		
717	Are you pregnant now?	<input type="checkbox"/>	1. Yes 2. No	→ 718 → 719
718	IF CURRENTLY PREGNANT, ENTER 01; OTHERWISE 00	<input type="text"/>		
719	SUM UP ANSWERS TO 703, 704, 706, 707, 709, 710, 712, 714, 716 AND 718	<input type="text"/>		
720	CHECK 719: Just to make sure that I have this right: you have had in total _____ pregnancies during your life. Is that correct?	<input type="checkbox"/>	1. Yes 2. No	→ 722 → 721
721	IF ANSWER TO 720 IS NO, PROBE AND CORRECT 701 – 716 AS NECESSARY. BE SURE TO CHECK FOR TWINS AND TRIPLETS. IF DISCREPANCIES ARE DUE ONLY TO TWINS OR TRIPLETS, ENTER THE NUMBER OF TWINS / TRIPLETS (EXAMPLE: FOR TWO PAIRS OF TWINS, ENTER 4)	<input type="text"/> twins <input type="text"/> triplets		
722	CHECK 719: HAS THE RESPONDENT BEEN PREGNANT AT LEAST ONCE?	<input type="checkbox"/>	1. Yes 2. No	→ 801 → 1001

Appendix 9: Instruments – Current pregnancy (mother questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
801	CHECK 717: IS THE RESPONDENT PREGNANT?	<input type="checkbox"/>	1. Yes 2. No	→ 802 → 901
802	How many months are you pregnant?	<input type="text"/> months	IF THE RESPONDENT DOES NOT KNOW, ENTER 98	
804	Did you see anyone for antenatal care during this pregnancy?	<input type="checkbox"/>	1. Yes 2. No	→ 805 → 806
805	Who did you see for antenatal care during this pregnancy?	A. Doctor B. Nurse / Midwife C. TBA D. Other, specify: _____	CIRCLE ALL LETTERS THAT APPLY	→ 807
806	Why did you not see anyone?	A. Too early B. Not necessary C. Too far D. Transportation problem E. Afraid to go F. Religious reason G. Other, specify: _____	CIRCLE ALL LETTERS THAT APPLY	→ 812
807	The very first time you went for antenatal care during this pregnancy, did you go because of problems with the pregnancy or just for a checkup?	<input type="checkbox"/>	1. Because of a problem 2. Just for checkup	
808	Where did you receive antenatal care for this pregnancy?	A. Respondent's or other home B. Gov't hospital C. Gov't health center D. Private hospital E. Private health center F. Other, specify: _____ Name of the place: _____ _____ _____	CIRCLE ALL LETTERS THAT APPLY RECORD THE NAME(S) OF THE PLACE(S)	
809	How many months were you pregnant when you first received antenatal care for this pregnancy?	<input type="text"/>	RECORD MONTHS, IF RESPONDENT DOES NOT KNOW, ENTER 98	
810	How many times did you receive antenatal care during this pregnancy?	<input type="text"/>	RECORD NUMBER, IF RESPONDENT DOES NOT KNOW, ENTER 98	
811	As part of your ANC during this pregnancy, were any of the following done at least once? a. Were you weighed? b. Was your blood pressure measured? c. Did you give a urine sample? d. Did you give a blood sample? e. Did you receive a tetanus shot?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Yes 2. No	
812	Where do you plan to give birth?	<input type="checkbox"/>	1. Respondent's or other home 2. Gov't healthcare facility 3. Private healthcare facility 4. Other, specify: _____	
813	Do you plan to go for a medical check-up after delivery?	<input type="checkbox"/>	1. Certainly yes 2. Probably yes 3. Only if sick 4. Probably not 5. Certainly not	
814	Do you plan to take your child for a medical check-up after birth?	<input type="checkbox"/>		
815	Do you plan to have your child vaccinated?	<input type="checkbox"/>		

Appendix 10: Instruments – Last pregnancy (mother questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
901	DO NOT ASK. CHECK 717 AND 719. The respondent is...	<input type="checkbox"/>	1. ... now pregnant and it is her first pregnancy 2. ... now pregnant, but not for the first time 3. ... NOT pregnant now, but has been before	→ 10. → 902 → 902
902	I want to ask you some questions about your last pregnancy now. When you were last pregnant, was the baby born alive, born dead, or did you have a miscarriage or abortion?	<input type="checkbox"/>	1. Born alive 2. Born dead 3. Miscarriage 4. Abortion	→ 903 → 913 → 910 → 910
903	Was it a boy or a girl?	<input type="checkbox"/>	1. Boy 2. Girl	
904	What name was given to the child?	Name: _____		
905	In what month and year was [NAME] born?	MM YYYY	RECORD DATE. IF RESPONDENT DOESN'T KNOW, ENTER 99 / 9999.	
906	What was [NAME]'s weight at birth?	<input type="checkbox"/> , <input type="checkbox"/>	IF UNKNOWN, ENTER 9.9	
907	Is [NAME] still alive?	<input type="checkbox"/>	1. Yes 2. No	→ 908 → 909
908	How old was [NAME] at his/her last birthday?	<input type="checkbox"/> <input type="checkbox"/> years	RECORD AGE IN YEARS ENTER 00 IF YOUNGER THAN 1 YEAR	→ 913
909	How old was [NAME] when he/she died?	<input type="checkbox"/>	1. Less than 6 weeks 2. More than 6 weeks, but less than 1 year 3. 1 year or more, but less than 5 years 4. 5 years or more	→ 913
910	In what month and year did the pregnancy end?	MM YYYY	RECORD DATE. IF RESPONDENT DOESN'T KNOW, ENTER 99 / 9999.	
911	How many months did this pregnancy last?	<input type="checkbox"/> <input type="checkbox"/> months	RECORD COMPLETED MONTHS	
912	Did you or anyone else do something to end this pregnancy?	<input type="checkbox"/>	1. Yes 2. No	
913	Were you part of a mothers' club like this one during this pregnancy?	<input type="checkbox"/>	1. Yes 2. No	
914	Did you see anyone for antenatal care during this pregnancy?	<input type="checkbox"/>	1. Yes 2. No	→ 915 → 916
915	Who did you see for antenatal care during this pregnancy?	A. Doctor C. TBA B. Nurse / Midwife D. Other, specify: _____	CIRCLE ALL LETTERS THAT APPLY	→ 917
916	Why did you not see anyone?	A. Not necessary G. Better service at home B. Not customary H. Inconvenient service hours C. Too far I. Afraid to go D. Transportation problem J. Religious reason E. No one to accompany K. Other, specify: _____ F. Good service not available	CIRCLE ALL LETTERS THAT APPLY	→ 922
917	The very first time you went for antenatal care during this pregnancy, did you go because of problems with the pregnancy or just for a checkup?	<input type="checkbox"/>	1. Because of a problem 2. Just for checkup	

Appendix 11: Instruments – Last pregnancy (mother questionnaire) contd.

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
918	Where did you receive antenatal care for this pregnancy?	<p>Name of the place:</p> <p>A. Respondent's or other home _____</p> <p>B. Gov't hospital _____</p> <p>C. Gov't health center _____</p> <p>D. Private hospital _____</p> <p>E. Private health center _____</p> <p>F. Other, specify: _____</p>	CIRCLE ALL LETTERS THAT APPLY RECORD THE NAME(S) OF THE PLACE(S) OTHER THAN HOMES	
919	How many months were you pregnant when you first received antenatal care for this pregnancy?	_____	RECORD MONTHS, IF THE RESPONDENT DOES NOT KNOW, ENTER 98	
920	How many times did you receive antenatal care during this pregnancy?	_____	RECORD NUMBER OF TIMES, IF THE RESPONDENT DOES NOT KNOW, ENTER 98	
921	As part of your antenatal care during this pregnancy, were any of the following done at least once? a. Were you weighed? b. Was your blood pressure measured? c. Did you give a urine sample? d. Did you give a blood sample? e. Did you receive a tetanus shot?	 <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	 <p>1. Yes</p> <p>2. No</p>	
922	DO NOT ASK. CHECK 902. Was the baby born alive or born dead or did you have a miscarriage or abortion?	_____	<p>1. Born alive</p> <p>2. Born dead</p> <p>3. Miscarriage</p> <p>4. Abortion</p>	<p>→ 923</p> <p>→ 923</p> <p>→ 10.</p> <p>→ 10.</p>
923	Was the baby delivered by caesarian section?	_____	<p>1. Yes</p> <p>2. No</p>	
924	Who assisted you with delivery at the end of this pregnancy?	<p>A. Doctor B. Nurse / Midwife C. TBA</p> <p>D. No one E. Other, specify: _____</p>	CIRCLE ALL LETTERS THAT APPLY	
925	Where did you give birth? FOR ANSWERS 2. – 6., RECORD THE NAME OF THE PLACE	<p>_____</p> <p>Name: _____</p>	<p>1. Respondent's or somebody else's home</p> <p>2. Gov't hospital</p> <p>3. Gov't health center</p> <p>4. Private hospital</p> <p>5. Private health center</p> <p>6. Other, specify: _____</p>	<p>→ 926</p> <p>→ 927</p> <p>→ 927</p> <p>→ 927</p> <p>→ 927</p> <p>→ 927</p>
926	Why did you not deliver at a hospital or a health center?	<p>A. Not necessary B. Not customary C. Too far D. Transportation problem E. No one to accompany F. Good service not available</p> <p>G. Better service at home H. Inconvenient service hours I. Afraid to go J. Religious reason K. Other, specify: _____</p>	CIRCLE ALL LETTERS THAT APPLY	→ 928
927	How long after the delivery did you stay there?	_____ days	IF LESS THAN A DAY, ENTER 00. IF THE RESPONDENT DOES NOT KNOW, ENTER 98.	
928	After you delivered and came home, did you go for a post-pregnancy check-up?	_____	<p>1. Yes</p> <p>2. No</p>	<p>→ 929</p> <p>→ 930</p>

Appendix 12: Instruments – Last pregnancy (mother questionnaire) contd.

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
929	How long after the delivery did you go for the checkup on your own health?	____ days	IF LESS THAN A DAY, ENTER 00. IF UNKNOWN, ENTER 98.	
930	After you delivered and came home, did you take your child for post-natal care?	___	1. Yes 2. No	→ 931 → 932
931	How long after the delivery did you go?	____ days	IF LESS THAN A DAY, ENTER 00. IF UNKNOWN, ENTER 98.	
932	Did you have your child immunized?	___	1. Yes 2. No	
933	How many times a day did you normally breastfeed your child in the first month?	____ times per day	RECORD NUMBER OF TIMES, IF THE RESPONDENT DOES NOT KNOW, ENTER 98	

Appendix 13: Instruments – VHT (mother questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
1001	We are almost finished now. The last questions I have are about your village health team worker. We will not share your answers with her/him, so please give me your true opinions. Do you know who is your village health team worker?		RECORD NAME	
1002	IS THE NAME CORRECT?	___	1. Yes 2. No	→ 1004 → 1003
1003	No, your village health team worker is [CORRECT NAME]. Do you know her/him?	___	1. Yes 2. No	→ 1004 → 1101
1004	How well do you know [CORRECT NAME]?	___	1. Very well 2. Quite well 3. Just a little bit 4. Just by name / almost unknown	
1005	During your current (if pregnant) or last (if not pregnant) pregnancy, did you meet with [CORRECT NAME] to talk about health issues related to your pregnancy?	___	1. Yes 2. No	→ 1007 → 1006
1006	Why didn't you?	___	1. I didn't need to 2. I was ashamed 3. I don't trust her/him 4. I don't think (s)he would be able to help 5. Other, specify: _____	→ 1011
1007	How many times did you meet with her/him <i>alone</i> to talk about these things?	____	RECORD THE NUMBER OF TIMES ENTER 98 IF UNKNOWN	
1008	How many times did you meet with [CORRECT NAME] <i>together with other pregnant women</i> to talk about these things?	____	RECORD THE NUMBER OF TIMES ENTER 98 IF UNKNOWN	
1009	Have you ever asked [CORRECT NAME] for advice about your pregnancy?	___	1. Yes 2. No	→ 1011 → 1010
1010	Why didn't you?	___	1. I didn't need to 2. I was ashamed 3. I don't trust her/him 4. I don't think (s)he would be able to help 5. Other, specify: _____	
1011	Is [CORRECT NAME] knowledgeable about pregnancy-related issues?	___	1. Yes, agree completely 2. Yes, agree just a bit 3. No, disagree just a bit 4. No, disagree completely	
1012	Can you ask [CORRECT NAME] for advice about health and pregnancy any time?	___		
1013	Do you trust [CORRECT NAME]?	___		

Appendix 14: Explanatory and confounding variables

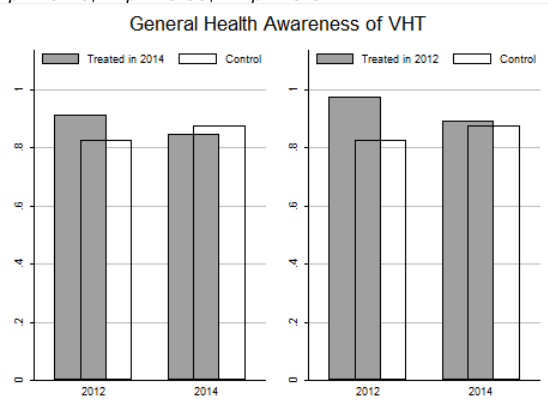
treat	= 1 if project is taking place, 0 otherwise
FU	= 1 if follow-up, 0 if baseline
treatFU	= treat × FU
ASI	= asset index on a scale of 0 to 1 constructed by factor analysis
eduyrs	= years of education
age	= age in years
single	= 1 if single, 0 otherwise
female	= 1 if VHT is female, 0 otherwise
vhtinv	= index of VHT involvement as described above, on a scale of 0 to 1

Appendix 15: General healthcare awareness of VHT

	STE		MTT
	(BSD) aware	(DID) aware	(BSD) aware
treatFU		-0.098 (0.083)	
treat	0.051** (0.024)	0.087* (0.043)	
FU	-0.041 (0.035)	0.047 (0.061)	-0.077** (0.029)
ASI	-0.042 (0.035)	-0.036 (0.059)	-0.067 (0.050)
eduyrs	0.011** (0.004)	0.004 (0.008)	0.015* (0.008)
age	0.001 (0.001)	0.002 (0.001)	0.002 (0.002)
female	-0.028 (0.026)	-0.028 (0.046)	-0.033 (0.036)
N	55	38	24
R ²	0.186	0.156	0.118

Marginal effects; Standard errors in parentheses

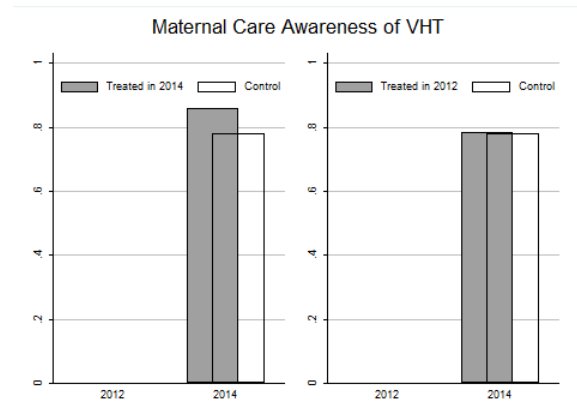
(d) for discrete change of dummy variable from 0 to 1
 * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$



Appendix 16: Maternal care awareness of VHT

	STE (BSD) care
treat	0.040 (0.061)
ASI	0.073 (0.085)
eduysr	-0.009 (0.011)
age	0.001 (0.004)
female	0.015 (0.059)
N	24
R ²	0.118

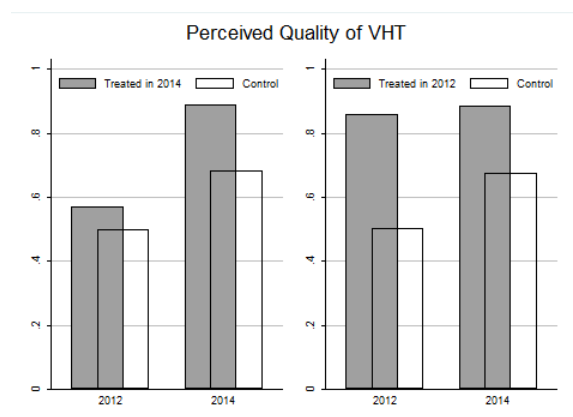
Marginal effects; Standard errors in parentheses
(d) for discrete change of dummy variable from 0 to 1
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$



Appendix 17: Perceived quality of VHT

	(BSD) vhtop	(BSD) ⁶⁹ vhtop	STE (DID) vhtop	(DID) vhtop	MTT (BSD) vhtop
treatFU			0.057 (0.077)	-0.039 (0.074)	
treat	0.234 ^{***} (0.040)	0.180 ^{***} (0.038)	0.063 (0.057)	0.038 (0.052)	
FU	0.074 ^{**} (0.036)	0.046 (0.038)	0.155 ^{**} (0.075)	0.156 [*] (0.077)	0.025 (0.036)
ASI	-0.085 (0.080)	-0.050 (0.084)	-0.227 (0.150)	-0.186 (0.153)	-0.004 (0.085)
eduyrs	0.004 (0.005)	0.004 (0.004)	0.014 [*] (0.007)	0.011 (0.006)	-0.001 (0.004)
age	0.002 (0.002)	0.001 (0.002)	0.002 (0.002)	0.001 (0.002)	0.004 (0.003)
female	0.120 ^{***} (0.039)	0.097 ^{**} (0.037)	0.161 ^{**} (0.064)	0.116 [*] (0.060)	0.057 [*] (0.026)
vhtinv		0.270 ^{***} (0.044)		0.382 ^{***} (0.053)	
N	583	583	380	380	189
R ²	0.256	0.311	0.216	0.296	0.050

Marginal effects; Standard errors in parentheses
(d) for discrete change of dummy variable from 0 to 1
^{*} $p < 0.10$, ^{**} $p < 0.05$, ^{***} $p < 0.01$

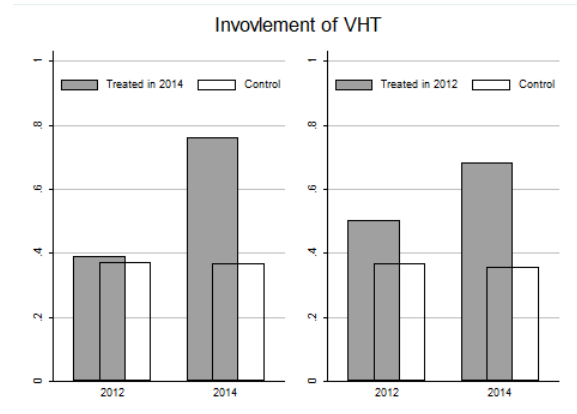


⁶⁹ For the estimations of project effect on mothers' awareness and behavior, we only report the results of the specification which includes controls for the gender of the VHT and his/her involvement in with the community when at least one of the two has a statistically significant effect on the outcome indicator.

Appendix 18: Involvement of VHT

	STE		MTT
	(BSD) vhtinv	(DID) vhtinv	(BSD) vhtinv
treatFU		0.307*** (0.078)	
treat	0.222*** (0.043)	0.013 (0.054)	
FU	0.093 (0.056)	-0.040 (0.031)	0.241* (0.111)
ASI	-0.103 (0.079)	-0.042 (0.131)	-0.123 (0.212)
eduyrs	0.001 (0.005)	0.007 (0.005)	-0.002 (0.007)
age	0.002 (0.002)	0.003 (0.003)	-0.001 (0.004)
female	0.096** (0.041)	0.143*** (0.046)	0.058 (0.062)
N	619	412	191
R ²	0.219	0.263	0.126

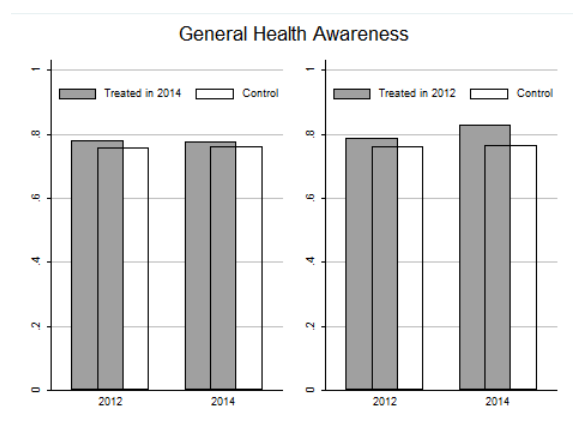
Marginal effects; Standard errors in parentheses
(d) for discrete change of dummy variable from 0 to 1
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$



Appendix 19: General health awareness

	(BSD) aware	(BSD) ⁷⁰ aware	STE (DID) aware	(DID) aware	MTT (BSD) aware
treatFU			-0.018 (0.033)	-0.019 (0.035)	
treat	0.018 (0.014)	0.012 (0.015)	0.029 (0.020)	0.030 (0.021)	
FU	0.000 (0.015)	-0.001 (0.015)	-0.002 (0.026)	0.008 (0.027)	0.050* (0.024)
ASI	0.061 (0.039)	0.085** (0.040)	0.188** (0.069)	0.198** (0.076)	-0.044 (0.086)
eduyrs	0.007*** (0.002)	0.006*** (0.002)	0.005 (0.003)	0.004 (0.003)	0.009** (0.003)
age	0.001 (0.001)	0.001 (0.001)	0.001 (0.001)	0.001 (0.001)	-0.002 (0.001)
single	-0.007 (0.024)	-0.005 (0.026)	-0.016 (0.029)	-0.008 (0.031)	0.035 (0.043)
female		-0.037** (0.014)		-0.028 (0.021)	
vhtinv		0.031 (0.025)		0.028 (0.038)	
N	677	619	433	412	226
R ²	0.039	0.045	0.043	0.048	0.084

Marginal effects; Standard errors in parentheses
(d) for discrete change of dummy variable from 0 to 1
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

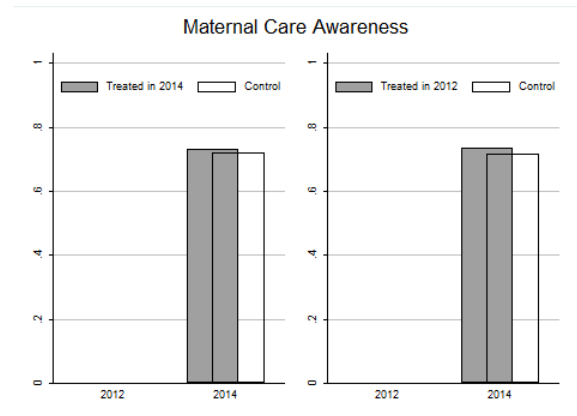


⁷⁰ For the estimations of project effect on mothers' awareness and behavior, we only report the results of the specification which includes controls for the gender of the VHT and his/her involvement in with the community when at least one of the two has a statistically significant effect on the outcome indicator.

Appendix 20: Maternal care awareness

	STE (BSD) care
treat	0.010 (0.022)
ASI	-0.074 (0.086)
eduysr	0.011*** (0.004)
age	0.003* (0.002)
single	-0.053* (0.030)
N	334
R ²	0.066

Marginal effects; Standard errors in parentheses
(d) for discrete change of dummy variable from 0 to 1
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$



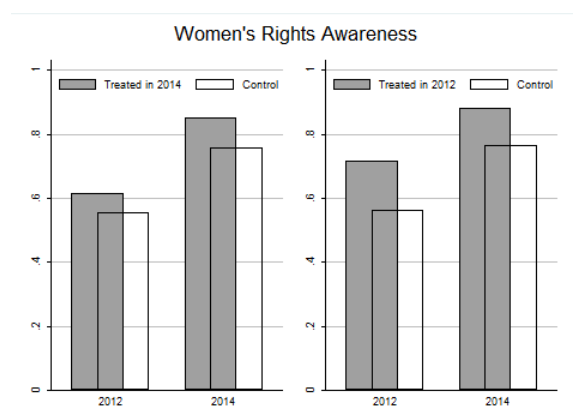
Appendix 21: Women's right awareness

	STE				MTT
	(BSD) gender	(BSD) gender	(DID) gender	(DID) gender	(BSD) gender
treatFU			0.023 (0.037)	0.018 (0.031)	
treat	0.101*** (0.021)	0.104*** (0.020)	0.066*** (0.023)	0.066** (0.025)	
FU	0.148*** (0.018)	0.158*** (0.018)	0.196*** (0.029)	0.210*** (0.024)	0.142*** (0.024)
ASI	0.108* (0.060)	0.085 (0.070)	0.042 (0.113)	0.010 (0.125)	0.084 (0.088)
edyrs	0.004 (0.003)	0.005 (0.004)	0.004 (0.005)	0.005 (0.006)	0.002 (0.005)
age	0.006*** (0.001)	0.006*** (0.002)	0.007*** (0.002)	0.007*** (0.002)	0.005*** (0.001)
single	0.079*** (0.017)	0.069*** (0.018)	0.060* (0.031)	0.054* (0.029)	0.107*** (0.017)
female		0.010 (0.020)		0.008 (0.024)	
vhtinv		-0.064** (0.029)		-0.064 (0.040)	
N	676	618	433	412	225
R ²	0.234	0.224	0.215	0.218	0.191

Marginal effects; Standard errors in parentheses

(d) for discrete change of dummy variable from 0 to 1

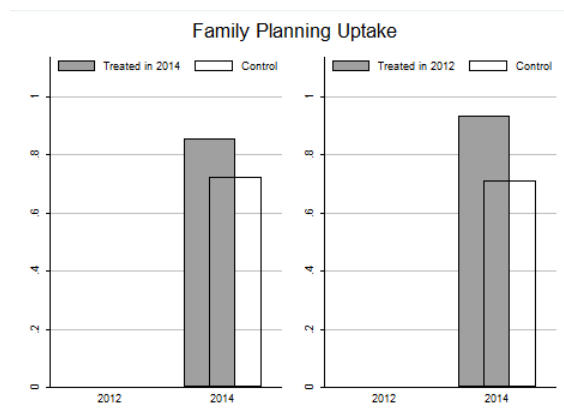
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$



Appendix 22: Family planning usage

	STE	
	(BSD) famplan	(BSD) famplan
treat	0.164*** (0.053)	0.158** (0.058)
ASI	-0.201 (0.172)	-0.214 (0.208)
eduysr	0.018*** (0.006)	0.017** (0.008)
age	0.006** (0.003)	0.007** (0.003)
single	0.013 (0.061)	-0.002 (0.065)
female		0.094* (0.048)
vhtinv		0.006 (0.053)
N	335	277
R ²	0.083	0.111

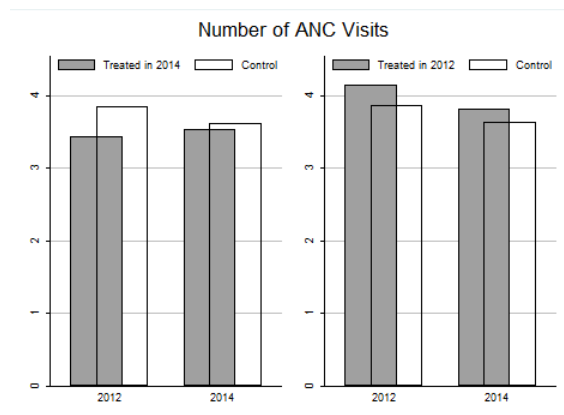
Marginal effects; Standard errors in parentheses
(d) for discrete change of dummy variable from 0 to 1
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$



Appendix 23: Number of ANC visits

	STE		MTT
	(BSD) anc	(DID) anc	(BSD) anc
treatFU		0.531 (0.343)	
treat	0.361*** (0.117)	-0.138 (0.306)	
FU	-0.296*** (0.102)	-0.391** (0.187)	-0.383** (0.154)
ASI	0.510 (0.420)	0.776 (0.617)	0.019 (0.845)
eduysr	0.059*** (0.017)	0.062** (0.028)	0.028 (0.019)
age	-0.002 (0.009)	-0.005 (0.011)	0.000 (0.018)
single	-0.344** (0.150)	-0.427* (0.240)	-0.563** (0.199)
N	614	388	212
R ²	0.047	0.035	0.039

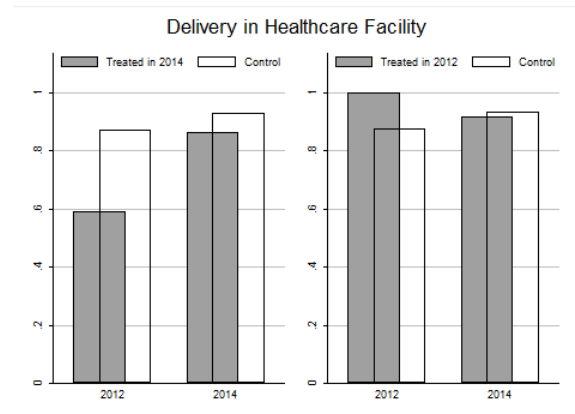
Marginal effects; Standard errors in parentheses
(d) for discrete change of dummy variable from 0 to 1
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$



Appendix 24: Delivery in healthcare facility

	STE		MTT
	(BSD) delhcf	(DID) delhcf	(BSD) delhcf
treatFU		0.060 (0.091)	
treat	0.037 (0.029)	-0.140 (0.083)	
FU	0.058** (0.028)	0.087** (0.041)	0.004 (0.028)
ASI	0.299*** (0.086)	0.462*** (0.154)	0.148 (0.185)
eduyrs	0.014*** (0.005)	0.020*** (0.007)	0.003 (0.005)
age	0.002 (0.002)	0.003 (0.003)	-0.004 (0.003)
single	0.010 (0.038)	-0.013 (0.076)	-0.004 (0.057)
N	639	378	226
R ²	0.070	0.116	0.027

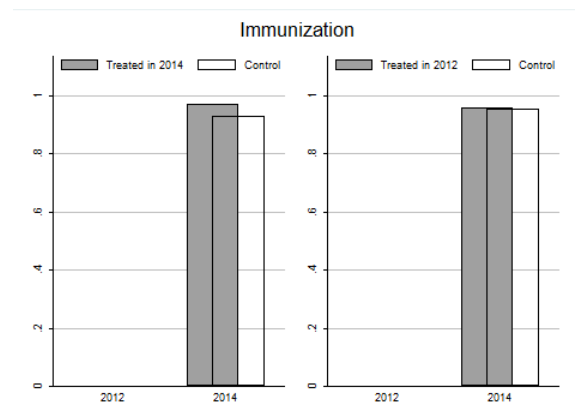
Marginal effects; Standard errors in parentheses
(d) for discrete change of dummy variable from 0 to 1
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$



Appendix 25: Child immunized

	STE
	(BSD) immun
treat	0.013 (0.028)
ASI	-0.121 (0.097)
eduyrs	-0.002 (0.003)
age	0.004* (0.002)
single	0.019 (0.038)
N	317
R ²	0.028

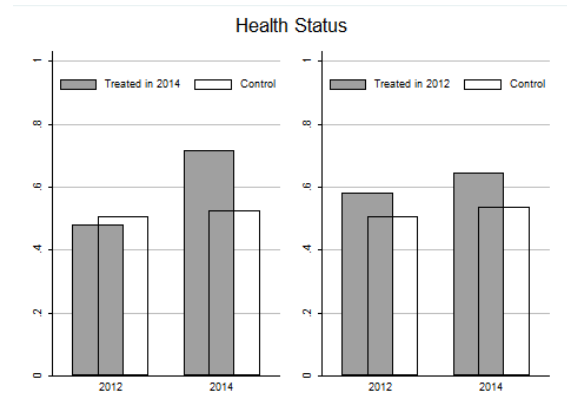
Marginal effects; Standard errors in parentheses
(d) for discrete change of dummy variable from 0 to 1
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$



Appendix 26: Health status

	STE		MTT
	(BSD)	(DID)	(BSD)
	HS	HS	HS
treatFU		0.209*** (0.057)	
Treat	0.112*** (0.024)	-0.022 (0.032)	
FU	0.066*** (0.024)	0.020 (0.044)	0.071** (0.028)
ASI	0.058 (0.063)	-0.003 (0.105)	0.056 (0.141)
Eduyrs	0.006* (0.003)	0.006 (0.004)	0.008 (0.005)
Age	-0.004*** (0.001)	- 0.003** (0.002)	-0.005* (0.002)
Single	0.025 (0.029)	-0.023 (0.042)	0.062 (0.044)
N	673	429	226
R ²	0.121	0.137	0.066

Marginal effects; Standard errors in parentheses
(d) for discrete change of dummy variable from 0 to 1
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$



Appendix 27: Financial information

TOTAL EXPENDITURE, Health Child, project 103825, 'Mother and Child Care Through Community Approach'

<i>Expenditure in Uganda Shilling</i>		oct 10 - sep 11	oct 11 - sep 12	TOTAL
	Audit & Legal Fees	2,250,000	2,500,000	4,750,000
	Printing Reports	1,885,973	3,230,250	5,116,223
ACTIVITIES				
	CONDUCT SKILLS UPDATE FOR COMMUNITY FOR COMMUNITY HEALTH VOLUNTEER WORKERS TO CONDUCT COMMUNITY SENSITIZATION	7,093,000	7,089,000	14,182,000
1	SENSITIZATION			
2	CONDUCT SENSITIZATION SESSIONS FOR PREGNANT MOTHERS AND COMMUNITY MEMBERS	7,039,550	7,103,800	14,143,350
3	MEETING OF MOTHER CLUBS WITHIN FAMILY SUPPORT GROUPS	5,135,100	5,226,000	10,361,100
	HOLD QUARTELY REVIEW MEETINGS WITH LOCAL LEADERS AND CHVWS TO REVIEW PERFORMANCE AND PLAN IMPLEMENTATION OF ACTIVITIES	5,760,000	5,760,000	11,520,000
4	IMPLEMENTATION OF ACTIVITIES			
5	CONDUCT MEETING WITH LOCAL LEADERS N THE AREA OF IMPLEMENTATION TO PREPARE ACTIVITY REPORTS AT HC1 LEVEL	5,037,000	4,430,950	9,467,950
6	FACILITATE LOCAL LEADERS AND CHVWS TO PRESENT REPORTS AT THE SUB COUNTY AND DISTRICT LEVEL	7,240,000	7,240,000	14,480,000
7	PARTICIPATE AT THE SUBCOUNTY AND DISTRICT LEVEL MEETINGS FOR PLANNING FOR CHILD AND MATERNAL HEALTH NETWORK AND COLLABORATE WITH DISTRICT AND NATIONAL LEVEL NGOS WORKING IN THE AREA OF CHILD AND MATERNAL HEALTH	2,520,000	2,564,500	5,084,500
8	MATERNAL HEALTH			
9	COLLABORATE WITH HEALTH FACILITIES TO OFFER COMPREHENSIVE ANTENATAL CARE(GOAL ORIENTED ANTENATAL)	2,605,150	3,013,700	5,618,850
		4,479,890	3,984,000	8,463,890
10	ANALYSING COLLECTED DATA TO MEASURE IMPACT OF THE PROJECT AND FOR MONITORING AND EVALUATION	11,932,600	9,536,000	21,468,600
10b	MONITORING AND EVALUATION	2,000,000	2,430,000	4,430,000
11	FOLLOW UP AND HOME VISITS	10,573,300	9,985,100	20,558,400
12	Purchase of a safe	4,000,000	-	4,000,000
SALARY PROJECT STAFF				
13	Salary for Project Coordinator	9,360,000	9,360,000	18,720,000
14	Salary for 2 project officers	12,000,000	12,000,000	24,000,000
15	Salary project nurse	3,600,000	3,600,000	7,200,000

16 ADMINISTRATIVE COSTS			
16a Executive Director	12,600,000	12,600,000	25,200,000
16b Finance officer	11,520,000	11,520,000	23,040,000
16c NSSF 10%	4,908,000	4,908,000	9,816,000
16d Stationery :	2,400,000	2,392,000	4,792,000
16e Phone	1,200,000	1,200,000	2,400,000
16d Rent	4,800,000	4,800,000	9,600,000
16e Insurance	-	1,000,000	1,000,000
16f Audit	-	-	-
16g Bank charges	437,160	430,050	867,210
TOTAL EXPENDITURE IN UGANDA SHILLING	142,376,723	137,903,350	280,280,073
Exchange rate Ushs/Euro	2,900	3,200	
TOTAL EXPENDITURE IN EURO	49,095	43,095	92,190
Total Cordaid funding	50,000	42,500	92,500
% of total	102%	99%	100%
Of which MFS II funds	-	42,500	42,500
% of total	0%	99%	46%

Technical paper

Save for Health Uganda

1. Introduction

This technical report about Save for Health Uganda is one of the studies within the framework of the Joint MFSII evaluation at country level - Uganda; In particular, the report serves to give input to the overall joint evaluation report on MFSII funding to the Millennium Development Goals, Capacity Development, and Civil Society Strengthening.

The outline of the technical report is as follows. First, Chapter 2 gives a description of the context in which Save for Health Uganda operates, highlighting the main relevant (international) political, economic, cultural and social issues with which the organization has to deal in pursuance of its objectives.

Chapter 3 gives a project description and the profile of Save for Health Uganda e.g. its mission, vision, and strategic objectives. After chapter 3, the report is split up in to two parts. Chapter 4 deals with the contribution of Save for Health Uganda to the millennium development goals, while chapter 5 explores the capacity development of Save for Health Uganda. Both parts have the same remaining structure. The data collection and analytical approach section gives attention to the methodological choice made. This study aims at giving plausible explications on the effectiveness of Cordaid's support to Save for Health Uganda, based on regression, descriptive and theoretical evidence. These explanations are given to Save for Health Uganda's capacity development and realized MDG outcomes. We end each part with a Discussion and Conclusion concerning the evaluation questions.

1.1. Brief summary of the analyses and the findings

In the study approach qualitative and quantitative research methods are combined. The approach is centered on the comparison between triangulated baseline data (2012) and triangulated follow-up (endline) data (2014). We find that the SHU insurance scheme significantly reduces health expenditures of insured households, and that these results maintain when controlling for self-selection bias. However, the evidence on its effect on the utilization of facilities and health outcomes is not conclusive.

1.1.1. Millennium Development Goals

The project had some positive impact on 6 of 10 measured health outcome indicators. 3 of the remaining 4 are unaffected, and one indicator seems to deteriorate with the intervention. Thanks to the use of a control group and to the inclusion of standard socioeconomic confounding factors into the models and the use of different econometric specifications, we can safely attribute the reported results to the project.

1.1.2. Capacity development

For this background documents, Focus groups/group interviews, workshops, and organisational self-assessments in 2012 and 2014, resulting in 2 sets of capability scores. Endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores were qualified in terms of 'improved', 'stable', or 'worsened'. The qualifications and their reasons were peer reviewed in a workshop.

The core capabilities to adapt and self-renew and to relate have shown clear improvements at core capability level, which facilitated management of larger Community Healthcare Financing (CHF) programs. The core capabilities To act & commit and To achieve coherence have shown steadiness and improvement at aspects level through i.e. strategy, translation strategy into actions, and motivated staff (CC1), or firmly maintained its high level through clear documentation on vision-mission & internal regulations, and realized synergies (CC5). On aspect level of core capability To deliver on development objectives (i.e. measuring efficiency)(CC3) discussion on efficiency goes on, but did not much influence sound output realization (except for the 2nd half of 2012).

Contributions to changes in the outcome area Improved access to quality health services could mostly be plausibly explained, when it concerned Immediate (direct) outcomes. For medium (direct) outcomes this was anecdotic.

If Cordaid decides to discontinue its support to SHU, there is nothing to recommend with respect to the cooperation between both organizations.

But: If Cordaid decides to continue its support to SHU it is recommended that:

- Cordaid jointly with SHU investigates new models/partners for funds generation through Corporate Organizations (under Corporate Social Responsibility), private Banks/Insurance Companies, and Governmental funding through the proposed National Health Insurance Bill
- In case these alternatives take their time beyond MFS2, Cordaid and SHU consider with the other now involved donors how the existing partnership with SHU the best can be shaped in service of the further expansion of CHF schemes.

In the assessment of the project design the statements The project was well designed, The project was implemented as designed, and The project reached all its objectives were rated respectively with 7, 7, and 6 (out of 10).

2. Context

Uganda's health sector was in a bad shape in the 70-ies and early 80-ies, due to military absolute rule and civil war over this period. With the advent of the National Resistance Movement (NRM) government in 1986, the country regained stability and important progress was realized by the introduction of democratic reforms and improvement of human rights. Since then the health sector also slowly started to recover. In 1986, the Expanded Program on Immunization (EPI) was re-launched; the Maternal and Child Health (MCH) program, Family Planning and the AIDS control programs were also introduced. By the early 1990s Uganda was among the African countries worst hit by the HIV/AIDS epidemic. The national government in cooperation with civil society organizations, gave a response to the epidemic with an open multi-sector approach.

Central to the health sector reform were decentralization, but certainly also the Structural Adjustment Programs that urged the government to reduce its responsibility for paying for social services, like health. As a consequence user fees were introduced into the public health system to meet the huge public sector deficit.

The decentralization started in 1986 with the establishment of 'resistance councils', was reinforced in the 1995 constitution, and under the Local Government Act of 1997 further developed with special provisions for effective service delivery. Powers were devolved to district local authorities that belonged to the central government before.

The Ugandan health care delivery system was designed along this decentralized public system. This resulted in a multi-layered health care system from Health Centre I – IV as lower level units, with a district hospital for in most districts¹, and above this the regional and national referral hospitals.²

The results of the health sector reform since 1995 until 2001 were disappointing. They showed that infant mortality figures had deteriorated and maternal mortality figures had hardly changed. The majority of the government budget appeared to be allocated to large hospitals (regional and national) and the central Ministry of Health (MoH), whose services benefits the urban population, rather than to district level facilities providing primary health care services to the rural poor. Additionally donor projects, with high overheads, focused on investment goods and were inefficient at providing basic health care. User charges raised little revenue, and exemption schemes did not protect vulnerable groups; user fees were a significant barrier for poor people accessing services.³ Recognizing these failings, during the late 1990-ies, the Government of Uganda initiated a comprehensive program of radical health sector reforms. This included the decision to implement a sector-wide approach (SWAp) in August 2000, in order to improve coordination and with that efficiency and equity in the sector. The first

¹ Although the system was designed with a hospital in each district, not all districts have a hospital due to recent creation of many new districts which were carved out of the existing ones. Between 2001 and 2011, the number of districts has doubled from 56 to 111.

² Kirunga Tashobya, K., and P. Ogwang Ogwal (2004). "Primary Health Care and Health Sector Reforms in Uganda," Health Policy and Development 2(1), p. 2.

³ Yates, R., C. Kirunga Tashobya, V. Oliveira Cruz, B. McPake, F. Ssengooba, G. Murindwa, P. Lochoro, J. Bataringaya, H. Nazeralli, and F. Omaswa (2006). "The Ugandan Health Systems Reforms: Miracle or Mirage?" In C. Kirunga Tashobya, F. Ssengooba, and V. Oliveira Cruz (Eds.), Health Systems Reforms in Uganda: Processes and Output. Kampala: Institute of Public Health, Makerere University, Health Systems Development Programme, London School of Hygiene & Tropical Medicine, Ministry of Health Uganda, p. 16.

national Health Sector Strategic Plan (HSSP-I; 2000/01- 2004/05) envisaged strengthening a minimum health care package (MHCP) within a decentralized, district-based primary health care approach.

Four main reforms aimed to improve the financing of health care from 2000 to 2005: the formal suspension of user-charges in the public sector, a substantial increase in the health budget, better coordination of donor aid, and redirection of resources away from tertiary level services towards primary level MHCP provision with the inclusion of Private Not-For-Profit Providers (PNFP), aside governmental health services. HSSP-II (2005/06 - 2009/20) represents a consolidation and extension of the achievements of HSSP I. The overall development and program goals of HSSP I remain and are to be attained through universal delivery of the Uganda National Minimum Health Care Package.⁴ The private sector however has always charged user fees and continues to do so. In the Private Not-For-Profit (PNFP) facilities, user fees provide on average more than 65% of lower level health centers and 40% of a hospital's income.⁵ Accessibility to the services of private not-for-profit facilities becomes more uncertain, due decreasing contributions from the government and the lowering of user fees.⁶ Affordability of health services still remains problematic, especially for the poorest.

The installation of a public health insurance system can contribute to alleviating this problem. This was tried in 2009 for 2 million employed Ugandans, including 300,000 governmental workers, but due to resistance from employers, trade unions and worker representatives the proposal did not pass the parliament.⁷ Up to now a system for national health insurance has not been offered in the social security package handled by the National Social Security Fund (NSSF).⁸ It is therefore not surprising that health CSO's oriented on poor communities embarked with initiatives to set up community based health insurance provisions. Save for Health (SHU) is involved in this area of facilitating affordable health services; the organization is supported under MFS2 by Cordaid.

3. Project description

3.1. Profile Southern Partner Organization (SPO)

Save for Health Uganda (SHU) is a company limited by guarantee and a local (Ugandan) not-for-profit Non-Governmental Organization (NGO) formed in 2002 and registered on the 7th of March 2003. SHU is mandated to implement activities aiming at improving access to quality health care and facilities country-wide.

The organization was formed for two main reasons: 1) To improve people's financial access to quality and affordable healthcare services, and 2) To rationalize healthcare seeking behaviors of the target population. SHU's vision entails: 'Healthier families with simplified access to quality healthcare' and its mission 'To improve the quality of health of Ugandans through self-managed community health financing (CHF) approaches', with the ultimate goal 'to contribute to the reduction of the disease burden in Uganda'.⁹

SHU formulated in its Strategic Plan 2011-2016 as main goal to contribute to the reduction of the disease burden in the targeted districts through viable, affordable and sustainable community health financing approaches. In the Strategic Plan this will be pursued by:

- Scaling up programs and projects for service delivery to target individuals, households and communities to prevent and alleviate human suffering.
- Enhancing institutional and organizational development for efficient and effective service delivery, and self-sustenance.¹⁰

⁴ MoH (2005). Health Sector Strategic Plan II 2005/06 – 2009/2010, Volume 1. Kampala: Ministry of Health (MoH), p. ix.

⁵ MoH (2010). 2009/2010 Health Financing Review. Kampala: Ministry of Health (MoH), p. 82.

⁶ MoH (2010). Annual Health Sector Performance Report: Financial Year 2009/2010. Kampala: Ministry of Health (MoH), p. 144-145.

⁷ Kagumire, R. (2009). "Public Health Insurance in Uganda still only a Dream," CMAJ, 180(3): 281.

⁸ Kalungi, N. (2012). "Uganda: Country's Sick Health System In Need Of Affordable Health Insurance," The Daily Monitor, 21 Feb. 2012.

⁹ SHU (2013). Organisational Profile. Kampala: Save for Health Uganda (SHU).

¹⁰ SHU (2012). Strategic Plan 2011-2016. Kampala: Save for Health Uganda (SHU), p. x.

In combination with the Strategic Plan 2011 - 2016, SHU has formulated its actual focus on 5 areas:^{11,12}

- *Community health financing* for improving access to health care services by expanding and extending well managed health micro-prepayment schemes by 2016.
- The aim is to: (a) protect families from catastrophic health care related expenditures; and (b) ease access to quality health care services. SHU works with communities to form community health financing schemes. The schemes are of 3 types- all member-managed i.e. health Insurance Schemes; health Credit Schemes; hybrid/ Mixed Health Insurance and Credit Schemes.¹³
- *Women's health and empowerment* for improving the health status of women and their children by reducing morbidity and mortality arising from preventable causes by 2016.
- The aim is to get: (a) pregnant women to attend all the 4 recommended Antenatal clinics, to deliver from a health facility and to attend post natal care clinics; (b) women to actively participate in healthcare related decision making both at home and at community level.
- *Livelihoods' improvement* for improving incomes of families in the target communities to meet their health financing needs by 2016.
- The aim is to improve household incomes of the low income families through: (a) training families in income generating activities; (b) providing income generating projects to families/ communities; and (c) providing through partnerships, low interest loans to families.
- *Health care delivery* for improving health care service delivery to the targeted communities.
- The aim is to improve the quality of health care services provided to consumers through: (a) empowering communities to actively participate in deciding the services the health care facilities offer to them; (b) establishing direct communication and feedback channels between the organized consumers and the health care service providers; (c) forming community health insurance schemes which clear medical bills on behalf of members thus improving cost recovery on the part of the health care facilities.
- *SHU institutional development*. The aim is (a) to develop and diversify resources available to SHU for sustainable services delivery; (b) to Strengthen institutional and organizational development of SHU to effectively and efficiently plan and implement programs and projects.

SHU formulated and implements projects that fall within the vision, mission and the main goal of the organization, as well as within the framework of its Strategic Plan 2011-2016. Through its projects, SHU is oriented on the next categories of direct project beneficiaries:

- Target communities/parishes spread in all 7 districts of project implementation. The target communities were 84 in total out of which, 74 have Community Healthcare Financing (CHF) schemes running. The running schemes were covering a total of 33,368 individuals at the end of December 2013.
- Union of schemes networks. They are 2 in total, one located in Luwero district and the other in Bushenyi district. The Luwero union, which brings together 39 schemes has a functional secretariat in place.
- Health care facilities; there are 17 in total of which 10 are already contracted as schemes service providers.
- Pregnant women and new born babies in the CHF schemes of Sheema District. They received subsidies to enable the schemes contract Boda-boda (motor bikes) transporters to transport pregnant scheme members to contracted health care facilities. They are 20 transporters in total and 18 of them still have active contracts, and
- Individuals with a leadership role in the CHF schemes and/ or the union of schemes networks. There are 1,131 leaders (511Women, and 620 Men) in total during the year. They receive various capacity building trainings and support during the year.¹⁴

¹¹ SHU (2012). Strategic Plan 2011-2016. Kampala: Save for Health Uganda (SHU), p. xi.

¹² SHU (2014). Save for Health Uganda Website. <<http://www.shu.org.ug/>> Accessed 6 Jan. 2015.

¹³ In SHU's approach the promotion, introduction, and up-scaling of Community Health Financing (CHF) stands central. Through CHF, SHU believes to achieve its main goal and derived from that its program/project objectives. Herein should:

- CHF schemes be community-based, hence self-owned, self-financed, self-managed by communities of SHU's target districts;
- Membership of the CHF schemes be voluntary and the risks be pooled at parish level.

Three types of CHF schemes should give access to medical services: microcredit, micro-insurance, or a mixture of credit and insurance. Beneficiaries accessing medical services using any of these CHF mechanisms are entitled to both out/patient and in-patient services. See SHU (2012). Strategic Plan 2011-2016. Kampala: Save for Health Uganda (SHU), p. viii.

¹⁴ SHU (2014). Save for Health Uganda Annual Report 2013. Kampala: Save for Health Uganda (SHU), p. 10

SHU currently operates activities in the 7 districts of: Luwero, Nakaseke, Nakasongola, Bushenyi, Sheema, Masaka and Mubende. In order to carry out its programs, SHU implements in these districts four projects during the period 2011 - 2014. The projects and their funding partners are:¹⁵

- *Reducing barriers to accessing quality health care services by the rural poor project* (July 2011 - September 2014). The project is funded by Bread for the World (BftW) with a committed amount of € 950,000 and is implemented in the 5 districts of Luwero, Nakasongola, Nakaseke, Masaka and Bushenyi.¹⁶
- *Reducing Delays to Maternal and Child Health Care Services in Sheema District - Uganda* (July 2009 - December 2012), which is funded by the Catholic Organization for Relief and Development Aid (Cordaid) with a committed amount of € 250,000, and is implemented in Bushenyi District.¹⁷
- *Maternal, infant and Reproductive Health insurance project* (January 2013 - December 2014). It is funded by the Catholic Organization for Relief and Development Aid (Cordaid) with a committed amount of € 150,000, and is implemented in 2 sub-counties of Sheema district.
- *Community health prepayment schemes intervention to improve maternal health* (July 2013 - September 2015). The project is funded by Population Services International (PSI) with a committed amount of € 200,000 (US\$ 250,000) and is being implemented in Mubende district.¹⁸

The staff size of the SHU organization in 2014 was in total 30;. In 2014 the staff was composed of 1 Executive Director, 1 Programs Officer, 1 Finance & Administrative Officer, 1 M&E Officer, 3 Project Coordinators (in the District Offices), 2 Team Leaders (in the Districts), 6 Field Officers (in the Districts), 5 Accounts assistants (4 in the Districts of Bushenyi, Luwero, Mabende, and Masaka, one in Head Office), 4 drivers (2 in the districts, 2 in the head office), and 5 office assistants (4 in the districts, 1 in the Head Office).¹⁹ The organization has 4 Founding members (under which is the executive director), and 6 members constitute the Board of Directors (of which 1 is a Founding Member).

in 2012 the staff total was 26; then organization hosted 18 program staff and 8 supporting staff, working in 2 local offices (in the Districts of Luwero and Bushenyi), and one head office (in Kampala). This staffing grew in the last 2 years, due to the extension of networks and districts in new health insurance projects; further expansion on short term is not expected.

SHU works with various partners that are key in the implementation of its projects;^{20,21} this concerns relevant governmental institutions at national and districts levels, but also unions of CHF schemes through SHU:

- Ministry of Health as Line Ministry
- District authorities supervising SHU and supporting the projects
- Uganda Community Based Health Financing Association (UCBHFA)- National umbrella for CHF schemes promoters
- Munno Mu Bulwade Union of Schemes' Organization (MBUSO) Network of SHU schemes in the central region
- West Ankore Tweragurize Association (WATA) Union of schemes of SHU schemes in the western region)
- Contracted Health care facilities Kiwoko hospital, Ishaka Adventist hospital, Kitagata hospital, Bishop C. Asili hospital, Franciscan health center, Laura health center, and Hope medical center Service providers and co-schemes promoters
- International Centre for Development and Research (CIDR-Uganda) CIDR Technical support

¹⁵ SHU (2014). Save for Health Uganda Annual Report 2013. Kampala: Save for Health Uganda (SHU), p. 9.

¹⁶ Makaire, F. (2014). Personal communication on 30 Oct. 2014.

¹⁷ CORDAID funds the SHU project Reducing delays to maternal and infant healthcare services in Bushenyi district. It is a project aiming to improve maternal and neonatal health indicators through improved utilization of maternal and neonatal healthcare services (July 2009 - June 2012).

¹⁸ Makaire, F. (2014). Personal communication on 30 Oct. 2014.

¹⁹ SHU (2014). Save for Health Uganda Annual Report 2013. Kampala: Save for Health Uganda (SHU), p. 38.

²⁰ SHU (2013). Save for Health Uganda Annual Report 2012. Kampala: Save for Health Uganda (SHU), p. 5.

²¹ SHU (2014). Save for Health Uganda Annual Report 2013. Kampala: Save for Health Uganda (SHU), p.8.

Table 1 shows the consolidated income and expenditure of SHU over 18 months (July 2012 - December 2013) that was spent by the entire organization to realize above objectives.

Table 1: Total Income / Expenditure Save for Health 01-07-2012 - 31-12-2013^{22,23}

	2012	2013
<i>Income (€)</i>		
Bread for the World (BftW)	342,294	495,635
Cordaid	128,949	67,568
Population Services International (PSI)		110,839
SHU generated	5,168	8,016
Consultancy	9,927	
Other income	2,807	
Capital expenditure	-34,077	-55,619
Total income	455,068	626,439
<i>Expenditure (€)</i>		
Program costs	255,381	370,261
Coordination costs	127,882	172,627
Total expenditure	383,264	542,888
Balance before exch. gain loss (€)	71,805	83,551
Exch. gain/loss/previous balance 2012	-2,972	81,199
Balance 31-12-2013	68,833	164,750

All incomes of the organization concern support for the implementation of SHU's projects for the mentioned target groups and districts. The expenditures during 12 months of 2013 were 142% of 6 months expenditures in 2012; for the income this percentage is 138%, and for the balance per December 2013 239%. This indicates that the level of project implementation was relatively low in 2013, as compared to 2012. Slower than planned implementation was reported in the Cordaid funded project *Reducing Delays to Maternal and Child Health Care Services in Sheema District - Uganda*; in the first semester implementation was slow, which induced a budget neutral extension of the project until 31 December 2012.²⁴

With regard to Table 1 can also be observed that the Coordination costs were in 2012 50% of the program costs; for 2013 this was 47%. Hence in both years the organization appears to have a high overhead burden.

SHU succeeded in bringing up its implementation pace in 2013 and was confident enough to expand its program and hence its offices network and staff. For the Cordaid funded Project Increasing access to quality health care through health insurance was chosen for an organization-wise feasible approach by concentrating on just 2 sub-counties in Sheema District. Table 2 shows the budget and expenditures for 2013 realized in the project; performance on all outputs, except for the outputs 5 and 7, are in line with the original budget; coordination costs were significantly lower, which makes project overhead actually smaller.²⁵

²² Davita & Associates (2014). "Save for Health Uganda Limited: Consolidated Audited Financial Statements for the Eighteen Months Period Ended December 31, 2013," p. 10.

²³ Exchange rate € 1 = UGX 3,330

²⁴ Davita & Associates (2012). "Reducing Delays to Maternal & Child Health Care Services in Bushenyi District-Uganda: Project 158/10146." Audit report, p. 15.

²⁵ Salaries and benefits are not part of the project budget; these costs are covered in other projects that SHU implements.

Table 2: Project increasing access to quality health care through health insurance^{26,27}

Budget/Expenditures 2013 (€)	Budget	Expend	Balance	
Output 1: Two sub-counties covered	6,862	6,658	204	97%
Output 2: 33,879 individuals, 18,918 households and 5 health facility beneficiaries	7,408	7,074	334	95%
Output 3: 7,161 users of health care services	8,622	8,990	-368	104%
Output 4: 16 CHI schemes	20,741	18,633	2,107	90%
Output 5: 5 Contracted health care service facilities	1,072	632	441	59%
Output 6: 50 Contracted health local motorbike transporters	255	254	2	99%
Output 7: 330 outreaches and mobile clinics organized	2,462	3,006	-543	122%
Output 8: 15,000 ITN's to beneficiaries	2,198	1,749	449	80%
Output 9: 338 women leadership positions CHI scheme level	-	-	-	
Coordination Costs	17,949	13,175	4,774	73%
Total expenditures / budget	67,569	60,171	7,399	89%

Regarding SHU's 5th program area i.e. SHU institutional development by diversifying SHU's acquisition of resources for sustainable services delivery, and SHU's organizational development for effective planning and implementation (see above), not many funds were spent in 2013; only 5% of the total means was spent on trainings and capacity building.²⁸ Most organizational capacity development takes place in the course program/project implementation.

3.2. Support Co-funding Organization (CFA) to SPO

For the implementation of the projects SHU gets funding from 3 main partners: Bread for the World (BftW <http://www.brot-fuer-die-welt.de/>), which is also a technical partner, Population Services International (PSI <http://www.psi.org/>), which is also a technical partner and Cordaid (<https://www.cordaid.org/>), which is a funding partner. Table 3 gives an overview of all donor funding commitments made to SHU.

Table 3: Commitments all donors to Save for Health 2011 - 2014 in €²⁹

Donor / Projects	Period	Committed amounts (€)
BftW: Reducing barriers to accessing quality health care services by the rural poor project	July 2011- September 2014	950,000
Cordaid (158/10146): Reducing Delays to Maternal and Child Health Care Services - Uganda	July 2009-December 2012 (€250,000) Under MFS2 since January 2011 ³⁰	143,000
Cordaid (108736): Maternal, infant and Reproductive Health insurance project	January 2013-December 2014	150,000
PSI: Community health prepayment schemes intervention to improve maternal health	July 2013-September 2015 (US\$ 250,000)	200,000
Total		1,443,000

Hence this overview shows that Cordaid's to SHU commitment in total, amounts to € 297,000 for the period January 2011 - December 2014. No new Cordaid commitments under MFS2 are foreseen in the remaining MFS2 period.

²⁶ Davita & Associates (2014). "Maternal, Infant and Reproductive Health Insurance Program (Project 108736): Audit Report and Financial Statements for the year ended December 2013," p. 11-13.

²⁷ Exchange rate € 1 = UGX 3,330

²⁸ SHU (2014). Save for Health Uganda Annual Report 2013. Kampala: Save for Health Uganda (SHU), p. 10.

²⁹ See also 3.1 Profile Southern Partner Organization (SPO).

³⁰ Per 1.7.2009 the cooperation started between CORDAID and SHU. The organisation was granted funding over the period 2009 - 2012 the total of € 250,000 under the project *Reducing Delays to Maternal and Child Health Care Services (158/10146)*. Out of this total amount € 143,000 was committed and finally disbursed under MFS2 per 1.1.2011.

Table 4 gives an overview of the funding SHU received over the years 2012 and 2013.

Table 4: SHU donor funding received 2012 / 2013^{31,32}

	2012		2013	
Bread for the Word (BftW) (€)	342,294	72.6%	495,635	73.5%
Cordaid (€)	128,949	27.4%	67,568	10.0%
PSI (€)			110,839	16.4%
Totals	471,243	100.0%	674,042	100.0%

The overview shows that Cordaid's role as donor remained financially steady up to December 2014 with another € 75,000 expected expenditures. Per December 2013 most of BftW's funds were spent (about € 100,000 unspent funds remain due up to September 2014); PSI's funding will remain constant up to the end of 2014 with an expected disbursement of about € 100,000.

A comparison was made between Cordaid's orientation on SHU's capacity development during the baseline and during the endline. Table 5 gives Cordaid's orientation on capacity development through specific attention the SHU's 5 core capabilities during the baseline; possible shifts in orientation are indicated with reference to this table.

Table 5: Cordaid's targeting capacity development - Baseline report measurement³³

1. Act and commit	3
General support by funding; organization did not ask for specific support	
2. Adapt and self-renew	3
General support by funding; organization asks focused M&E support	
3. Deliver on development objectives	4
Improvement promotion of community health insurance schemes in sub-counties	
4. Relate to external stakeholders	3
General support by funding; organization asks for skills in lobbying and networking	
5. Achieve coherence	3
General support by funding; organization asks for capacity to anticipate women's health and empowerment issues	

(1-5: 1 - not targeted, 5 - intensively targeted)

SHU's orientation on the core capabilities at the time of the baseline was the most explicit to the core capabilities To act and commit, To adapt and self-renew, and To deliver on development objectives³⁴. Its membership of the Community Based Health-Financing and Association (CBHFA) was herein vital. SHU's current orientation at the time of the endline is actually a follow up on concrete efforts within CBHFA; this matches well with Cordaid's support to the mentioned extra plans of SHU. Core capability To deliver on development objectives now appeared to be the most focused by SHU. It should be noted that no special budgetary provisions besides the Project Increasing access to quality health care through health insurance, were made for capacity development.

Hence currently Cordaid's project funding mainly serves the Core capability To deliver on development objectives, as its support is in principle project implementation oriented. Cordaid's main orientation over the period June 2012 - June 2014 appears to be unchanged with regard to the mentioned core capability. At the same was the focus on the other four core capabilities less explicit (i.e. To Act and Commit, To Adapt and Self-renew, To relate, and To achieve coherence) than at the time of the baseline.

Cordaid states that capacity development in regular project management (i.e. feedback on proposals and reports, strategic advice, field visits twice a year, program development). In addition Cordaid recently made efforts to build capacity on community health insurance, by providing feedback on small extra plans on lobby on national level, linking organizations and planned field visits within the existing Project Increasing access to quality health care through health insurance (July 2014).³⁵

³¹ Davita & Associates (2014). "Save for Health Uganda Limited: Consolidated Audited Financial Statements for the Eighteen Months Period Ended December 31, 2013," p. 10.

³² Exchange rate € 1 = UGX 3,330

³³ Bulte, E., J. Klomp, J. Duchoslav, E. Kamphuis, and B. Lof (2013). Joint MFS-II Evaluation Uganda: Baseline Report, p. 135.

³⁴ Bulte, E., J. Klomp, J. Duchoslav, E. Kamphuis, and B. Lof (2013). Joint MFS-II Evaluation Uganda: Baseline Report, p. 138.

³⁵ Soeters, S. (2014). Personal communication in Jun. 2014. Cordaid.

Periodically Cordaid carries out internal organizational assessments of its partners; for SHU the last assessment was done end 2012 2.5 years after the start of the partnership relation; the next assessment is planned early 2015. Cordaid does have its own approach to this assessment and is not applying the 5C conceptual framework.³⁶ The costs of described capacity development support by Cordaid does not charge any project budget, but is covered under the 12% of total MFS2 funding Cordaid for project management. The next table depicts Cordaid's current focus on SHU's capacity development, as described before.

Table 6: Cordaid's targeting capacity development during the endline- Endline report measurement

1. Act and commit	2
Support by project funding; organization did not ask for specific support	
2. Adapt and self-renew	2
General support by funding; support given by Cordaid through feedback on M&E	
3. Deliver on development objectives	5
Strong project support focus on expansion of community health insurance schemes in sub-counties	
4. Relate to external stakeholders	2
General support by funding; some support to CBHFA related lobbying - networking	
5. Achieve coherence	2
Support by project funding; organization did not express special support	

(1-5: 1 - not targeted, 5 - intensively targeted)

3.3. Key features project

Cordaid has supported SHU over the period July 2012 - June 2014 with the Project Reducing Delays to Maternal and Child Health Care Services - Uganda and the Project Increasing access to quality health care through health insurance. Cordaid's support to SHU's capacity development is mainly geared to Core capability To deliver on development objectives within these projects, whereas the other four core capabilities are less accentuated. Cordaid's realized financial support under these projects over the period 2012 - 2013 amounts to € 196,517 (see Table 4), of which about 5% is spent on capacity development (i.e. €9,826). Besides capacity development support stemming from project implementation does Cordaid supports SHU's capacity development through planned field visits for project monitoring and feedback on SHU's performance lobbying and linking organizations.

4. Millennium Development Goals

4.1. Data collection

In the summer of 2012 we conducted a baseline survey where we selected 21 communities randomly in the areas where the intervention was under way prior to 2012 (Treatment 1). Besides, we selected another 9 communities randomly in the areas where the intervention would start after the 2012 baseline but before the 2014 follow-up (Treatment 2). As a control group we selected 15 communities randomly in a control area within the same district, where SHU may expand in the future but not prior to the follow-up (Control). In each community 10 randomly selected households were interviewed.

In 2014 a follow up survey was held. The same 21 communities from Treatment 1, where the intervention was under way prior to 2012, were revisited, the same 9 communities from Treatment 2, where the intervention was going to start after 2012 but prior to 2014, were revisited and the same 15 communities from the Control group, where the intervention was not going to start prior 2014, were revisited. Again, in each community 10 randomly selected households were interviewed.

Table 7: Sample overview

	Treatment 1		Treatment 2		Control		ALL
	2012	2014	2012	2014	2012	2014	
Intervention	Yes	Yes	No	Yes	No	No	
Villages	21	21	9	9	15	15	45
Households	209	211	91	90	151	151	903

³⁶ Soeters, S. (2014). Personal communication in Jun. 2014. Cordaid.

This design allows us to gauge both the average-treatment-on-the-treated (ATT) and the intent-to-treat impact (ITT) of the project using different econometric approaches, including Pooled Ordinary Least Squares and Linear Probability Model regressions (OLS), Difference-in-Difference (DiD), and Propensity Score Matching (PSM). Table 7 shows the composition of our sample, and Table 8 contains the descriptive statistics of the data gathered where

- *Insured Household*: Dummy equal to 1 if insured, 0 otherwise
- *Household Size*: Discrete variable of the number of people in household including head
- *Assets Index*: Principal Component Factor of a list of core assets (wealth and income proxy)
- *Female Household Head*: Dummy equal to 1 if head is female, 0 otherwise
- *Age Household Head*: Discrete variable of the age of head at last birthday
- *Education Household Head*: Dummy equal to 1 if head has ever been to school, 0 otherwise
- *Health Status Household Head*: Principal Component Factor of health related questions
- *Health Awareness Household Head*: Principal Component Factor of health awareness of head
- *Distance Kitagata Hospital*: Distance from hospital in Kilometers
- *Health Expenditure*: Annual total household expenditure on health related costs (1000 UGX)
- *ANC Month First Visit*: Discrete variable representing the month of first Antenatal Care visit
- *ANC Number of Visits*: Discrete variable representing the number of Antenatal Care visits
- *Hospital Visits Pregnant Women*: Discrete variable representing the total number of hospital visits by pregnant women in the household. Natural log is used in the results (% change)
- *Hospitalized Delivery*: Dummy equal to 1 if delivery took place in hospital, 0 otherwise
- *PNC*: Dummy equal to 1 if Postnatal Care took place in within 24 hours, 0 otherwise
- *Satisfaction Kitagata Hospital*: Principal Component Factor of the perceived quality of services provided by the hospital

Table 8: Descriptive statistics

	Treatment 1		Treatment 2		Control		ALL
	2012	2014	2012	2014	2012	2014	
Insured Household	0.52 (0.50) 209	0.24 (0.43) 211		0.27 (0.44) 90			0.24 (0.42) 903
Household Size	6.03 (2.41) 209	5.47 (2.05) 211	5.93 (2.11) 91	5.69 (1.98) 90	6.25 (2.57) 151	5.22 (2.05) 151	5.76 (2.25) 903
Assets Index	-0.08 (0.97) 209	0.11 (1.10) 211	0.15 (1.04) 91	0.12 (1.01) 90	-0.05 (0.95) 151	-0.17 (0.88) 151	0.00 (1.00) 903
Female Household Head	0.22 (0.42) 206	0.25 (0.43) 211	0.20 (0.40) 87	0.27 (0.44) 90	0.23 (0.42) 141	0.23 (0.42) 151	0.23 (0.42) 886
Age Household Head	50.29 (16.72) 194	49.14 (16.52) 211	47.25 (15.74) 84	49.51 (15.28) 90	48.40 (14.97) 130	48.66 (17.50) 151	49.06 (16.30) 860
Education Household Head	0.76 (0.43) 205	0.86 (0.35) 211	0.84 (0.37) 87	0.82 (0.38) 90	0.77 (0.42) 141	0.81 (0.39) 151	0.81 (0.40) 885
Health Status Household Head	-0.15 (0.97) 171	0.14 (1.02) 211	-0.28 (0.95) 63	0.05 (1.00) 90	-0.15 (1.03) 105	0.16 (0.95) 151	0.00 (1.00) 791
Health Awareness Household Head	-0.14 (1.01) 168	0.23 (1.05) 211	-0.15 (0.91) 62	0.20 (1.11) 90	-0.41 (0.70) 105	0.06 (0.95) 151	0.00 (1.00) 787
Distance Kitagata Hospital	4.35 (3.18) 209	4.32 (3.20) 211	4.38 (1.04) 91	4.39 (1.31) 90	6.42 (2.72) 151	6.42 (2.89) 151	5.04 (2.93) 903
Health Expenditure	200.12 (361.33) 204	262.53 (499.37) 211	262.86 (390.06) 88	183.53 (302.78) 90	284.68 (470.37) 147	351.23 (638.67) 151	258.98 (469.71) 891
ANC Month First Visit	4.31 (1.14) 159		4.07 (1.26) 67		4.17 (1.26) 119		0.96 (0.20) 345
ANC Number of Visits	3.55 (0.76) 160		3.53 (0.87) 68		3.41 (0.81) 119		3.50 (0.80) 347
Hospital Visits Pregnant Women		3.82 (4.81) 96		2.83 (2.09) 38		4.02 (3.21) 61	3.69 (3.94) 195
Hospitalized Delivery	0.62 (0.49) 173		0.69 (0.47) 71		0.58 (0.49) 130		0.62 (0.49) 374
PNC Within 24 Hours	0.14 (0.34) 169		0.16 (0.37) 68		0.09 (0.28) 128		0.12 (0.33) 365
Satisfaction Kitagata Hospital	-0.16 1.15 192	0.16 (0.74) 183	-0.19 (1.41) 73	-0.07 (0.88) 76	-0.16 1.13 109	0.31 (0.56) 121	0.00 (1.00) 754

Legend: mean
(standard deviation)
observations

4.2. Analyses and results

To gauge the effect of the insurance on the household's health expenditure, we estimate both average treatment effects on the treated (ATT), and intention to treat effects (ITT) using several methods:

- Between subject difference (BSD)
- Difference-in-differences (DID)
- Kernel-based PSM

ATT estimation produces marginal effects of insurance adoption on the treated (those actually insured), ITT controls for the potential self-selection bias. The fully specified BSD (using OLS or LPM regressions), DID, and PSM estimations, which include time fixed effects as well as individual socio-economic characteristics, are reported in the appendix.

4.2.1. Research question 1: Provide the results; include sensitivity analyses; succinctly describe the major results.

Table 9: Main results

	ATT (Insured)		ITT (Treated village)			
	BSD	PSM	BSD	DID	PSM	DID-PSM
Health Expenditure	-68.732** (34.871)	-69.157** (35.212)	-89.884* (51.467)	-165.067 (110.346)	-96.492** (37.928)	-257.417* (138.216)
ANC Month First Visit	-0.305* (0.162)	-0.306* (0.164)	0.202 (0.176)		0.226 (0.161)	
ANC Before 6 Months	0.048** (0.023)	0.045** (0.023)	0.010 (0.028)		0.001 (0.027)	
ANC Number of Visits	0.219** (0.103)	0.209** (103)	0.097 (0.106)		0.090 (0.107)	
ANC 4 Visits	0.116* (0.062)	0.124** (0.65)	0.068 (0.069)		0.067 (0.062)	
Hospital Visits (pregnant women)	-0.173 (0.152)	-0.187 (0.141)	-0.160 (0.127)		-0.092 (0.110)	
Hospitalized Delivery	-0.003 (0.061)	0.009 (0.066)	-0.015 (0.065)		-0.007 (0.059)	
PNC Within 24 Hours (all)	0.069 (0.047)	0.085* (0.050)	0.005 (0.036)		0.014 (0.045)	
PNC Within 24 Hours (hospitalized delivery)	0.134* (0.072)	0.153** (0.072)	0.059 (0.057)		0.059 (0.064)	
Satisfaction Kitagata Hospital	-0.083 (0.100)	-0.141 (0.100)	-0.052 (0.075)	-0.228 (0.318)	-0.078 (0.071)	-0.310 (0.305)

ATT: Average treatment on the treated (Insured). Robust standard errors in parentheses.

ITT: Intention to treat (Treatment Village). Robust standard errors clustered at the village level in parentheses.

BSD: Between subjects difference using OLS or LPM

DID: Diff-in-diff on the Treatment 2 + Control subsample.

PSM: Kernel weighted Propensity Score Matching with bootstrapped standard errors. Effect calculated on Household Size, Assets Index. Female Household Head, Age Household Head, Education, Household Head, Health Status Household Head, Health Awareness Household Head, controlling for time (Follow-up) and spatial (Distance to Hospital) fixed effects. See Appendix for full specifications. * p < 0.10, ** p < 0.05, *** p < 0.01.

Based on the regression results summarized in Table 9, we can conclude that the project seems to have a strong impact on the health expenditure of insured households. Even when controlling for self-selection the effect is significant. Responding to intuition – people willing to insure are ex-ante spending more on healthcare – the ITT coefficients are slightly higher but consistent. The estimated saving per household ranges between 67,000 and 257,000 UGX depending on the estimation and sample. In any case these values are higher than the average insurance cost per household of 29,000 and 43,000 UGX respectively

in the baseline and follow-up. To estimate its efficiency however the insurance subsidy should be included.

Insured households facing a pregnancy seem robustly more likely to attend Antenatal care (ANC)—an explicit target of the intervention. Insured households are on average going to an ANC visit 10 days before the non-insured; they are 4.8% more likely to have the first ANC within six months; they go on average to 0.22 more visits and are almost 11.6% more likely to attend at least four ANC visits before pregnancy. Results are however not significant in the ITT estimation.

Moreover, the intervention seems to have no significant effect on the number of hospital visits of pregnant women. It has no effect on the likelihood of hospitalized delivery. It has no effect on the likelihood that a pregnant woman would receive Postnatal care (PNC) within 24 hours from delivery, and is only significant effect on PNC in case of hospitalized delivery (13.4% more likely). ITT estimation yields insignificant results.

The intervention seems not to affect the perceived quality of hospital services (Kitagata). However, the sign of the coefficients is consistently negative. This is consistent with qualitative evidence that the scheme may contribute to generate tension about the equality of healthcare within a village. In fact, the probability of being insured significantly correlates with household wealth—a sign that poorer households may be facing significant budget constraints with respect to joining the intervention.

Table 10: Impact overview

Outcome indicator	Effect
Health Expenditure	++
ANC Month First Visit	+
ANC Before 6 Months	+
ANC Number of Visits	+
ANC 4 Visits	+
Hospital Visits (pregnant women)	0
Hospitalized Delivery	0
PNC Within 24 Hours (all)	0
PNC Within 24 Hours (hospitalized delivery)	+
Satisfaction Kitagata Hospital	0
Legend:	
++	Conclusively positive effect (all estimations yield a significantly positive result)
+	Likely positive effect (some estimations yield a significantly positive result)
0	No effect detected (no significant results)
-	Likely negative effect (some estimations yield a significantly negative result)
--	Conclusively negative effect (all estimations yield a significantly negative result)

It should, nonetheless, be noted that given the relatively wide range of observed outcomes, some of the detected positive effects could be the result of the multiple comparisons problem rather than of the project intervention itself. In other words, some of the statistical significance may simply be a matter of probability, which increases in the number of tested indicator differences.³⁷ A range of methods of adjusting critical p-values to correct for the multiple comparisons problem exist, from the most conservative Bonferroni correction³⁸ to the less stringent Benjamini-Hochberg procedure.³⁹ The appropriateness of the various available correction method and thus the critical p-values, however, a non-trivial matter and still subject to academic discussions. We therefore prefer to point the issue out rather than make arbitrary choices regarding statistical significance.

The fact that we find no statistically significant project effects on many of the outcome indicators could in theory be due to an insufficient sample size and a consequent low power of our estimations. However, our sample was as large as budget and time considerations as well as project specifics allowed, so increasing the sample size based on ex-ante power analysis would not have been possible. Conducting an retrospective power analysis to compute the minimum detectable effect sizes (and thus to determine whether statistically insignificant results reflect no actual deference between the treatment and control groups or just a low-powered estimation) is a controversial issue,⁴⁰ often considered fundamentally

³⁷ Gerber, Alan S., and Donald P. Green (2012). *Field Experiments: Design, Analysis and Interpretation*. New York: W. W. Norton & Company, p. 300.

³⁸ Dunne, O. J. (1959). "Estimation of the Medians for Dependent Variables," *The Annals of Mathematical Statistics* 30(1): 192-197.

³⁹ Benjamini, Y., and T. Hochberg (1995). "Controlling the False Discovery Rate: a practical and powerful approach to multiple testing," *Journal of the Royal Statistical Society, Series B*, 57(1): 289-300.

⁴⁰ Thomas, L. (1997). "Retrospective Power Analysis," *Conservation Biology* 11(1): 276-280.

flawed.⁴¹ The main reason is that it is immediately obvious that as the significance level increases, retrospective power decreases. Hence in case there is a significant effect, the power will be high, while the power will by definition be low if there is no significant effect. This implies that if we find a significant effect, a power analysis becomes redundant for apparently the power of the test is big enough. It also implies that if we do not find a significant effect the power is apparently too low to pick up the observed effect size. A similar reasoning holds for the reverse power analyses: if the impact is insignificant apparently the sample is too small to pick up the possible effect. Additional information that can be obtained by conducting the reverse power analyses is minor. Retrospective power analyses, also in the form of reverse power analyses suffer from the “power approach paradox.”⁴¹ Considering the fundamental critiques of retrospective analyses, we do not report and power calculations or minimum detectable effect sizes.

4.2.2. Research question 2: Did the project reach its objectives? Can the results be attributed to the project? If not, why not? Did other factors play a role?

The project had some positive impact on 6 of 10 measured outcome indicators. The remaining 4 are unaffected. Thanks to the use of a control group and to the inclusion of standard socioeconomic confounding factors into the models and the use of different econometric specifications, we can safely attribute the reported results to the project. However, other factors also play a role in the actual levels of the outcome indicators:

Table 11: Household level influencing factors

Outcome indicator	Size	Assets	Female	Age	Edu	Health	Aware
Health Expenditure	0	++	--	++	++	--	--
ANC Related Outcomes	0	0	+	+	0	0	0
Delivery Related Outcomes	0	0	-	-	+	0	++
Satisfaction Kitagata Hospital	0	0	0	0	0	++	0

Legend: ++ Conclusively positive effect (all estimations yield a significantly positive result)
 + Likely positive effect (some estimations yield a significantly positive result)
 0 No effect detected (no significant results)
 - Likely negative effect (some estimations yield a significantly negative result)
 -- Conclusively negative effect (all estimations yield a significantly negative result)

4.2.3. Research question 3: How relevant are the results?

The positive impact of the project found indicates that the results are relevant in that it helps reach MDGs 4, 5 and 6. Besides, it helps to achieve Objective 2 in Uganda’s Health and Nutrition sector (“Ensure universal access to quality Uganda National Minimum Health Care Package, with emphasis on vulnerable populations”) through Strategy 1 (“Provide integrated promotive, preventative, curative and rehabilitative services that have been proven effective, cost effective and affordable in conjunction with the private sectors”) and Intervention 9 (“Strengthen community health services.”) as defined on pages 273-274 of the National Development Plan 2010/11 – 2014/15.

4.2.4. Research question 4: How efficient was the project?

The financial information is given in Appendix 7. As the financial data was not detailed enough about costs of the delivered treatments, we can not directly compare the reported figures with the benchmarks reported by the synthesis team.

4.3. **Discussion and conclusion**

Using repeated cross-section data on health expenditure, ante-natal care (ANC), post-natal care (PNC) and a HCAHPS-type patient satisfaction survey, we estimated the contribution of the SHU health insurance scheme towards achieving its objectives in the sub-county of Kitagata. First, we find that household healthcare expenditure is significantly lower thanks to the insurance. Health expenditure decreases by 67,000 UGX per year according to the most conservative estimate. This should be benchmarked with the average insurance cost per household of 29,000 and 43,000 UGX respectively in the baseline and follow-up. Second, we find some reassuring impact of the utilization of ANC. Insured households are on average going to an ANC visit 10 days before the non-insured; they are 4.8% more likely to have the first ANC within six months; they go on average to 0.22 more visits and are almost 11.6% more likely to attend at least four ANC visits before pregnancy. Results are however not

⁴¹ Hoenig, J. M. , and D. M. Heisey (2001). “The Abuse of Power: The Pervasive Fallacy of Power Calculations for Data Analysis,” *The American Statistician*, 55(1): 19-24.

significant in the ITT estimation, meaning that these results may be driven by self-selection (i.e. if insured households are more likely to go to ANC visits to begin with). Third, the intervention seems to have no effect on PNC and on the perceived quality of healthcare provision.

The repeated cross-section approach allows us to use different estimation methods for our results. Besides between-subject estimations and propensity score matching (PSM), we can compare the villages that did not have the intervention at the time of the baseline but did during the follow-up with the control facilities using difference-in difference estimation. Yet, our findings are based on a non-random setting and most of the project had already been rolled-out at the time of the baseline. This is a significant caveat that unnecessarily diminishes the rigor of the findings. It is essential that further investigations consider starting the evaluation prior to the implementation of the project itself. Moreover, interventions that require a disbursement by beneficiaries (like insurances), suffer relatively more from self-selection into the intervention. We use PSM to compare each insured household with credibly similar uninsured counterparts, and ITT analysis to more conservatively estimate the impact on the intention-to-treat sample (i.e. the villages that have access to the insurance vs those do not have access). The combination of these approaches limits the concerns arising from the self-selection bias.

In short, The SHU insurance scheme demonstrates potential and scope for reducing healthcare related expenditure. On the one side, this is only part of the story, as the insurance also reduces the volatility of such expenditure. On the other side, the efficiency of such health expenditure drop should be carefully benchmarked with the underlying subsidy. Moreover, its impacts on health outcomes, frequency of utilization and satisfaction are less evident. A substantial exception to this is ANC visits, which improve in terms of timing as well as frequency.

Table 12 reports a summary of our findings on a scale of 1 to 10, with 1 being “not at all” and 10 being “completely”.

Table 12: Evaluation table

Question	Score
The project was well designed	6
The project was implemented as designed	5
The project reached all its objectives	6
The observed results are attributable to the project interventions	7
The observed results are relevant to the project beneficiaries	6
The project was implemented efficiently	N/A

5. Capacity development

5.1. Data collection and analytical approach

For putting up the baseline on capacity development for the SPO SHU the evaluation tools are shortly explained. For the field research for the baseline and endline (follow-up assessment) studies two special Research Manuals were written.⁴² The analytical approach in this technical report regards not only the contribution of CFA funding meant for the SPO's capacity to the actual development changes in the capacity of the SPO, but also to the contribution of changes in the SPO capacity to SPO outcomes (contribution analysis).

5.1.1. Background documents

For both the baseline as the endline initially on strategy, context and activities were studied and verified with concerned SPO (SHU) and related CFA (Cordaid).

5.1.2. Focus groups/group interviews

Focus group interviews were held with SHU's staff members, staff and stakeholder organizations for getting data on the organizations development and its working environment. In these interviews attention was given to the organization's *Timeline* until the baseline year 2012, its *Theory of Change*, and

⁴² Kamphuis, E. (2012). "Evaluation Study Capacity Development of Southern Partner Organisations – Baseline – Uganda." Research Manual. Molenrij/Kampala: ETC International.
Kamphuis, E. (2014). "Evaluation Study Capacity Development of Southern Partner Organisations – Endline – Uganda." Research Manual. Molenrij/Kampala: ETC International.

the *Results Chain CFA - SPO - Target groups / stakeholders*. Observation of the SPO's office and working environment gives additional information about the SPO.

A complementary approach was followed in the fieldwork of the endline study that has taken place during the period July 2014; herein interview formats were used emphasizing *key changes and wished changes* within the SPO, as seen by interviewees from the SPO personnel, from externals and from the supporting CFA.

5.1.3. Organizational self-assessment

In the baseline as well as the endline organizational self-assessments were done with respondents of the SPO; in the endline assessment was aimed at a participation of 30% of the respondents present in the baseline assessment; for SHU this was above 85%;⁴³ the endline workshop has taken place on 7 July 2014. The same questionnaire covering 5 Core Capabilities and connected indicators with prompting questions was used, in order to facilitate comparability between the baseline and endline outcomes.

Outcomes of the self-assessment in the baseline were related to all elements of *Focus groups/group interviews* for making up a *Synthesis scoring form* that is the basis for the evaluation of each core capability and its underlying aspects. After processing the *Synthesis scoring form* a debriefing feedback meeting with SHU has taken place on 1 October 2012 to discuss determining factors for the given scores. After these debriefing additional *self-reporting* was requested from the respondents; they were asked to issue their remarks/comments on the synthesis scoring form. Final scoring and related explanations were given by the evaluators and peer reviewed.

Outcomes in the endline were related to interview findings (with SHU staff, externals, and Cordaid Netherlands). Then endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, reflecting changes in core capabilities and their underlying aspects over the period June 2012- June 2014, were qualified in terms of 'improved', 'stable', or 'worsened'. These qualifications were generated by an Excel tool that was specially developed for this purpose; the tool generated endline scores per core capability and their underlying aspects, based on multiple choice answers on 64 questions; the other 18 questions regarded open requests for additional comments per different aspect/core capability and did not influence the scoring. The tool thus firstly determined endline scores per core capability and their underlying aspects and these scores were then related with the scores of the baseline study for getting the change qualifications⁴⁴. The change qualifications of the core capabilities and their underlying aspects were linked with an inventory of determining factors for these changes. This was done in workshop sessions and interviews; for SHU change qualifications, determining factors and open comments provided in the questionnaire were captured in a workshop report and interview reports. The workshop report was reviewed in a special feedback meeting with SHU on 29 August 2014; subsequently the workshop report was peer reviewed, and served as input for the evaluator's final assessment.

5.1.4. Contribution analysis

The organizational self-assessment and interviews/core group discussions were carried out in service of the contribution analysis and related triangulation on 2 aspects:

- the contribution of CFA funding meant for the SPO's capacity to the actual development changes in the capacity of the SPO
- the contribution of changes in the SPO capacity to SPO outcomes

In the analysis of the contribution in SPO capacity changes to SPO outcomes was focused:

- on changes in the Core capabilities To act and commit and To Adapt and self-renew, and
- on changes in one or maximally two SPO outcome areas.

⁴³ The workshop was attended by 9 SHU staff (including its Executive Director and its M&E officer), and 7 staff working in the head office and the regions; only one did not attend the baseline workshop.

⁴⁴ The scores of the baseline study were in 2012 not made up by means of this tool; the final scores were then determined by putting up the Synthesis scores. For consistency sake the original 2012 scores were reviewed with the Excel tool, in order to get a comparison between the baseline and endline scores on the same basis; in a view cases baseline scores had to be adapted; these adaptations were in general marginal. Through the review of the baseline scores with the Excel tool, both baseline and endline scores are given with one decimal.

CFA's and SPO's have intentions with their policies and operations thereof: i.e. these organizations depart both from their Theory of Change (ToC), which postulates intended development pathways for realizing their outcomes. In principle each ToC encompasses the aspects of: Program/project/initiative, Context, Ideas/theories, Process/sequence of change, and Reflection and decision making,⁴⁵ These aspects will shortly addressed insofar they are relevant in the explanation of the intended outcomes realization of the CFA and SPO.

In the analysis of the factors behind observed changes in SHU's outcome realization, one needs to depart from a notion of the sequence as is displayed in the next figure.

Figure 1: Results chain scheme with outcome areas

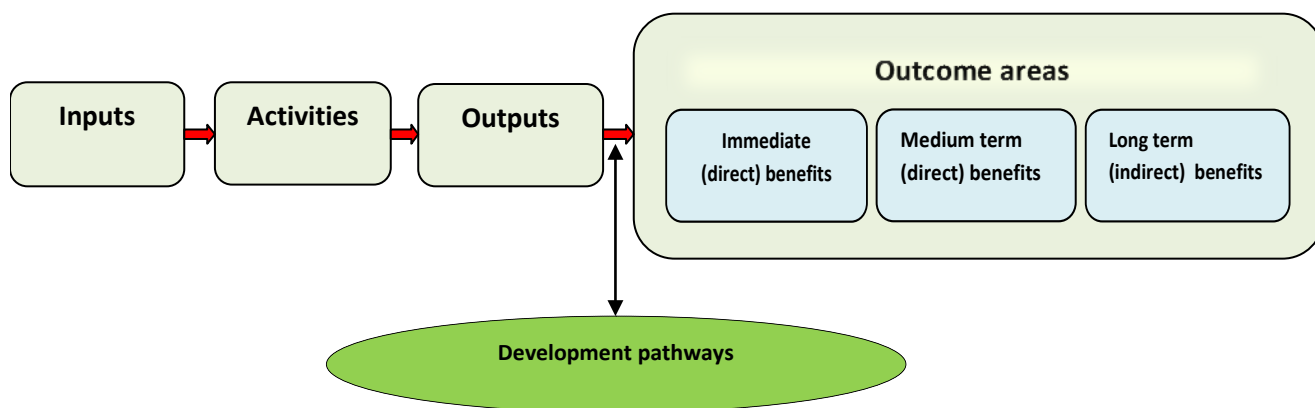


Figure 1 shows that in case of the MFSII evaluation CFA's and SPO's both produce *Outputs* for 'their' beneficiaries (i.e.: technical trainings, health insurance, advisory/counselling services, extension services, educational services) by carrying out *Activities* (i.e.: organization & delivery of mentioned services, and by using *Inputs* (i.e.: own income, funding from thirds, services from others, upgrading own personnel). In the provision of a plausible explanation for changes by analyzing the contributions to observed changes, there is a main focus on the question how and what extend the *Outputs* contribute to the realization of a range of intended *Outcomes*. Additionally, *Outcomes* can be realized *Immediately* (maximally 1 year), at *Medium term* (2-3 years) or at *Longer term* (4 years and beyond), depending on what was intended. Hence answering the questions how and to what extend *Outputs* do contribute to the realization of intended *Outcomes* within different *Outcome Areas*.^{46,47}

As SHU's outcome area for analysis was chosen: improved access to quality health services in focusing on the Project Increasing access to quality health care through health insurance . This outcome area and project were chosen, because this concerns Cordaid's most recent project support, which is in 2013 and 2014 the core of Cordaid's support to SHU.^{48,49}

5.1.5. Observation forms

Regarding SHU a detailed chronology of study/research activities was recorded on Observation forms. In the forms was also space for the researchers to make observations on the research process, the collected data, or the cooperation extended by SHU and Cordaid as related CFA.

5.1.6. Reasons for choice of mentioned methods

Organizational assessments regard essentially interactive processes between the evaluated organization and the evaluators. Taking a baseline does not only concern the handling of measurement tools, but also

⁴⁵ Vogel, I. (2012). "Review of the Use of 'Theory of Change' in International Development." Review report. London: Department for International Development (DFID), p. 14-15, 28.

⁴⁶ Kamphuis, E. (2014). "Evaluation Study Capacity Development of Southern Partner Organisations – Endline – Uganda." Research Manual. Molenrij/Kampala: ETC International, p. 5-6.

⁴⁷ N.B. Instead of Process Tracing this technical report speaks of Contribution analysis as a better alternative to describe the followed type of analysis.

⁴⁸ Kamphuis, E. (2014). "Evaluation Study Capacity Development of Southern Partner Organisations – Endline – Uganda." Research Manual. Molenrij/Kampala: ETC International.

⁴⁹ N.B. Instead of Process Tracing this technical report speaks of *Contribution analysis* as a better alternative to describe the followed type of analysis.

the triangulation of collected findings in interviews/focus groups. The followed approach is thus a mixture of two perspectives. Firstly: the application of survey research and feedback, and secondly: the strong attention for people working in organizations that face changes. For that reason data gathering through a questionnaire and self-assessment went hand in hand.

Respecting the two perspectives simultaneously means that research techniques like Difference-in-Differences are not applicable in this assessment framework. Factors influencing organizational development are complex and multidimensional and cannot be captured in the 5C research within a timeframe, geared to a more profound contribution analysis that was done in relation to the SPO SHU and the CFA Cordaid.⁵⁰

Organizational assessments combine different measuring and observation methods, as mentioned above with assessment based on expertise in the area of organizational development. Difference-in-Differences and Randomized Controlled Trial (randomized assignment) for example can hardly be matched with such combination.

The choice for the mentioned methods has implications for type of evidence the endline study can generate and consequently in what terms effectiveness of interventions can be qualified. Table 13 gives an overview of the 4 possible levels of evidence, the related parameters of evidence / types of research, and hence the qualifications of the effectiveness of interventions.⁵¹

Table 13: Evidence ladder

Levels of evidence	Parameter of evidence	Types of research	Effectiveness of interventions
4. Causal	As in 1, 2, and 3, but there is now sound and substantial evidence that the outcome is caused by the intervention and/or clear evidence showing which ingredients of the intervention are responsible for the outcome.	<ul style="list-style-type: none"> - Randomized Control Trial - Repeated case studies (N=1 designs) 	Efficacious
3. Indicative	As in 1 and 2, but it has now been demonstrated that the intervention clearly leads to the desired outcomes (e.g. goals are attained, target problems decrease, competencies increase, clients are satisfied).	<ul style="list-style-type: none"> - Quasi-experimental studies - Theory of Change studies - Norm referenced approaches - Benchmark studies - Client satisfaction studies - Goal attainment studies - Quality assurance studies 	Functional
2. Theoretical	As in 1, but the intervention now has a plausible rationale (i.e. a program theory) to explain why it should work with whom	<ul style="list-style-type: none"> - Reviews - Meta-analysis - Expert knowledge studies 	Plausible
1. Descriptive	The essential elements of the intervention (e.g. goals, target group, methods and activities, requirements) have been made explicit	<ul style="list-style-type: none"> - Descriptive studies - Observation studies - Analysis of documents - Conduct of interviews 	Potential

⁵⁰ In 3 out of the 8 endline studies this contribution analysis was done, which is in line with the outcomes of Rongen, G. (2014). "Overview Discussion and Action Points, Workshop Joint MFS II Evaluations, Amsterdam, 26 and 27 February 2014." Contribution analysis for all 8 endline studies would require more research time and that would overstretch the budget boundaries for the capacity development research component of the Joint MFS2 Evaluations Uganda

⁵¹ This overview is based on the various 'ladders of evidence' that are in use in health research; the overview takes the realities of developmental research into account.

The approach followed, including the contribution analysis, in the MFS2 evaluation regarding the Capacity development of Southern partner organizations is mainly related to the evidence level 'theoretical'. The effectiveness of the interventions can the best be qualified as 'plausible'. The types of research related to the levels of evidence 1 and 2 (Descriptive and Theoretical) corresponds with the described earlier research approach in this chapter.

The use of the 5 Core capabilities conceptual framework made it possible to compare baseline and endline scores of core capabilities and thus to reach to a certain extend the level of evidence 'indicative'. One should however realize that for the determination of the final scores and the qualifications of capability changes, interviews, workshops, observation studies, and core group discussions were vital. Time constraints made it not possible to carry out a profound Theory of Change study or client satisfaction studies. Hence the capacity development study can the best generate plausible explanations of the effectiveness of researched interventions. It appears doubtful whether the extra contribution analysis component fully justifies an evidence level 'indicative' and a qualification of the effectiveness of the interventions as 'functional'.

5.2. Results

This chapter provides firstly a descriptive analysis of SHU's capacity development by analyzing the relative changes in the scores of the five core capabilities. And secondly plausible explanations of the outcomes will be given that were the result (outcomes) of the observed changes, thereby pondering the evidence that either confirm these explanations or may overturn them.

5.2.1. Changes in SHU's capacity development

In the following a descriptive analysis of the findings is given with respect to SHU's capacity development that were collected during the follow-up assessment (endline study) following the approach described in the previous chapter. The endline study generated scores per core capability and their underlying aspects that are based on scores per indicator. The comparison between baseline and endline scores are here not given at indicator level, as the scores on aspects underlying the core capabilities give sufficient insight in the major changes per each core capability⁵² and thus on the organization's capacity development over the period June 2012 - June 2014 (i.e. baseline scoring and endline scoring periods). Per each aspect an explanation is given on the finally assigned change qualifications, based on the change qualifications given stemming from the questionnaires used in the organizational self-assessment. If the difference between the baseline and endline scores was between -0.25 and + 0.25, the aspect change was qualified as "stable", if the difference was more than + 0.25, then the qualification was "improved", and if the difference was less than -0.25, the aspect change was qualified as "worsened". The final change qualifications, set by the evaluator, take into account what emerged in the workshops, interviews, focus group meetings and the final feedback meeting with SHU. The baseline and endline scores are given with one decimal to make clear how the Change qualifications stemming from the questionnaires were given. After the explanations of the change qualifications per aspect an explanation is given on the overall change qualifications per entire core capability.

In the endline assessment 9 staff members from SHU participated (including the executive director participated).

⁵² Detailed data at indicator level are captured in the Excel scoring tool and can be made available.

Table 14: Capability to act and commit

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator ´s change qualification after workshops/interviews
1 Capability to act and commit	3.5	3.5	Stable	Improved
1a Level of effective leadership	3.6	3.7	Stable	Stable
1b Level of realistic strategic planning	3.4	3.6	Stable	Improved
1c Level of translation of strategy into operations	3.7	3.4	Worsened	Stable
1d Level of staff capacity and motivation	3.1	3.5	Improved	Improved
1e Level of financial resource security	3.4	3.3	Stable	Stable

1a. Stable: SHU leadership is exercised at all levels of the organization. The different layers in the organization (Board, Management, Team Leaders, project coordinators in general appear to understand and exercise their roles well. Decision-making is mostly fast and effective.

1b. Improved: All SHU projects are guided by the Strategic Plan 2011-2016 and are responsive to community needs; each project has an operational plan; SHU's values serve as a guidance to make informed decisions that are reality-based. Strategic Plan is solid document, because it gives per each program worked out M&E result indicators; However: internal and external developments make sometimes adaptations in planning needed. Development of a risk management plans for the entire organization in 2013 done by the Board and management; also the development of risk management plans for each district office in 2014 done by the management and district teams (i.e. financial risks related insurance activities by thirds, SHU is promoting but not executing, costs claimed by health service providers, size of SHU support to community, in view of shorter involvement of donors' external support)(March 2014).

1c. Stable: Strategy development is seen as common effort and consequently induces operations in line with this strategy. At project level improvement was experienced regarding the involvement of those developing the strategy-based action plans. Support missions to the districts were based on identified needs from field offices with clear ToR for support mission 2012-2013. Weekly planning and reporting with action planning to meeting minutes added (2013); Assignment of outputs to each staff member individually became practice; there is now a more focused output realization approach, and the accountability per each staff member for certain outputs increased; consequently performance appraisals based on set of individual outputs (Q3 2013- Q1 2014).

1d. Improved: The level of staff capacity and motivation has improved, due to increased mutual support between head office and field offices by exchanging of skills and experiences. SHU also facilitates training provided by externals and internal; colleagues in accordance to observed internal needs ; b) internal and external training in response to staff training needs. Staff turnover proved to be low; nearly all core staff has a long time working relationship with SHU. Changes in roles of some staff made, exchange of experiences from one project to another now better than before (rotation of staff- also before 2012)(2012-2013). External exchange visits and two internal training organized by SHU (2012).

1e. Stable: The level of financial security became slightly better, because one more funding partner came on board in 2013. The Board and management in general aim at diversifying of funding partners, but so far results were modest. SHU is registered on DFID on US Government funding websites (2013-2014). For the near future exploration will be done on the interest of Corporate Organizations (SHU to become a part of their value chains of commercial insurance companies), on the Banks (SHU falling under their Corporate Social Responsibility), and on opportunities of Governmental funding through the proposed National Health Insurance Bill (long-term funding). Currently new funders are considered, but also collection of beneficiary contributions. SHU herein abides by its mission & vision and counts on the micro finance movement. SHU remain depending on funding from organizations like Cordaid. Largest project is provided funding by BftW.

Overall qualification of core capability To act and commit is Stable, but on aspects level clear improvements. In general SHU's organization stands firm; perspectives for new paying assignments (projects) actually not really present, but SHU has good reputation to build on. Progress in common strategy development and output accountability are new and have the potential to yield result in the near future.

Table 15: Capability to adapt and self-renew

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator´s change qualification after workshops/interviews
2 Capability to adapt and self-renew	3.1	3.5	Improved	Improved
2a Level of effective application of M&E	3.3	3.4	Stable	Improved
2b Level of strategic use of M&E	2.3	3.5	Improved	Improved
2c Level of openness to strategic learning	3.6	3.8	Stable	Improved
2d Level of context awareness	3.4	3.3	Stable	Stable

2a. Improved: Effective application of M&E systems is enhanced in the head office & field offices: all staff have embraced this system; subsequently training of staff members was carried out in 2013. Review of scheme products in order to target both men and women (i.e. entire household) in Sheema district (due to rising family demand)(2012), Start with the use of text messages & voice messages in the direct communication with households (2012).

2b. Improved: Strategic use of M&E was generally accepted, and now applied. M&E trainings were done in 2013 in this respect (see 2a). In 2014 M&E has been fully integrated and regular monitoring reports that are submitted to the Board and Cordaid. During 2011-2012 a M&E department was established as a new element in the organization, and a special M&E specialist was appointed, as well as computerization of data identification, data management and processing is pursued (2012-2013).

2c. Improved: Staff and beneficiaries are currently substantially more involved in strategic learning than was the case before 2012. Change in approach to assessment of strategies planned by project teams; basic questions: what worked, which results, what didn't work, why, and what should be done? (2013). Incorporation of SHU's own development as one of the core areas in the annual corporate strategy (June 2013).

2d. Stable: At local level awareness of the context was always present; almost daily updates at district level takes place and at national level twice per year; the level of context awareness was intensified, as compared to 2 years ago.

Overall qualification of core capability To adapt and self-renew is improved. On aspects level clear improvements were observed, especially the establishment of a M&E department with all developments thereof, was important.

Table 16: Capability to deliver on development objectives

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator ´s change qualification after workshops/interviews
3 Capability to deliver on development objectives	3.2	3.1	Stable	Stable
3a Extend to which organization delivers on planned products and services	3.4	3.4	Stable	Stable
3b Extent to which delivered products and services are relevant for target population in terms of the effect they have	3.1	3.3	Improved	Stable
3c Level of work efficiency	3.1	2.6	Worsened	Worsened

3a. Stable: Delivery of SHU was generally stable; performance indicators were defined for common understanding on delivery of results (2013); first improvement due to tagging of outputs to individual staff members (see also 1c), aside with only tagging to projects; this gives more guarantees for adequate service delivery. Increase in family contributions towards health insurance union operations and standardization of benefit packages and products is herein also instrumental (2012). Introduction of micro-credit schemes in the districts of Luwero, Nakaseke & Nakasangola (2012) came about, as well as expansion of SHU's activities in general to new districts Masaka and Mubende (2012-2013). Study on insurance products design in social marketing carried out based on training needs identified by SHU staff (2012-2013).

3b. Stable: Basically the relevance of services delivered by SHU did not change; there was the impression that this aspect was overrated in the baseline. Change in SHU's target groups from rural only to rural and peri-urban (3 small and 2 big schemes) brings differentiation in needs, because these target groups are different; cross- subsidization from rural poor programs now into peri-urban poor in the planning considered for 2015 (2013).

3c. Stable: SHU works in line with targets that imply behavioral change; problem herein is how measure value for money (how can behavioral change been measured in money terms?); It is true that this is difficult to measure, but what can now be said with the available information about the use of performance standards about efficiency? As possible approaches were seen: the measurement in terms of time spent in accordance with predefined timelines, the strictly following of budgets that were negotiated with funding donors; doubts however were expressed about the application of input/output ratios as tools for efficiency measurement, because outputs can be quantified, but no their outcomes. The mentioned alternatives were thus far applied with SHU.

Overall qualification of core capability To deliver on development objectives remained stable; for the level of work efficiency, identified partial solutions for measuring efficiency can be more pursued, in spite of mentioned difficulties with such measurement.

Table 17: Capability to relate

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
4 Capability to relate	3.6	3.7	Stable	Improved
4a Level of involving external parties in internal policy/strategy development	3.3	3.6	Improved	Improved
4b Level of engagement of organization in networks, alliances and collaborative efforts	3.7	3.7	Stable	Stable
4c Extent to which organization is actively engaging with target groups	3.8	3.7	Stable	Stable
4d Level of effective relationships within the organization	3.8	3.9	Stable	Improved
<p>4a. Improved: Involvement of external parties in strategy development was better embedded in the strategy development process; operational procedures were designed to formalize relationships with partners through MoUs (with Districts and other NGO's –on income generating activities-, commercial microfinance institutions -2013); until 2012 SHU worked with the local governments without MoUs. Also upgrading SHU status to a national NGO realised (before SHU was only official NGO at district level)(February 2013).</p> <p>4b. Stable: Partnerships and networks now amount 41; SHU for example joined the Federation of Ugandan Employers, and participates more actively in NGO forums. At the other hand organizations invite SHU to join and contribute to their policies/activities (like Strides for Family Health (mid 2012). On national level is SHU member of the Uganda Community Based Health Financing Association (UCBHFA, also partner of CORDAID which is coordinator of all community initiatives on health care financing/insurance programs. SHU took often own initiative to relate to other organisations for cooperation. Number of national partners increased (from 25 in 2013 to 41 in 2014). SHU's Executive Director was elected as the Board of Director's chair of the umbrella organisation UCBHFA and later elected to represent Community Health Insurance (CHI) in the national task force that is designing the National Health Insurance Scheme (NHIS)(2012).</p> <p>4c. Stable: Methods to engage target groups were already well established within SHU; basically they remained the same.</p> <p>4d. Improved: Relations within the organisation improved: there is no now more interaction through joint meetings with open exchanges, an interactive website with mail groups, and own webmail.</p> <p>Overall qualification of core capability To relate is Improved. National networking, but also at district level remained strong, whereas involving external parties in strategy development and relations within the organisation improved</p>				

Table 18: Capacity to achieve coherence

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
5 Capability to achieve coherence	3.7	3.8	Stable	Stable
5a Existence of mechanisms for coherence	3.7	3.8	Stable	Stable
5b Level of coherence of various efforts of organization	3.6	3.8	Stable	Stable
<p>5a. Stable: Comprehensive set of operational guidelines available as also in 2012 (Human Resources, Accounting, Procurement, Operational guidelines); these are frequently updated in line external feedback (i.e. management letters by auditing firm in the yearly audits); Organizational policies are shared in joint meetings and these are kept in office (2012); Board of Directors and senior management sign not to be involved in any of conflict of interest activities (2013); Organizational values are appendix to each staff's contract, for which should be signed by each contracted staff (2012-2013).</p> <p>5b. Stable: Synergies were realized in the in the Bushenyi District: offices & staff are shared for different projects; projects there are presented to all staff for collecting ideas and suggestions; herein is the emphasis on exchange ideas is central; this knowledge and experience exchange also facilitates temporary takeover of activities, in case of forced absence of colleague staff members.</p> <p>Overall qualification of core capability To achieve coherence is stable; in 2012 the organization had already clear coherence; on this high rating additional small improvements were realized.</p>				

5.2.2. Main conclusions on capability changes SHU

Table 19 gives a summary at core capability level of the baseline and endline score.

Table 19: Capability overview

Core capability	Baseline	Endline	Final change qualifications
1 To act and commit	3.4	3.5	Stable
2 To adapt and self-renew	3.1	3.5	Improved
3 To deliver on development objectives	3.2	3.1	Stable
4 To relate	3.6	3.7	Improved
5 To achieve coherence	3.7	3.8	Stable

In SHU's capacity development clear improvements were observed firstly at core capability level for the core capabilities To adapt and self-renew, and To relate with the qualification Improved, and secondly at aspects level of those core capabilities with the qualification Stable. The shape of SHU's capacity was already solid at the time of the baseline; that on top of that improvements were realized, is remarkable: such kind 'last mile' improvements are generally more difficult to achieve than when starting from scratch.

Improvements at aspects level were realized under the core capabilities To act and commit, whereas the core capability To achieve coherence remained firmly (i.e. at high level) stable. Core capability To deliver on development objectives remained stable as well, but showed on aspect level of work efficiency worsened and also delays in project implementation the 2nd half of 2012 (see Chapter 3 Profile of the Southern Partner Organization). SHU claims with respect to efficiency measuring that behavioral changes are difficult to quantify and thus that input/output ratios are difficult to use. Discussion on this aspect stimulated SHU to look into the efficiency of its own organization.

SHU has taken action to address its financial sustainability; this is necessary with large findings phasing out. Thus far no new longer term projects promoting CHF schemes were acquired, but with the organization's strong reputation at national and international level, it must be possible to find new funds for 'selling' the strong CHF concept.

Cordaid's approach towards SHU has from 2012 onwards not been essentially changed in its main contribution to the projects it funded. Its projects firstly some core funding (i.e. salaries, benefits), plus coordination costs (office costs, travel costs, governance costs, support supervision) and secondly only coordination costs mainly focus on to the core capability To deliver on development objectives. Financially Cordaid's support to SHU amounts to € 196,517 over the period 2012 - 2013 (see Chapter 3 Profile of the SPO).

When looked at the scores at core capability level and aspects level with related explanations, there are improvements of the core capabilities 2 and 4, and at aspects level within core capability 1. Within core capability 3 the efficiency question deserves attention. Cordaid's support appeared to have a narrower scope in orientation than was envisaged in its original focus on core capability 3.

5.2.3. Plausible explanations of SHU's outcome realization

In the light of the adapted and subsequently applied research approach the effectiveness of interventions can be described in terms of a plausible explanation⁵³. This report attends to two types of contributions that are described in the Results chain scheme in Fig 1 (see Chapter 4):

- the contribution of Cordaid funding to the actual changes in SHU's core capabilities To act & commit and To adapt & self-renew
- the contribution of these changes in SHU's capacity to its realized outcomes in the *Outcome area: Improved access to quality health services*.

⁵³ Or: 'the plausibly explanation of an specific outcome in a specific historical case, the identification of actors/factors that contribute to this outcome, and the assessment their relative importance', see: Mayne, J. (2008). "Contribution Analysis: An Approach to Exploring Cause and Effect," ILAC Brief 16, p. 1. Kamphuis, E. (2014). "Evaluation Study Capacity Development of Southern Partner Organisations – Endline – Uganda." Research Manual. Molenrij/Kampala: ETC International, p 4.

This outcome area was selected, as this is central in SHU's mission and also concerns the core of Cordaid's support to SHU.⁵⁴ The next table gives the relevant elements of the Theory of Change of Cordaid and that of SHU that underlie the Results chain Cordaid - SHU from inputs to outcomes.

Table 20: Overview of relevant ToC elements

Elements	Cordaid	SHU
Ideas/theories on change	Accessible health care for the poorest	Promotion community health insurance within National Health Insurance Scheme (NHIS) Bill
Program/project/initiative seeking changes	Enabling SHU to contribute to maternal / infant and reproductive health care services in Sheema District	Implementation projects on reduction delays to maternal/child health care services and related health insurance schemes; changes in attitudes of target groups in rural and peri-urban settings sought; lining up health service providers by adequate service contracts, all in Sheema District
Process/sequence of change	Funding SHU in 2 projects regarding reduction delays to maternal/child health care services and related health insurance schemes	Services offered within SHU strategy to promote Community Health Insurance (CHI): <ul style="list-style-type: none"> - Community mobilization, - Health education / health insurance education. - Health insurance Schemes formulation - Capacity building for self-professional management - Grass-root, local level lobbying / advocacy towards change to Community health insurance (CHI) schemes - Purchasing / Contracting health care services - Community health insurance (CHI) schemes' - networking and coordination - Stimulate patient centered awareness and create health care facilities with this orientation
Reflection and decision making	Periodic capacity assessments, feedback and dialogue	Involvement in preparation governmental decisions maternal / child health care of the poor / M&E on realized outputs and outcomes to promote CHI further
Context	Changing policies international development funding agencies	Political environment for health NGO's conducive to integration community health care insurance schemes into draft National Health Insurance Scheme (NHIS) Bill; passing of the Bill delayed; uncertain when Bill is passed due to certain opposition

Table 21 gives results chain gives a display of Cordaid's inputs contributing to SHU's core capabilities that are instrumental in the realization of its activities. The outputs that these activities produced, generate immediate (direct) outcomes and after that medium term (direct) benefits.

The result chain has been verified and further refined in the field. The result chain is in accordance with observations and interviews done during the field visit to Sheema district; the results chain is later further related to provided written reporting by SHU and activity publications.

⁵⁴ See also 3.1 Profile Southern Partner Organization (SPO).

Table 21: Results chain for SHU's outcome area: Improved access to quality health services

Inputs of CFA	Activities of SPO	Outputs	Outcome areas	
			Immediate (direct) benefits	Medium term (direct) benefits
<p>Finance: 2012 & 2013 Euro 75,000 per year (no separate budget line for capacity development)</p> <p>Personnel support:</p> <ul style="list-style-type: none"> - Training on ToT (leadership skills) for field staff - Training on project management, M&E, governance - for senior management - Support to attend conferences on health insurance in Indonesia in 2013 	<p>Capacity to act & commit: Expansion and strengthening of health insurance schemes:</p> <ul style="list-style-type: none"> - Health education - Health insurance education - Strengthening + formation of schemes - Training of scheme leaders - Subsidizing schemes (30% during yr 1, 20% in yr 2, 10% in yr 3 and phased out in yr 4) - Outreach and mobilization - Contracting health care services + purchasing - Contracting transporters - Customer care desk - Distribution insecticide treated mosquito bed nets <p>Capacity to adapt & self-renew</p> <ul style="list-style-type: none"> - Learning and reflection through joint partner meetings (annually), local annual project partner meeting, team meetings, frequent interactions with partners & beneficiaries - Monitoring of schemes (monthly) - Desk for customer care to guide patients when they come in and go out- place where patients can file feedback 	<ul style="list-style-type: none"> - 9 schemes functional (3777 beneficiaries of which 769 mothers) in 2013 - 3 contracts with health service providers - 18 contracts with transporters - 1001 bed nets distributed to pregnant mothers and new born babies - Scheme structure revised and simplified - Schemes cover entire family (women, men and children) and not only women as fist envisaged - One scheme discontinued because dysfunctional- funds given back to members - Improved services 	<ul style="list-style-type: none"> - Increased access to quality health services(72% of mothers covered under scheme had institutional delivery; vs average of 43.4%in the district; about 1,700 claims under insurance schemes with 80% of costs cleared by schemes - Only 3 scheme members (mothers and newborn) have died of malaria (2012-2014) - Reduction in number of filed complaints - Sign and name tags in Ishaka Adventist hospital 	<ul style="list-style-type: none"> - Reduced maternal & child mortality

5.2.4. Capability Changes SHU

As was concluded in the previous paragraph *Main conclusions on capability changes SHU*, the core capabilities To adapt and self-renew and To relate have shown clear improvements at core capability level, which facilitated management of larger Community Healthcare Financing (CHF) programs.

The core capabilities To act & commit and To achieve coherence have shown steadiness and improvement at aspects level through i.e. strategy, translation strategy into actions, and motivated staff (CC1), or firmly maintained its high level through clear documentation on vision-mission & internal regulations, and realized synergies (CC5). On aspect level of core capability To deliver on development objectives (i.e. measuring efficiency)(CC3) discussion on efficiency goes on, but did not much influence sound output realization (except for the 2nd half of 2012).

From the beginning of 2013 onwards the implementation of the project *Maternal, infant and Reproductive Health insurance project* (January 2013 - December 2014) could take advantage of the high level of CC1 and CC2 (the ones under analysis in the results chain). Output realization in the results chain is related to planning in 2013 with one more year to go; it regards the number of users of health care services, number of CHI schemes, contracted health care facilities and the contracted motorbike transporters on track⁵⁵. SHU's annual report 2013 gives a detailed record on schemes in operation with respect to these numbers as well.⁵⁶

5.2.5. Outputs SHU

The outputs, as shown in Table 7, were duly reported in detailed annual reports/ reviews that SHU submitted to Cordaid, which were discussed in regular monitoring meetings with Cordaid. Outputs are reported (in focus group, interview and reports) in terms of: number of functional CHI schemes, number of beneficiaries reached, number of contract settled with health service providers, quality changes of health services, and restructuring of schemes focused on families, all in Sheema District.

Health care service providers (Hope Medical Centre, Ishaka Adventist Hospital, Kitagata hospital) confirmed SHU's key contribution to bringing about community health insurance schemes; these would not have been possible without this support and guidance. Improved accessibility to health services was confirmed, and customer helpdesk and transport arrangements highly appreciated. Uncertainties were expressed about fees for health services in discussion with health care providers (flat or in proportion with number of visits?), in view of their aiming at cost covering functioning. Health education, health insurance education needed for strengthening / formation of schemes all go well, but should be extended; improvements in ICT information management with good integration in information management systems of the providers is wished. Expansion of CHI schemes to other sub-counties is strongly wished.

Beneficiaries (Kasaana west - 13 members; Kyeibanga schemes -10 members) confirm advantage of easy access to better medicines and services in hospital, which one otherwise could not afford. SHU services are appreciated, as also faster health service delivery. Being a scheme member is beneficial, because one visit without insurance could cost close to an annual premium; worries were expressed about increasing premiums (gradual decrease of subsidy on premium). Health education (mother-child care) was regularly received and contributed to better service delivery of health care providers.

Scheme leaders (Kasaana west-11 persons) confirm organization and task division as designed by SHU: each village has 2 leaders and committee comprising of: chairperson, secretary, treasurer, and Medical Practitioner. All are engaged in mobilization of entire villages; for this they had trainings from SHU and political leaders, doctors, etc. (patient handling, community sensitization & mobilization, and financial management) at village, district and national levels and additionally exchange visits to other districts. Scheme leaders keep records of hospital payments and meeting attendance. Scheme leaders are elected and thus trusted by their constituencies. Scheme leaders note that their services are in general appreciated by communities, but sometimes motivation is low due to lack of trust. Scheme leaders work daily for several hours; their work load increases closer to membership renewal periods.

Sheema District headquarters (interviewed health educator and nursing officer) confirm various aspects of SHU's support to CHI schemes. This regards coordination/monitoring health issues in the district.

⁵⁵ See Table 2 in 3.1 Profile Southern Partner Organization (SPO); in the table are output totals over the whole project period mentioned.

⁵⁶ SHU (2014). Save for Health Uganda Annual Report 2013. Kampala: Save for Health Uganda (SHU), Chapter 4.

Through CHI schemes the number of mothers delivering in hospitals have increased, and their attendance to 4 antenatal visits to the clinics. SHU provided curtains to Kitagata hospital for privacy of new mothers, while District provisions the other health centers. In addition, SHU supported hospital outreach in Katagata for pregnant women in remote areas. Radio talk shows have helped to mobilize communities for health services and to demystify misconceptions and common beliefs about health facilities.

5.2.6. Immediate (direct) benefits

Detailed reporting on *Immediate (direct) benefits* stated in the results chain was done by SHU and could mostly be confirmed in reporting (detailed activity reports⁵⁷ and interviews) by SHU staff during the field visit. Beneficiaries and scheme leaders provided qualitative information on reported data.

5.2.7. Medium term (direct) benefits

On *medium term (direct) benefits* some examples were given. The activities related to project *Maternal, infant and Reproductive Health insurance project* were executed too short ago to have hard data on a Reduction of maternal & child mortality; under the immediate (direct) benefits some indication is given for mother and child mortality, and confirms the results chain logic. About *Medium term (direct) benefits* no conclusive statements can be made.

5.3. **Discussion**

5.3.1. Followed CFA-SPO approach related to the findings

Attainment of detailed reported immediate benefits were confirmed in accordance with observations and interviews done during the field visit to Sheema district. The results chain was further related to provided written reporting by SHU and activity publications. The central guiding role of was herein stipulated, as one of the promoters of Community Healthcare Financing (CHF) through community health insurance, as such known at national level. SHU's existing capacity generally contributed to its effectiveness; more specifically improvement in the core capabilities To act & commit, To adapt & self-renew, and To relate plausibly generated intended immediate outcomes.

SHU is since 2009 Southern Partner Organization of Cordaid; since then was there a steady funding relation based on mutual trust in SHU's pioneering work in the area of promoting, setting up and implementing Community Health Insurance Schemes. SHU's influence is considerable in advocating CHF in its 7 target districts in general, and in Sheema District in particular, where Cordaid funding is utilized.

Without this Cordaid funding, other funding agencies could have taken Sheema district in theory. However: based on SHU's mandate and strategic intentions, as described in its Strategic Plan 2011 - 2016 three donor organizations endorsed SHU's approach and pioneering work and therefore directed their funding to different districts.

SHU is thus not strictly depending on Cordaid's funding only, but termination of funding with the end of MFS2 would create uncertainty in SHU's operations. Alternative approaches to funds generation are considered within SHU i.e. exploration of the interest of Corporate Organizations -SHU to become a part of their value chains of commercial insurance companies, of the Banks -SHU falling under their Corporate Social Responsibility, and on opportunities of Governmental funding through the proposed National Health Insurance Bill (see Chapter 5 under core capability 1). For now it looks questionable whether these options can guarantee maintaining the scale of SHU's CHF operations.

Through SHU's project implementation, the organization has built a strong and resilient organization with a good reputation. Cordaid contributed through its project support indirectly to this organizational strengthening; a sudden interruption of its engagement in SHU's projects might bring organizational setbacks and hence the further attainment of *Immediate (direct) benefits*, and also *Medium term (direct) benefits*, which concretization is still awaited.

Cordaid's project funding support is still essential for SHU as a contribution for its operations, because promoting, setting up and implementing CHF does not make completely cost-covering earning of own income possible. Cordaid's support to SHU's capacity development is in this respect of lesser importance,

⁵⁷ SHU (2014). Save for Health Uganda Annual Report 2013. Kampala: Save for Health Uganda (SHU), p. 28.

because all its core capabilities now look to be in a good shape, with an exception for the organization's efficiency. It is not suggested that SHU's current efficiency is hampering its current performance, but only that the issue deserves more focused attention for further improvement in its organizational performance.

5.3.2. Recommendations

If Cordaid decides to discontinue its support to SHU, there is nothing to recommend with respect to the cooperation between both organizations.

But: If Cordaid decides to continue its support to SHU it is recommended that:

- Cordaid jointly with SHU investigates new models/partners for funds generation through Corporate Organizations (under Corporate Social Responsibility), private Banks/Insurance Companies, and Governmental funding through the proposed National Health Insurance Bill
- In case these alternatives take their time beyond MFS2, Cordaid and SHU consider with the other now involved donors how the existing partnership with SHU the best can be shaped in service of the further expansion of CHF schemes.

5.3.3. Remarks on evaluation approach

The evaluation of SHU's capacity development itself, especially with respect to the organization's planning and implementation could be done with much care, thanks to the detailed and quality documentation that the organization has made available, in addition to the financial information provided by Cordaid's head office. Further should be noted that SHU's Monitoring & Evaluation is in a good shape, which certainly facilitated the capacity development endline study, in addition to the information provided in workshops and interviews.

The chosen qualitative approach to assess the capacity development of SPO's, as described in Chapter 4, appeared to work well. The use of capability scoring requires a careful approach: scores can serve a comparison between baseline and endline outcomes, but this comparison needs to be thoroughly triangulated through interviews, focus group discussions, or joint analysis and verification workshops with stakeholders. In the current evaluation setup contribution analysis was an integral part of the evaluation, with in its core the results chain analysis. Research time permitted a partial confirmation of causalities postulated; the qualification of effectiveness of interventions can be set as firmly plausible and to a certain extent functional.⁵⁸

5.4. **Conclusion**

In this chapter conclusions are drawn with respect to the 3 evaluation questions of the MFS2 Evaluation Study Capacity Development of Southern Partner Organizations - Uganda, e.g.:

- What are the changes in partner organizations' capacity during the 2012–2014 period?
- To what degree are the changes identified in partner capacity attributable to development interventions undertaken by the MFS II consortia (i.e. measuring effectiveness)?
- What factors explain the findings drawn from the questions above?

5.4.1. Changes in SHU's capacity during the 2012–2014 period

Overall SHU's organization per June 2014 has shown clear improvements as compared to June 2012. At core capability level and aspects level there were improvements: core capabilities 2 and 4 have shown improvements at core capability level; within the core capabilities 1 and partially 3 improvements were observed at aspect level. SHU delivered clear outputs within *Outcome area: Improved access to quality health services in Sheema District*. It could plausibly explain the contribution of its outputs to the outcomes within this area.

5.4.2. Cordaid's influence on identified changes

Cordaid support concerned essentially the support to the projects Reducing Delays to Maternal and Child Health Care Services - Uganda (158/10146, July 2009 - December 2012), and the Maternal, infant and Reproductive Health insurance project(108736, January 2013 - December 2015).

⁵⁸ See Table 13.

The close cooperation with Cordaid contributed to the changes in SHU's capacity since June 2012. Within this cooperation, through SHU's project implementation, improvements of the entire core capabilities 2 and 4 have taken place, and partial improvements within the core capabilities 1 and 3. Cordaid's support to SHU was stable and long term and in comparison with Bread for the World relatively modest. Cordaid's steady involvement in SHU was also important, because of its involvement in other health projects in Uganda. SHU has always appreciated its partnership with Cordaid.⁵⁹

5.4.3. Explaining factors to identified changes

SHU has support of three main donors; two of them, including Cordaid were from the outset of SHU's existence essential in its development. Cordaid's steadiness, joint with that of Bread for the World facilitated certainly program, project and organizational development. Within this general framework Cordaid's main focus was on the core capability To deliver on development objectives and to a lesser extent on the other four. In general this focus was not very specific, as most of the support regarded feedback on proposals and reports, strategic advice, field visits twice a year, and program development, plus support to lobbying for CHF in Uganda.

5.4.4. Assessment project design

Previous observations result in an assessment of the project design. Cordaid's contribution was defined as support to the *Project Reducing Delays to Maternal and Child Health Care Services - Uganda* and the *Project Increasing access to quality health care through health insurance*. Cordaid's support to SHU's capacity development is mainly geared to enhancing the capacity of SHU in function of its project implementation. The projects appear well designed, but was not specifically geared to the 5 core capabilities per se. The next table gives assessment scores on 3 statements: The project was well designed, The project was implemented as designed, and The project reached all its objectives.

Table 22: Evaluation table

Statements	Scores
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	6 ⁶⁰

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⁶⁰ Project *Increasing access to quality health care through health insurance* only finishes per December 2015

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7. Appendix

Appendix 1: Household health expenditure (ATT)

	(1) OLS	(3) PSM
Insured Household	-68.732** (34.871)	-69.157** (35.212)
Follow-up (2014)	62.882* (35.946)	
Household Size	-10.101 (6.892)	
Assets Index	54.989** (21.326)	
Female Household Head	-170.949*** (32.154)	
Age Household Head	5.715*** (1.442)	
Education Household Head	90.078** (44.537)	
Health Status Household Head	-43.248** (20.765)	
Health Awareness Household Head	-35.733** (15.885)	
Distance Kitagata Hospital	10.148* (5.726)	
Constant	-74.542 (89.754)	
N	761	751
R ²	0.100	

Robust standard errors in parentheses. * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Appendix 2: Household health expenditure (ITT)

	(1) OLS	(2) DID	(3) PSM	(4) DID-PSM
Treatment Village	-89.884* (51.467)	-17.053 (118.439)	-96.492** (37.928)	
Follow-up (2014)	89.139*** (32.693)	113.413 (84.192)		
Treatment × Follow-up		-165.067 (110.346)		-257.417* (138.216)
Household Size	-10.098 (6.235)	-10.098 (6.235)		
Assets Index	53.473*** (18.506)	53.473*** (18.506)		
Female Household Head	-171.226*** (26.559)	-171.226*** (26.559)		
Age Household Head	5.615*** (1.418)	5.615*** (1.418)		
Education Household Head	90.700* (46.262)	90.700* (46.262)		
Health Status Household Head	-44.298** (20.931)	-44.298** (20.931)		
Health Awareness Household Head	-34.109** (13.497)	-34.109** (13.497)		
Distance Kitagata Hospital	6.286 (7.473)	6.286 (7.473)		
Constant	-28.577 (92.482)	-28.577 (92.482)		
N	761	393	761	387
R ²	0.104	0.093		

Robust standard errors clustered at the village level in parentheses. * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Appendix 3: ANC-related outcomes

	(1) Month of First Visit OLS	(2) Before 6 Months OLS	(3) Number of Visits OLS	(4) At least 4 Visits OLS
Insured Household	-0.305* (0.162)	0.048** (0.023)	0.219** (0.103)	0.116* (0.062)
Household Size	-0.029 (0.030)	0.008** (0.004)	0.017 (0.020)	0.001 (0.014)
Assets Index	-0.050 (0.074)	0.007 (0.012)	-0.092* (0.054)	-0.056 (0.034)
Female Household Head	-0.176 (0.184)	0.063*** (0.022)	0.082 (0.154)	0.069 (0.085)
Age Household Head	0.014** (0.006)	-0.002 (0.001)	-0.012*** (0.004)	-0.005** (0.002)
Education Household Head	-0.015 (0.205)	-0.002 (0.040)	0.014 (0.152)	0.030 (0.092)
Health Status Household Head	0.029 (0.081)	-0.014 (0.010)	0.036 (0.060)	0.024 (0.037)
Health Awareness Household Head	0.061 (0.086)	-0.010 (0.013)	-0.114* (0.067)	-0.013 (0.037)
Distance Kitagata Hospital	-0.006 (0.027)	0.002 (0.004)	-0.008 (0.019)	-0.007 (0.011)
Constant	3.905*** (0.433)	0.969*** (0.091)	3.904*** (0.316)	0.865*** (0.178)
N	244	244	243	243
R ²	0.042	0.046	0.109	0.076

Robust standard errors in parentheses. * p < 0.10, ** p < 0.05, *** p < 0.01

Appendix 4: Delivery-related outcomes

	Hospital Visits pregnant (1) OLS	Hospitalized Delivery (2) OLS	PNC all (3) OLS	PNC hospitalized (4) OLS
Insured Household	-0.173 (0.152)	-0.003 (0.061)	0.069 (0.047)	0.134* (0.072)
Household Size	0.057* (0.031)	0.013 (0.013)	0.003 (0.008)	-0.003 (0.012)
Assets Index	0.035 (0.065)	0.019 (0.030)	-0.018 (0.022)	-0.026 (0.034)
Female Household Head	-0.127 (0.143)	0.053 (0.081)	-0.034 (0.053)	-0.145** (0.072)
Age Household Head	-0.004 (0.005)	-0.005** (0.002)	0.000 (0.002)	0.003 (0.002)
Education Household Head	-0.154 (0.185)	0.141 (0.087)	0.088* (0.047)	0.174** (0.088)
Health Status Household Head	-0.100 (0.068)	0.044 (0.033)	0.012 (0.027)	-0.001 (0.038)
Health Awareness Household Head	-0.052 (0.050)	0.074** (0.031)	0.080*** (0.028)	0.084** (0.036)
Distance Kitagata Hospital	-0.015 (0.019)	-0.019* (0.011)	-0.004 (0.008)	0.004 (0.012)
Constant	1.258*** (0.319)	0.811*** (0.158)	0.059 (0.104)	-0.077 (0.177)
N	177	260	254	157
R ²	0.061	0.132	0.082	0.117

Robust standard errors in parentheses. * p < 0.10, ** p < 0.05, *** p < 0.01

Appendix 5: Satisfaction Kitagata Hospital (ATT)

	(1) OLS	(2) PSM
Insured Household	-0.083 (0.100)	-0.141 (0.100)
Follow-up (2014)	0.288 ^{***} (0.085)	
Household Size	-0.000 (0.021)	
Assets Index	-0.014 (0.039)	
Female Household Head	0.016 (0.100)	
Age Household Head	-0.003 (0.003)	
Education Household Head	-0.164 (0.134)	
Health Status Household Head	0.160 ^{**} (0.043)	
Health Awareness Household Head	-0.038 (0.036)	
Distance Kitagata Hospital	-0.004 (0.013)	
Constant	0.185 (0.229)	
N	644	661
R ²	0.064	

Robust standard errors in parentheses in (1) and (2). Robust standard errors clustered at the village level in parentheses in (3) and (4). * p < 0.10, ** p < 0.05, *** p < 0.01

Appendix 6: Satisfaction Kitagata hospital (ITT)

	(1) OLS	(2) DID	(3) PSM	(4) DID-PSM
Treatment Village	-0.052 (0.075)	-0.114 (0.290)	-0.078 (0.071)	
Follow-up (2014)	0.309*** (0.089)	0.489** (0.178)		
Treatment × Follow-up		-0.228 (0.318)		-0.310 (0.305)
Household Size	-0.001 (0.024)	-0.026 (0.039)		
Assets Index	-0.017 (0.042)	-0.022 (0.065)		
Female Household Head	0.015 (0.110)	-0.060 (0.202)		
Age Household Head	-0.003 (0.003)	-0.004 (0.004)		
Education Household Head	-0.163 (0.145)	0.044 (0.222)		
Health Status Household Head	0.158*** (0.042)	0.106 (0.065)		
Health Awareness Household Head	-0.037 (0.041)	-0.079 (0.064)		
Distance Kitagata Hospital	-0.006 (0.010)	-0.002 (0.021)		
Constant	0.207 (0.275)	0.140 (0.473)		
N	644	314	644	311
R ²	0.063	0.090		

Robust standard errors in parentheses in (1) and (2). Robust standard errors clustered at the village level in parentheses in (3) and (4). * p < 0.10, ** p < 0.05, *** p < 0.01

Appendix 7: Financial efficiency Save for Health Uganda

<i>Expenditure in Uganda Shilling</i>	jul 09 - jun 10	jul 10 - jun 11	jul 11 - jun 12	jul 12 - dec 12	TOTAL
PROGRAMME COSTS					
Training Scheme and Union Leaders	49,685,180	124,598,800	53,184,180	11,062,900	238,531,060
Schemes Promotion and Creation	166,969,250	242,236,125	81,369,140	57,778,613	548,353,128
Technical Monitoring and Risk Management	18,212,255	8,716,600	64,428,350	18,593,000	109,950,205
COORDINATION COSTS					
Staff Salaries and Allowances	353,442,755	456,240,359	85,203,107	18,912,596	913,798,817
Staff Training	26,476,100	14,826,400	-	-	41,302,500
Transport and Travel	86,758,585	73,870,768	4,060,000	1,200,000	165,889,353
Office Running	125,695,549	102,339,917	15,494,068	2,197,450	245,726,984
Audit Fees and Bank Charges	18,609,528	24,393,805	-	-	43,003,333
Consultancy and Evaluation	4,130,000	102,673,423	-	-	106,803,423
Governance - Board meetings	10,088,600	28,336,936	-	-	38,425,536
Consultancy expenses	-	16,703,200	-	-	16,703,200
Exchange losses	-	-	49,850,000	-	49,850,000
Capital Costs	-	-	16,040,000	-	16,040,000
TOTAL EXPENDITURE IN UGANDA SHILLING	860,067,802	1,194,936,333	369,628,845	109,744,559	2,534,377,539
Exchange rate Ushs/Euro	2,837	3,320	3,800	3,400	
TOTAL EXPENDITURE IN EURO	303,161	359,921	97,271	32,278	792,630
Total Cordaid funding	67,000	70,000	113,000	-	250,000
% of total	22%	19%	116%	0%	32%
Of which MFS II funds	-	30,000	113,000	-	143,000
% of total	0%	8%	116%	0%	18%

Technical paper

War Child Holland Uganda

1. Introduction

This technical report about War Child Holland (WCH) Uganda is one of the studies within the framework of the Joint MFSII evaluation at country level – Uganda. In particular, the report serves to give input to the overall joint evaluation report on MFSII funding to the Millennium Development Goals, capacity development, and Civil Society Strengthening.

The outline of the technical report is as follows. First, Chapter 2 gives a description of the context, in which War Child Uganda operates, highlighting the main relevant (international) political, economic, cultural and social issues with which the organization has to deal in pursuance of its objectives.

Chapter 3 gives a project description and the profile of War Child Uganda e.g. its mission, vision, and strategic objectives. After chapter 3, the report is split up in to two parts. Part A deals with the contribution of War Child Uganda to the millennium development goals, while part B explores the capacity development of War Child Uganda. Both parts have the same remaining structure. The data collection and analytical approach section gives attention to the methodological choice made. This study aims at giving plausible explications on the effectiveness of War Child's support based on regression, descriptive and theoretical evidence. These explanations are given to War Child's capacity development and realized MDG outcomes. We end each part with a discussion and conclusion concerning the evaluation questions.

1.1. Brief summary of the analyses and the findings

In the study approach qualitative and quantitative research methods are combined. The approach is centered on the comparison between triangulated baseline data (2012) and triangulated follow-up (endline) data (2014).

1.1.1. Millennium Development Goals

We find no significant effect of the project on long-term educational outcomes. Similarly, we find no significant effect of project impact on most short-term psychosocial outcomes. The two exceptions are intellect (openness) where we consistently find a negative short-term effect with no medium-term improvement, and locus of control which possibly decreased in the treated areas. In the VST analysis we find the project had large and statistically very significant impact on the employment level of interviewed beneficiaries.

1.1.2. Capacity Development

The approach is centered on the comparison between triangulated baseline data (2012) and triangulated follow-up (endline) data (2014). For this background documents, Focus groups/group interviews, workshops, and organizational self-assessments in 2012 and 2014, resulting in 2 sets of capability scores. Endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, were qualified in terms of 'improved', 'stable', or 'worsened'. In the analysis two distinct periods were taken into account. It regards: June 2012 - June 2013, when capacity development efforts were taken to have Pader office's implementation capacity at the level the Conn@ct.Now program required; and July 2013 - June 2014, when War Child's decision to phase out from Uganda required profound reorganizational measures, while maintaining Conn@ct.Now's implementation level.

Overall the scores at core capability level and aspects level with related explanations, there is improvement of the core capability 5, and at aspects level within core capabilities 1, 2, and 3. Within core capability 3 the efficiency question deserves attention. War Child Holland's / Uganda-Kampala office's support to the Pader office maintained the same orientation, as was envisaged in its original focus on core capabilities 1, 2, and 3.

Contributions to changes in the outcome areas Quality Education Improvement Program (QEIP) and Community Based Child Protection Program (CBCP) could mostly be plausibly explained for Pader and Abim districts, when it concerned Immediate (direct) outcomes.

Regarding the Medium term (direct) benefits much will depend in the first place on the parents of the children at stake by their willingness to increase their material and immaterial contributions to schools and child protection structures. Secondly the preparedness of local authorities and community groups to take up the challenge to the 'road to sustainability' are also key matters for these benefits. And thirdly the possibilities to catch the interest of (inter) national organizations that are prepared to work in the realization of QEIP and CBCP objectives along War Child's methodologies is determining for realizing Medium term (direct) benefits is essential as well, after War Child's leaving Uganda.

For the Conn@ct.Now program recommendations for implementation can only be given, having this perspective in mind: regarding direct implementation issues in the area of capacity development with respect to program implementation this will be superfluous, as far as the Uganda activities are concerned. But for War Child Holland in general, it is important for to learn from the experiences of the comprehensive programs, as were implemented in Uganda, for taking investments on future programs. The following is recommended:

- To carry out a post-exit evaluation to assess after minimally 3 years what Immediate (Direct) benefits have resulted in Medium term (direct) benefits in the original program areas, where War Child Uganda was active. Herein should be accentuated what role parents' contributions have played, whether local authorities and community groups succeeded in their journey on the 'road to sustainability', and to what extend (inter) national organizations could make their contributions by using War Child methodologies.
- To assess what capacity requirements had to be fulfilled at the 3 indicated levels in kind and in cash (i.e. what approaches to capacity development were effective and efficient at the same time), while also taking into account the findings of this report.

In the assessment of the project design the statements The project was well designed , The project was implemented as designed , and The project reached all its objectives were rated respectively with 7, 7, and 6 (out of 10).

2. Context

Following the "*coup d'état*" that brought the current president to power in 1986, atrocities were committed by the NRM (National Resistance Movement) armed forces. These crimes invoked a revolt among the northern 'Acholi' population; numerous groups were formed, of which the Lord's Resistance Army (LRA) was one. LRA combined African mysticism and Christian fundamentalism, and claimed to establish a theocratic state based on the Ten Commandments and Acholi tradition. LRA fights with the NRM armed forces led to mass atrocities (such as the killing or abduction of several hundred villagers in Atiak in 1995 and the kidnapping of 139 schoolgirls in Aboke in 1996). In reaction the government created the so-called 'protected camps' beginning in 1996.¹

Since 2006 the LRA is not exercising military operations and terror in Northern Uganda; the government of Uganda and the LRA signed a Cessation of Hostilities Agreement.² In 2007 the Government of Uganda launched the *Peace, Recovery and Development Plan for Northern Uganda (PRDP)* as a strategy to eradicate poverty and improve the welfare of the populace in Northern Uganda.³ In 2009, around 928,000 internally displaced people have returned to their own villages from the camps, 218,300 have gone to 'satellite' camps closer to home and around 276,000 people are still remaining in Internally Displaced People (IDP) camps; 141 out of 243 IDP camps have been closed. In the Acholi region 72% of the population have returned to their villages of origin and only 10% of the population remains in IDP camps.⁴

After-war recovery required focused attention to re-establishing communities that were seriously disrupted during the war. Most of the population in Acholi sub-region, that was internally displaced during the conflict in northern Uganda, have returned to home sites or resettled in trading centres. The return process was marred by land conflicts, sometimes leading to violence. Many women and female-headed households have been deprived of access to land, and there have been widespread allegations of land-grabbing by influential people from within and outside the region. Land dispute resolution

¹ Green, M. (2008). *The Wizard of the Nile: The Hunt for Africa's Most Wanted*. London: Portobello Books, p. 56.

² "Agreement on Cessation of Hostilities between the Government of the Republic of Uganda and the Lord's Resistance Army/Movement." Juba: 16 Dec. 2006.

³ GoU (2007). *Peace, Recovery and Development Plan for Northern Uganda (PRDP) 2007-2010*. Kampala: The Government of Uganda (GoU), p. iii.

⁴ Data from Inter-Agency Standing Committee (IASC), Population movement, September 2009.

processes, including magisterial courts, local council mechanisms, and elder-driven mechanisms have been overwhelmed by the number of cases, leading many to take matters into their own hands. As of then, children, including child-headed households, orphans, and formerly abducted children are the most vulnerable in these communities. Additionally in the Karamoja region of north eastern Uganda, cattle raiding, banditry and the overall presence of small arms continue destabilizing general security.⁵

The access to eastern and north eastern Uganda is often affected by natural disasters; poor road conditions coupled with torrential rains damaged bridges and turned marginal communities more isolated. The war has also had an enormous impact on the demographic and skills base of the region. A large percentage of the population are currently under 18, with limited or no education and skills. Traditional subsistence farming is unfamiliar to many young people, who have grown up in the Internally Displaced Persons camps during the war. This may aggravate the risk of future armed conflicts as young people are unable to secure an income and become an easy target for recruitment into armed rebellion. The lack of skilled labor poses a significant risk that local people will not fully benefit from the opportunities that become available during economic recovery, in turn reinforcing the economic marginalization of North-eastern Uganda.⁶

Already in 1990, Uganda has ratified the Convention on Child Rights (CRC), meaning that Uganda has an obligation to implement children's rights as communicated in the CRC. Uganda has also ratified other international and regional laws which uphold children's rights. Following these ratifications and regional laws concerning children's rights, Uganda passed the Children Act and a number of related laws. At the national level the Children's Act Cap. 59, (1 August 1979) has put in place full safeguards for the rights of all children in the country. The Act guarantees their rights to health and medical care, of which are the responsibility of the parents, the extended family and the government. The Act also empowers the police to caution and release child offenders without recourse to formal hearings, and supports separate juvenile courts.⁷

Ugandan government and civil society play their own roles in peace and reconciliation efforts. From 2006 onwards institutions and social networks outside the state and the economy emerged;⁸ throughout 2011 many agencies (multilateral, but also NGO's and INGO's) have invested in building the capacities of national, district and local government personnel and structures⁹ and have initiated longer-term livelihoods interventions. Besides this, interventions geared to child protection became targeted by attending to a legal and policy framework for regulation and oversight, and a skilled child protection workforce. In this, the support of the general public was sought by information, by child participation, knowledge and data sharing on child protection, aside coordinated support to those providing prevention and response services.¹⁰ Herein fits well an orientation on improvement of basic education facilities, and caring for the psychosocial well-being of children and youth, who were affected by the conflict in north-eastern Uganda.

In 2007 the Government of Uganda launched the Peace, Recovery and Development Plan for Northern Uganda (PRDP) as a strategy to eradicate poverty and improve the welfare of the populace in Northern Uganda.¹¹ Since 2006 around 928,000 internally displaced people have returned to their own villages from the camps, 143,000 have gone to "satellite" camps closer to home and around 87,000 people are still remaining in Internally Displaced People (IDP) camps; 214 out of 243 IDP camps have been closed. In the Acholi region 80% of the population have returned to their villages of origin and only 7% of the population remains in IDP camps with the remainder in 'transit camps'.¹²

⁵ GoU (2012). Uganda Humanitarian Profile – 2012. Kampala: The Government of Uganda (GoU), p. 4.

⁶ Enabling peace economies through early recovery –Perspectives from Uganda, Jessica Banfield with Jana Naujoks, International Alert, March 2009, pp. 14-15

⁷ Webale, T., G Rumushabe, L. Ladirra, A. Bucyana, B. Bakkidde, D. Naggita, B. R. Byanyima, S. Biwaga, S. Kerwegi, D. Amuron, J. Wevugira, and M. Nassal (2011). Collection of Children Laws. Kampala: FIDA Uganda.

⁸ The Civil Society Organizations for Peace in Northern Uganda (CSOPNU) was formed in 2002 and has been active as a coalition. It brought together 50 local and International Civil Society Organizations working towards a peaceful resolution of the conflict in Northern Uganda; the current status of the coalition appears not clear; its website www.csopnu.org/ appears to be inactive.

⁹ GoU (2012). Uganda Humanitarian Profile – 2012. Kampala: The Government of Uganda (GoU), p. 14

¹⁰ WCUK (2010). Study of Community-Based Child Protection Mechanisms in Uganda and the Democratic Republic of Congo. London: War Child UK (WCUK), p. 10.

¹¹ GoU (2007). Peace, Recovery and Development Plan for Northern Uganda (PRDP) 2007-2010. Kampala: The Government of Uganda (GoU), p. iii.

¹² WCH (2012). War Child Holland Website. <<http://www.warchildholland.org/nieuws/889/conflict-and-consequence-uganda.html>> Accessed 8 Jan. 2013.

Post-war recovery required focused attention to re-establishing communities that were seriously disrupted during the war. The physical result of the war in terms of agriculture production and land access was particularly harmful to the Acholi, as the majority heavily depend on subsistence farming. This posed a serious threat to the economic stability of the communities. Moreover, atrocities committed by neighbors and family members threaten the social stability of communities. Children, including child-headed households, orphans, and formerly abducted children, are the most vulnerable in these communities.

As the recovery went on in north-eastern Uganda, the situation there grew increasingly more stable. Consequently international humanitarian agencies have scaled down their activities (OCHA closed its country office end 2011), and increasingly development actors (i.e. governmental and non-governmental institutions/organizations) started focusing on supporting remaining IDPs and returnees with their pursue for durable solutions.¹³ Beyond 2012, the emphasis on post conflict recovery was gradually replaced by a development oriented approach. For child protection this offered the opportunity to take advantage of the already existing legal framework around the international Convention on Child Rights (CRC) and the Ugandan Children's Act Cap. 59, to pursue child protection under more stable circumstances.

The war has also had an enormous impact on the demographic and skills base of the region. A large percentage of the population is currently under 18, with limited or no education and skills. Traditional subsistence farming is unfamiliar to many young people, who have grown up in the IDP camps during the war. This may aggravate the risk of future armed conflicts as young people are unable to secure an income and become an easy target for recruitment into armed rebellion. The lack of skilled labor poses a significant risk that local people will not fully benefit from the opportunities that become available during economic recovery, in turn reinforcing the economic marginalization of Northern Uganda.

Besides the government itself, civil society plays its own role in the peace and reconciliation efforts from 2006 onwards through the medium of communication, institutions and social networks outside the state and the economy. The Civil Society Organizations for Peace in Northern Uganda (CSOPNU)¹⁴ is active within this framework as an umbrella organization. Additionally national and international NGOs have initiated longer-term livelihoods interventions in their programs / projects. Besides this, interventions have become increasingly geared to child protection. This implies a legal and policy framework, which allows for regulation and oversight, a skilled child protection workforce and an informed and supportive public, the participation of children, knowledge and data on child protection, as well as coordinated support to those providing prevention and response services.¹⁵ Herein fits well an orientation on improvement of basic education facilities, and caring for the psychosocial wellbeing of children and youth, who were affected by the conflict in Northern Uganda.

War Child Holland Uganda is engaged in programs that aim at protecting children from violence and at offering them psychosocial support and education with the support from the alliance Conn@ct. Now under MFS2. The organization has worked since 2004 in Northern Uganda within a post conflict orientation; now that most IDP's and returnees have resettled and peace became generally more sustained, War Child Holland has recently reconsidered its presence in Uganda.

2. Project description

2.1. Profile Southern Partner Organization (SPO)

In this report the distinction between the Southern Partner Organization (SPO) and the Co-financing Organization is differing from what is being described in the other capacity development reports. In the usual situation the SPO is an Ugandan organization, which is rooted in the regional/local society with its own mission and vision. Such SPO does have in this situation a partnership with a CFA that provides funding from the MFS2 program lead by the conditions of agreement between the CFA and SPO and the goals of the MFS2 program. In the case of War Child Uganda Pader Office, the CFA and the SPO belong to the same organization working under the same strategy with approaches that are applied within the entire War Child Holland organization. The reason for the special position of the SPO stems from War

¹³ UNOCHA (2014). United Nations Office for the Coordination of Humanitarian Affairs Website: Eastern Africa – Uganda. <<http://www.unocha.org/eastern-africa/about-us/about-ocha-eastern-africa/uganda>> Accessed 6 Jan. 2015.

¹⁴ The coalition brings together 86 local and International Civil Society Organizations working towards a peaceful resolution of the conflict in Northern Uganda.

¹⁵ WCUK (2010). Study of Community-Based Child Protection Mechanisms in Uganda and the Democratic Republic of Congo. London: War Child UK (WCUK), p. 10.

Child's choice to work in Uganda directly with communities and not through local partners (self-implementation model).¹⁶

The description of the profile of the SPO will therefore be a 'mixed' one: descriptions of War Child Holland, War Child Uganda, and War Child Uganda Pader Office will be given. Where needed the perspective of War Child Holland is taken to make clear within what context the Pader office works, and sometimes also the other way around.

The Southern Partner Organization under analysis is War Child Uganda Pader Office. This office carries out programs/project within the framework of War Child Uganda, which is on its turn part of War Child Holland, registered in The Netherlands as a Foundation under the name Stichting War Child.¹⁷ War Child Holland is part of the War Child International network, which consists of independent humanitarian organizations that work together to help children and young people affected by armed conflict.

War Child Holland is an international non-governmental organization (iNGO) that invests in a peaceful future for children affected by armed conflict. The organization is oriented on empowering children and young people, and on enabling adults to bring about 'positive and lasting changes' in the lives of conflict affected children and young people. The organization supports children regardless of their religious, ethnic or social backgrounds or gender. In 2013, War Child implemented projects in 12 countries i.e. Afghanistan, Burundi, Colombia, Democratic Republic of Congo, Lebanon, Occupied Palestinian Territories, Republic of South Sudan, Sierra Leone, Sri Lanka, Sudan, Thailand and Uganda. War Child's vision is: "Children do not belong in war. Ever. They have the right to grow up free from fear and violence. To develop their full potential and become the person they want to be. Together we can change the future.". War Child's mission is: "War Child makes a lasting impact. By protecting children from violence and offering psychosocial support and education. We unleash the children's inner strength with our creative and involving approach, and inspire as many people as we can to participate in our cause."¹⁸

The basis for War Child's orientation and activities thereof, is formulated in the document War Child Strategy 2015. The organization aims to:

- Efficiently direct support *1 million* children and young people in 15 to 20 (post-) conflict zones by 2015.
- Another *2 million* children and young people will be reached indirectly through:
 - o Capacity building: strengthening the capabilities, skills, knowledge and expertise of individuals, partners, communities and War Child staff to deliver quality in programming, personnel policy, finances, administration, fundraising, ICT, logistics and safety to ensure accountability and sustainability in country programs;
 - o Advocacy: improving policies and practices in order to limit violations of children and young people's rights via activities at the local and/or international level. These activities bring a lasting positive change for children and young people affected by armed conflict.
- Besides these *3 million* children and young people reached, it is War Child's ambition to share its methodology online with as many as possible other organizations working with and for children in conflict areas.¹⁹

Since 2004, War Child Holland is active in Uganda. Within the framework of War Child Strategy 2015, the ambitions of the organization were firstly reflected in its programmatic intentions for Uganda in 2010: specific target groups and target locations were identified for the organization's programs. In 2010 War Child Uganda concentrated its activities on the target groups Children, Young people (male and female), teenage mothers and commercial sex workers; Parents, caregivers, teachers, community leaders and the community as a whole; Child Protection Committees (CPC), School Management Committees (SMC), Parent Teacher Associations (PTA), and Local authorities. The organization carried out its activities in District towns, villages/parishes, primary schools in Lango region (Lira), Acholi region (Gulu, Amuru, Nwoya, Pader, Lamwo, Kitgum) and Karamoja (Abim).²⁰

¹⁶ WCH (2013). War Child Recalibrated Strategy: Implications for Programming. Amsterdam: War Child Holland (WCH), p. 15.

¹⁷ WCH (2014). Annual Accounts War Child Holland 2013. Amsterdam: War Child Holland (WCH), p. 7.

¹⁸ WCH (2014). Annual Accounts War Child Holland 2013. Amsterdam: War Child Holland (WCH), p. 7

¹⁹ War Child Strategy 2015, 2009, p. 3

²⁰ WCH (2011). War Child Annual Report 2010. Amsterdam: War Child Holland (WCH), p. 57.

N.B. For 2009 the target groups and locations were differing those approached in 2010: the target groups commercial sex workers, caregivers were added and teenage fathers skipped; IDP and satellite camps were not mentioned anymore, which indicates the rapid IDP's to their places of origin. The number of localities/places was enlarged as well (a/o Abim). WCH (2010). War Child Annual Report 2009. Amsterdam: War Child Holland (WCH), p. 92

From 2011 War Child Uganda Pader Office works with MFS2 funding within the Conn@ct.Now program. In this program War Child Holland, Child Helpline International, Free Press Unlimited, T-Mobile, and TNO joined forces in the alliance Conn@ct.Now. Under this alliance complementary expertise is united in the areas of technology, knowledge, research, and commerce for reaching, supporting and activating children and young people, living in conflict affected areas. Together with local partners, Conn@ct.Now uses specific methods for activities related to War Child's core programming areas i.e.

- *Community Based Child Protection (CBCP)* - Objective: 'To improve the protective environment for children and young people at the community level by supporting communities to strengthen the way communities prevent and respond to child protection concerns and to improve the link between community and national child protection systems.' Support to community-based child protection groups and child rights groups; training of Child Protection Committees on child protection issues and setting-up complementary REFLECT circles at village level; identification of children at-risk, and developing community based solutions;²¹ Training of the community child protection structures aims at sustainability on dealing with child protection issues at community level.
- *Education - Quality Education Improvement Plan (QEIP)* - operates at primary schools for 2 years (Teachers development, teaching materials, school management, PTA and SMC); besides that non-formal schooling (community-based learning, e-learning), Technical Vocational Education and Training through Building Skills Changing Futures Program (BSCF - vocational/business/literacy/numeracy skills improvement); Training of the various stakeholders in the education sector offered leadership supervision to the schools, in order to effectively supervise & manage the school and improve on the quality of education.
- *Psychosocial support - IDEAL methodology* - theme based life skills program for various target groups that take place in primary schools and at parish level²² (children, young people, parents, adolescents, girls, young mothers);²³ workshops aim at strengthening life skills to deal with conflict affected psychosocial problems at community level.
- *Child participation - Children Creating Change (CCC)*: empowering children as 'agents of change'; skills and knowledge trainings for advocating their rights and the rights of others; CCC operates in primary schools and at parish level for 2 years per school/parish;²⁴ activities geared to establish child parliaments for learning about child rights and advocating them.

Through these programs Conn@ct.Now works to ensure that children can grow up in an environment that supports their emotional, social and cognitive development, is free from abuse, violence and exploitation, and offers opportunities for quality education. Conn@ct.Now engages with children and young people, parents and teachers, social workers, communities and the larger society. The program is simultaneously implemented in five countries: Burundi, Colombia, Sudan, South Sudan, and (northern) Uganda; its program activities however are differing per each country.²⁵ The total funding granted for the Conn@ct.Now program is approximately € 21 million for the period of 2011-2015, of which 11 percent is allocated to Child Helpline International²⁶.

Per 2011 War Child Uganda operates in different districts in North Uganda and runs for this an elaborate field structure. Per mid-2012 until mid-2013 there were 91 staff members, among which are 6 expatriates. The management team consists of 7 members: Country Director, 3 Field Location Managers (FLM's), the Operations Support Manager, Program Development Manager and the Human Resource

²¹ WCUK (2010). Study of Community-Based Child Protection Mechanisms in Uganda and the Democratic Republic of Congo. London: War Child UK (WCUK), p. 15.

²² The DEALs interventions implemented in Uganda to date are: I. I DEAL - Implemented in primary schools, the training lasts four to five months; II - Parents DEAL. Implemented at the level of primary schools in a parish. These are normally done with the parents of children in an I DEAL group. The training lasts four to five months; III - Teachers DEAL. Implemented in the primary schools. The training lasts four to five months. After the training the indicator is monitored for two years; IV - Big DEAL. Implemented in the parishes, lasting four to five months; V - She DEAL. Implemented in the parishes, lasting four to five months.

²³ WCH (2014). War Child's Life Skills Course: The Deals Website. <<http://www.warchildholland.org/war-childs-life-skills-course-deals>> Accessed 6 Jan. 2015.

²⁴ The CCC training package takes children through a series of modules to achieve this goal: *Module 1: Knowing our rights and responsibilities; Module 2: Making rights a reality; Module 3: Responding to child protection concerns and Module 4. Leadership skills*. The intervention is designed for existing groups of children and young people, aged 8 – 15 years, who have a remit for advocacy. An example of such a group could be a child rights club at the school; however it could be used to support any child led group.

²⁵ WCH (2014). Conn@ct.Now Website. <<http://www.warchildholland.org/connect-now>> Accessed 6 Jan. 2015.

²⁶ WCH (2012). War Child Annual Report 2011. Amsterdam: War Child Holland (WCH), p. 32-33.

Coordinator. War Child has field offices in: Gulu (FLM 1: Gulu, Amuru, Nwoya), Pader (FLM 2: Kitgum, Lamwo, Pader and Agago), and Lira (FLM 3: Lira, Alebtong, Otuke, and Abim)²⁷.

Mid-2013, the management set-up has undergone a number of changes. A weak operation team was operating in Pader office, and little monitoring and coaching from War Child's Kampala office has taken place during the first half of 2013. Initially the Interim Country Director managed Pader office until December 2013, and then the Field Location Manager in Gulu managed the Pader Office for three months (January to March 2014). After that the management was handed over to the Field Location Manager in Lira, who is also the manager of the entire Conn@ct.Now program in Uganda. Ample issues had to be addressed in a short time:²⁸

- *Programmatic Capacity Building of War Child Holland Uganda - Pader Team (including Advocacy)*, because there was an immediate need for capacity building with respect to program implementation, as most of Pader Office staff was newly employed, when the Conn@ct.Now program started. The involvement of the Pader Office staff in the development of the advocacy strategy for War Child Holland in Uganda meant a capacity building process in itself. Advocacy had never priority in Uganda, but under Conn@ct.Now this became an vital program element.
- *Capacity building of operations staff- Logistics & Finance and Human Resources*, because the operational staff of Pader Office needed capacity building on financial management, logistics, human resources and other operational issues for smooth running of the office.
- *PM&E (i.e. Indicator Progress Card Application development and Training, and General ICT Capacity building of staff* was important for all staff new employees in Pader office, as they were involved in the roll-out of a new War Child programming framework²⁹

Also mid-2013 WCH's Supervisory Council decided 'to recalibrate' the organization's overall orientation. The ambition, formulated in War Child's Strategy 2015 to reach (directly support) *1 million* children and young people in 15 to 20 (post-) conflict zones by 2015 was assessed as too ambitious: in 2012 625,000 children and young people were directly supported, and a growth to 1 mln in 2015 would be too challenging with a total budget that probably cannot reach the original envisaged total of € 35 mln.³⁰ The decision was taken to refine the overall strategy: 'Support children in communities most affected by war through being active participants with interventions that result in specific, measurable and lasting impact for their wellbeing. And raise funds € 25-30 mln by 2015'³¹, because fundraising is expected to become slower than planned growth³².

War Child prefers to work in its targeted countries, instead of increasing the number of countries it is active, but the number of 10 countries is considered as a minimum. War Child wants to exit a country as soon as possible, in case decided; the absolute number of countries in which the organization operates is not a primary ambition³³. Additionally when in a country security, stability and peace are restored, after maximum 5 years, War Child needs to reconsider its role, in case a substantial number of the children may not be identified as directly war affected anymore³⁴. And finally War Child aims to focus on core interventions in Conflict (emergency) and Post Conflict (transition) situations: development oriented interventions were not to be pursued anymore³⁵.

All these considerations induced the decision to phase out from Uganda in 2016, in order to concentrate more on countries that are still suffering of direct conflict situations. In the phasing out process War Child would approach (state) institutions or organizations that are willing and able to take up the role of its and to provide services according to its quality standards. As War Child's works directly with communities

²⁷ Bulte, E., J. Klomp, J. Duchoslav, E. Kamphuis, and B. Lof (2013). Joint MFS-II Evaluation Uganda: Baseline Report, p. 291.

²⁸ Mansaray, S. (2014). Personal communication in 2014.

²⁹ In order to receive adequate reports and data needed to keep track on progress, continuous on the job support was provided. The Pader Office Team members became key developers of the Indicator Progress Card tablet application, which is used to collate internal output and outcome monitoring data. Linked training on the use of ICT / Media devices, programs and applications was meant to help the staff to conduct proper documentation (video, photo etc.) of project activities in the field and in written progress reports. Herein were experiences of Conn@ct.Now in South Sudan instrumental.

WCH (2014). War Child Annual Report 2013. Amsterdam: War Child Holland (WCH), p. 30

³⁰ WCH (2013). Refinement of War Child Strategy 2015, R v T Final Approval. Amsterdam: War Child Holland (WCH), p. 2.

The current economic climate was not conducive to acquire funds up to € 35 million; there was no linkage between the 1 million children to be reached and the required budget for this.

³¹ WCH (2013). Refinement of War Child Strategy 2015, R v T Final Approval. Amsterdam: War Child Holland (WCH), p. 6.

³² WCH (2013). Refinement of War Child Strategy 2015, R v T Final Approval. Amsterdam: War Child Holland (WCH), p. 23.

³³ WCH (2013). Refinement of War Child Strategy 2015, R v T Final Approval. Amsterdam: War Child Holland (WCH), p. 6.

³⁴ WCH (2013). Refinement of War Child Strategy 2015, R v T Final Approval. Amsterdam: War Child Holland (WCH), p. 16.

³⁵ WCH (2013). War Child Recalibrated Strategy: Implications for Programming. Amsterdam: War Child Holland (WCH), p. 4-7.

by building/strengthening community structures (War Child's self-implementation model³⁶), the organization faces a huge task for its remaining years in Uganda. The implementation of War Child's strategy for phasing out its operations in Uganda by 2016 has already started in 2013. The organization will continue implementing a number of projects, focusing on conflict-affected communities in the north. Its activities include the continued implementation of two new DEAL's modules (Risks of Alcohol Abuse, and Sexual and Reproductive Health), and the successful Building Skills; Changing Futures project, which combines life skills, vocational skills, business skills and apprenticeships.³⁷

War Child's started phasing out from Uganda already had severe consequences for its field organization. With above described organizational changes, the actual staffing of War Child Uganda per May 2014 was amounting to 21; now the Pader, Abim, and Lira offices together are considered as one SPO by War Child Uganda, instead of the Pader office alone that had this status during the baseline study.

In 2015 the number of staff will be reduced to 18 staff members (without support staff)³⁸. The staff composition of War Child Uganda per 2015 will be: 1 Country Director (Lira), 1 Program Manager (Lira), 1 Program Development Manager (Kampala)³⁹, 1 Operations Support Manager (Kampala), 1 Project Coordinator Move Forward -MF-Program (Gulu), 4 Project Officers MF (Gulu), 1 TVET specialist (Lira), 1 M&E Officer (Gulu), 4 Project Officers Building Skills; Changing Futures -BSCF- (Lira), 1 Project Officer Conn@ct.Now (Lira), 1 Logistics Officer (Lira), and 1 Finance Officer (Lira).⁴⁰ In the scaling down of War Child Uganda project commitments go on for BSCF (funded by EU) and MF funded by SOA AIDS); the Conn@ct.Now program will complete its activities in 2015.⁴¹ The War Child Country Office will then also be shifted from Kampala to Lira, in order to stay closer to program implementation.

The field research that has taken place in Pader and Abim Districts and in the War Child offices in the same districts is leading for in the baseline - endline comparison. Staff working in these offices could still be interviewed during the field visit in August 2014. That the Pader and Abim offices do not exist anymore in 2015 does not affect this comparison, as the baseline-endline period covers June 2012 - June 2014. In the discussion in Chapter 6 recommendations are made that take the new organogram per 2015 into account.

As the Pader and Abim Offices (SPO in the endline) works under the Conn@ct.Now program, firstly an overview of this program's active participants⁴² is given, as activities for these participants use mainly resources that War Child mobilizes. The activities within this program involved Quality Education Improvement Plan (QEIP) implemented in primary schools and vocational training (built on the EU funded Building Skills; Changing Futures Project), and Child protection and Psychosocial support through Community Based Child protection (CBCP), Children Creating Change (CCC), and IDEAL projects.⁴³

Table 1: Active participants in Conn@ct.Now Uganda 2011-2013⁴⁴

Years	CYP			Adults			Totals
	Total	Male	Female	Total	Male	Female	
2011	22,947	12,170	10,777	2,585	294	2,291	25,532
2012	36,912	18,686	18,226	20,711	10,354	10,357	57,623
2013	75,805	39,588	36,217	27,993	14,865	13,128	103,798
Totals	135,664	70,444	65,220	51,289	25,513	25,776	186,953

CYP - Children & Younger Persons

³⁶ WCH (2013). War Child Recalibrated Strategy: Implications for Programming. Amsterdam: War Child Holland (WCH), p. 15.

³⁷ WCH (2014). War Child Annual Report 2013. Amsterdam: War Child Holland (WCH), p. 84.

³⁸ In accordance to approved War Child Holland Uganda - Exit Plan; this is a confidential document; only main lines are given in this report.

³⁹ For a period of six months.

⁴⁰ Other supporting staff concern: 2 drivers (Lira), office assistant (Gulu), and accounts assistant (Gulu).

⁴¹ WCH Uganda 2015 Organogram provided by Country Director War Child Uganda on 13 Nov. 2014.

⁴² War Child made a distinction during this period between active beneficiaries, indirect beneficiaries, and otherwise directly reached beneficiaries. The last two categories concern estimates of beneficiaries reached as a consequence of what active participants learned and applied.

⁴³ WCH (2014). Output Monitoring Report Uganda 2013. Amsterdam: War Child Holland (WCH), p. 2.

⁴⁴ WCH (2014). Output Monitoring Report Uganda 2013. Amsterdam: War Child Holland (WCH), p. 2.

From Table 1 can be derived that in 2013 a total of 103,798 active participants were reached by the program; over the period 2011-2012 this was in total 83,155 (25,532+57,623). Hence in 2013 Conn@ct.Now's implementation accelerated: a peak in its output level was reached that year.

The next table gives an overview of the number of persons directly reached in all programs executed by War Child (including also the Conn@ct.Now program) during the years 2011, 2012, and 2013 in Uganda.

Table 2: Active participants in all War Child projects in Uganda 2011-2013⁴⁵

Years	CYP			Adults			Totals
	Total	Male	Female	Total	Male	Female	
2011	104 976	51 568	53,408	36,403	14,801	21,602	141,379
2012	102 745	49 199	53,546	72,545	34,615	37,930	175,290
2013	105 091	50 923	54,168	37,547	19,166	18,381	142,638
Totals	312 812	151,690	161,122	146,495	68,582	77,913	459,307

CYP - Children & Younger Persons

From Table 1 and Table 2 can be derived that the share of Conn@ct.Now's direct participants related to the direct participants of all War Child programs in Uganda, increased over the years 2011, 2012 and 2013, i.e. from 18% in 2011, via 33% in 2012 to 73% in 2013 (for all 3 years together the percentage is 41%).

The total number of direct participants in all War Child Uganda's programs firstly increased from 2011 to 2012, but declined in 2013. This is also reflected in War Child Uganda's overall project costs over the years 2011, 2012, and 2013, which are shown in Table 3.

Table 3: Costs for project activities War Child Uganda 2011 - 2013⁴⁶

	2011	2012	2013
Project + local partner costs	2,367,950	2,821,045	2,246,101
MFS2 Conn@ct.Now Partners	139,335	206,776	194,091
Total	2,507,285	3,027,821	2,440,292

The project costs including the costs for contracts with local partners are fluctuating in the same way for War Child own projects plus the project costs for MFS2 Conn@ct.Now Alliance Partners, or for the same costs without MFS2 partners.

Table 4 shows the actual for Conn@ct.Now expenditures over the years 2011, 2012, and 2013 plus the budget for 2014 for all implied countries, for War Child Uganda and partners, for War Child Uganda only, and for Pader Office only.

⁴⁵ WCH (2012). War Child Annual Report 2011. Amsterdam: War Child Holland (WCH), p. 6.

WCH (2013). War Child Annual Report 2012. Amsterdam: War Child Holland (WCH), p. 18.

Mulder, A. (2014). Personal communication in 2014. War Child Holland Head Office M&E.

⁴⁶ WCH (2012). Annual Accounts War Child Holland 2011. Amsterdam: War Child Holland (WCH), p. 14.

WCH (2013). Annual Accounts War Child Holland 2012. Amsterdam: War Child Holland (WCH), p. 14

WCH (2014). Annual Accounts War Child Holland 2013. Amsterdam: War Child Holland (WCH), p. 19.

N.B. Project costs are fluctuating in the same way for War Child own projects plus the project costs for MFS2 Conn@ctNow Partners, or for the same costs without the partners.

Table 4: Conn@ct.Now Program Actual expenditures 2011 - 2013 and budget 2014⁴⁷

Description of Budget / Expenditure (€)	Actual 2011	Actual 2012	Actual 2013	Budget 2014
Overall Conn@ct.Now Budget including all five countries, partners and global component	3,519,232	5,175,115	4,903,614	4,431,424
Uganda Conn@ct.Now Budget including three implementing partners (War Child Uganda, Free Press Unlimited and Child Helpline International)	840,286	1,289,099	1,121,521	622,424
War Child Uganda Conn@ct.Now Budget (War Child only)	700,951	1,082,323	927,430	558,000
Pader Office Conn@ct.Now Budget (includes staff, office and direct project expenses)	10,702	180,859	159,975	65,000
Program Development Unit Conn@ct.Now Support Budget (War Child Kampala Office) offered to War Child Pader Office. <i>Based on a 20% allocation</i>	8,760	48,945	31,017	15,000

For Uganda was over the years 2011-2013 about € 3.25 million spent by War Child without partners within Conn@ct.Now was , out of the total project costs of € 7.44 million (see Tables 3 and 4). The Conn@ct.Now program took over this period 44% of the total budget of War Child Uganda.

The active participants reached under the Conn@ct.Now program had a peak in 2013, whereas the total active participants of all War Child programs declined. This indicates that the Conn@ct.Now program became in 2013 a more prominent program that War Child Uganda had under implementation in Uganda (see Table 1 and Table 2). Table 3 and Table 4 show both a peak in project expenditures in 2012, followed by a decline in 2013, and for 2014 a steep decline in budgeted expenditures. The peak in program expenditures (including Conn@ct.Now) in 2012 made it possible to yield results in terms of higher program results in 2012.

The size of the decline in expenditures in 2013 is not similar for all programs; for Conn@ct.Now this decline was 14% of the 2012 level; for the other program activities, except Conn@ct.Now this was 24%. This indicates that the relative financial position of Conn@ct.Now became more important. This given, combined with the peak in reached active participants, is an expression of the high pressure put on the Pader Office, as this office had a key role in Conn@ct.Now's implementation.

2.2. Support Co-funding Organization (CFA) to SPO

War Child Uganda gets funding from various organizations, governmental, nongovernmental, as well as from the corporate sector. Table 5 gives an overview for the years 2011, 2012, and 2013.

Table 5: Realized fundraising War Child Holland⁴⁸

War Child Fundraising (€)	2011	2012	2013
<i>Own fundraising</i> (Donations, gifts, grants, legacies)	11,250,798	12,367,366	11,672,938
<i>Share by third parties</i> (Lotteries, UNICEF, CHF)	1,769,186	3,125,490	3,600,521
<i>Government grants</i> (Dutch Mfa, EU, ECHO, others)	5,442,685	7,140,609	9,048,302
<i>Others</i>	82,922	48,806	76,862
Total	18,545,591	22,682,271	24,398,623

War Child Holland, in accordance with Strategy 2015, aims at 'Ensuring a sufficient and sustainable yearly inflow of funds (up to € 35 mln in 2015) to support the planned growth, whilst securing financial independence and funds diversification and creating broad name recognition and social buy-in of War Child's vision and mission.'⁴⁹ This policy, formulated in 2009, currently appears too ambitious, looking at the mentioned amount as: 'Charities have to compete for less money, and education and child protection projects have to compete with 'life saving' interventions such as nutrition, shelter, and water for funding from institutional donors. The situation necessitates the organization to take innovative initiatives and a

⁴⁷ WCH Uganda (2014). Communication in 2014.

⁴⁸ WCH (2012). Annual Accounts War Child Holland 2011. Amsterdam: War Child Holland (WCH), p. 2.

WCH (2013). Annual Accounts War Child Holland 2012. Amsterdam: War Child Holland (WCH), p. 4.

WCH (2014). Annual Accounts War Child Holland 2013. Amsterdam: War Child Holland (WCH), p. 3.

⁴⁹ WCH (2009). War Child Strategy 2015. Amsterdam: War Child Holland (WCH), p. 12.

pro-active attitude⁵⁰, while relying on proven traditional fundraising methods and sticking strictly to low-cost policy, by keeping the percentage of the income spent on fundraising activities as low as possible.⁵¹ The expected reduced availability of funds has necessitated War Child to set sharp priorities in what areas and where to work. War Child's project costs, including local partners, were in 2013 the second highest after Lebanon / Syria of the 11 countries, where the organization was active in 2013.

A comparison is made between War Child's orientation on War Child Uganda Pader Office's capacity development during the baseline and during the endline. Table 6 gives War Child's orientation as CFA on capacity development through specific attention to the Pader Office's 5 core capabilities during the baseline; possible shifts in orientation are indicated with reference to this table.

Table 6: War Child's targeting capacity development - Baseline report measurement⁵²

1. Act and commit	5
Attention to leadership development, human resources management; all personnel is on own pay roll	
2. Adapt and self-renew	4
Development of the performance and development cycle with emphasis on M&E	
3. Deliver on development objectives	3
Attention to planning, results, and deliveries, but scant attention to efficiency measuring	
4. Relate to external stakeholders	2
Not specially targeted.	
5. Achieve coherence	2
Not specially targeted	

(1-5: 1 - not targeted, 5 - intensively targeted)

Since the baseline study War Child Uganda Pader office has undertaken various activities in the area of programmatic capacity building of the Pader Office staff members; this also includes advocacy.⁵³

- Pader staff members training in the Community Based Child Protection (CBCP) approach, conducted in August 2012 by Michael Mart -Child Protection Advisor War Child Holland Uganda;
- Pader staff members trained on psychosocial support & life-skills (DEAL modules) conducted in and 2012 by Deals Trainers - War Child Holland Uganda. This training was also done in 2011;
- Pader staff members trained in reproductive health & substance abuse programming by Program Development Manager War Child Holland Uganda) in February 2013;
- Pader staff members trained in the Quality Education Improvement Plan (QEIP) approach;
- Pader staff members trained in ICT & Media for Development (philosophy behind use of ICT under Conn@ct.Now) by Program Specialist ICT4D - War Child Holland Uganda;
- Joint development and on the job training of War Child Holland Uganda Advocacy Strategy 2012-2014.

All trainings created understanding of the staff on the subject trained i.e.: Community-based child protection approach, New War Child Holland DEALs modules for BIG, SHE and Parents DEAL: Risk of Alcohol Abuse, Sexual Reproductive Health, Global Parents DEAL, and the Quality Education Improvement Plan (QEIP) approach. Based on this understanding staff became able to work with these approaches in practice (in communities and schools) with ongoing coach and support. In addition the taught ICT – philosophy behind use of ICT under Conn@ct.Now program helped staff members understand how ICT & Media can be used in communities and to have them implementing ICT and Media enabled projects. The training on War Child Uganda advocacy strategy 2012-2014 was new in its kind; staff had to use their understanding of the strategy to start integrating this into Conn@ct.Now program advocacy campaigns, which induced an increase child lead advocacy activities.

In the previous paragraph was already described what MFS2 funded strengthening of capacity since 2011 entailed. In addition there were the specific trainings geared to the Pader Office staff needed to refurbish

⁵⁰ WCH (2014). War Child Annual Report 2013. Amsterdam: War Child Holland (WCH), p. 18.

⁵¹ For 2013 this percentage is 18.7%, which is above War Child's internal target, but lower than the maximum set by the Central Bureau for Fundraising (CBF) of 25%.

WCH (2014). War Child Annual Report 2013. Amsterdam: War Child Holland (WCH), p. 18.

⁵² Bulte, E., J. Klomp, J. Duchoslav, E. Kamphuis, and B. Lof (2013). Joint MFS-II Evaluation Uganda: Baseline Report, p. 291

⁵³ Mansaray, S. (2014). Personal communication in 2014.

the office in the beginning of 2013 i.e.: Capacity building of operations staff- Logistics & Finance and Human Resources, and PM&E (i.e. Indicator Progress Card Application development and Training), and General ICT Capacity building.

The above listed training activities were mainly geared to the core capabilities To act & commit, To adapt & self-renew and To deliver on development objectives of the SPO; especially in 2013 this focus was the clearest. This explains the ratings about War Child's targeting capacity development in Uganda that is shown in the Table 7.

Table 7: War Child's targeting capacity development during the endline- Endline report measurement

1. Act and commit	5
Broad range of specific trainings for the Conn@ct.Now program	
2. Adapt and self-renew	5
PM&E (i.e. Indicator Progress Card Application development / training) and ICT	
3. Deliver on development objectives	5
Active support and coaching in the execution of QEIP, CBCP, ICT applications and advocacy	
4. Relate to external stakeholders	1
Not specially targeted	
5. Achieve coherence	1
Not specially targeted	

(1-5: 1 - not targeted, 5 - intensively targeted)

2.3. Key features project

War Child Holland acquired MFS2 funds for the Conn@ct.Now program that operates in 5 countries (Burundi, Colombia, Sudan, South Sudan, and (northern) Uganda); for Uganda about € 3.25 million was spent within the Conn@ct.Now program by War Child without partners over the years 2011-2013, out of the total project cost of € 7.44 million over the same period. The Conn@ct.Now program took over this period 44% of the total budget of War Child Uganda. The active participants reached under the Conn@ct.Now program had a peak in 2013, whereas the total active participants of all War Child programs declined.

Within the Conn@ct.Now program War Child Uganda Pader was supported by War Child Holland and War Child Uganda Kampala office *as the CFA* with funds and guidance over the period June 2012 - June 2014. The War Child Uganda Pader office was *the SPO* during the baseline.

Due to War Child's phasing out from Uganda that started from June 2013 onwards inducing an internal reorganization, the SPO consisted of the Pader, Abim, and Lira offices at the time of the endline. The assessment of the capacity development of Pader office therefore should be seen in this perspective: the baseline - endline comparison will concentrate on the Pader/Abim offices, due to the field research done in these districts.

2.4. MDG project contribution

As part of the Conn@ct.Now alliance under MFS-II, War Child Holland (WCH) Uganda Office is engaged in a multifaceted program in Northern Uganda that aim at protecting children and youths from violence and at offering them psychosocial support and improved education. More specifically, its objectives are to improve the protection of children and young people from violence, abuse and exploitation, to improve (non-)formal child-friendly and quality basic education opportunities for children and young people, to increase access to and quality of integrated psychosocial services for them, and to improve (self-)employment opportunities of vulnerable youths. The main project components being evaluated focus on the development of strategic plans to improve primary education services (QEIP), on direct work with school children to improve their life skills and psychosocial wellbeing (DEALS), and on providing vocational skills training (VST) to selected youths.

2.4.1. QEIP (Quality Education Implementation Plan)

In cooperation with District and Sub-county Education Officers, War Child Holland develops district and sub-county QEIP plans to identify and address barriers to the provision of quality education at local government level. School QEIP plans are then developed in cooperation with the district and sub-county officials as well as teachers, pupils, parents, Parent Teacher Associations (PTAs) and School Management Committees (SMCs). Once it is approved by district and sub-county officials, schools receives funding and

support from War Child to realize the plan in cooperation with all the other stakeholders who were involved in drafting the plan. By addressing the barriers to the provision of quality education specific to each sub-county and school, QEIP aims at improving formal education in the targeted schools, increasing enrolment and retention of children and youth in these schools as well as increasing parental and community support for education.

2.4.2. DEALS

The DEALs are a set of programs designed to help children, youths and their parents to deal with life after armed conflict. There are four DEALs: I DEAL (designed for children aged from 11 to 15 years), BIG DEAL (for adolescents between 16 and 20 years of age), SHE DEAL (for girls) and PARENT DEAL (for parents). Each DEAL program consist of modules covering life skills topics such as Identity and Assessment, Dealing with Emotions, Peer Relations, Relations with Adults, Rights and Responsibilities, Prejudice and Stigmatization, Conflict and Peace, Future, Boy-girl relations, etc.. Each module then consists of 2 to 5 sessions, during which groups of participants, under the guidance of War Child facilitators, engage in creative activities such as music, dance, art, drama, storytelling, sports and games designed to teach the participants about the topics at hand. The DEALs thus aim at improving the psychosocial wellbeing of children and youths while helping to establish a conflict-free functioning of targeted communities.

2.4.3. Vocational Skills Training

WCH offers qualified, needy and motivated youths recruited from its other programs (BIG DEAL, savings and sports groups) vocational training in a trade of their choice. The youth groups established by War Child are asked to identify the five neediest members who should receive the training. In cases where a group cannot decide on suitable candidates, or where the group deems proposed selection process non-transparent, a lottery is used to select the candidates. The nominees are then assessed by WCH staff and the LC chairmen to eliminate unchangeable drunkards, sole breadwinners, breastfeeding mothers and people recently involved in criminal activities. Of the remaining candidates on the list, the first two are nominated for enrollment in an intensive 6 month training program at the CEASOP Vocational and Technical School – a boarding institution in Lira run by Collaborative Efforts to Alleviate Social Problems (CEASOP), a local NGO. The available courses are:

- Bricklaying and Concrete Practice
- Driving and Elementary Mechanics
- Tailoring and Garment Cutting
- Catering and Hoteling
- Knitting and Weaving
- Hairdressing

All students also receive basic business skills training. After graduation, the students receive a start-up kit which, combined with the newly acquired skills, should enable them to find (self-)employment. This will in turn enable the youth to support their families and to get better integrated into their communities.

The approach implicitly assumes that the youth groups are able to select capable beneficiaries from their ranks, and that these will in turn be motivated for the training and willing to invest into future business opportunities. Furthermore, their ability to do so also depends on the quality of the outsourced training, availability of jobs in the trades learned, and the willingness of communities to trust former troublemakers (which is how many youths are generally viewed) as skilled and reliable craftsmen.

Given the complex nature of the project, we focus in the analysis on the contribution to reaching the MDG objectives on three main research questions:

- Has the project improved the quality of education in the targeted schools?
- Has it improved the psychosocial well-being of the children in the targeted communities?
- Has it helped the beneficiaries of the of the VST to improve their socio-economic situation by finding (self-)employment?

3. Millennium Development Goals

3.1. Data collection

3.1.1. Primary education components

At the time of the baseline collection, War Child Uganda worked in a total of 45 schools in Abim, Agago, Alebtong and Pader districts in Northern Uganda. Since another education-related project which is part of the Joint MFS-II Evaluation effort was implemented in Pader and Agago district, we chose to conduct this evaluation in those districts in order to maximize possible economies of scale during data collection. In more detail, War Child works in 6 schools in each Pader and Agago districts, all 12 of which are part of our sample as “Treatment” group.

Given the noticeable presence of various NGOs in Northern Uganda, it is difficult to find a group of control schools about which it could be plausibly maintained that it is not (or has not recently been) part of a similar educational project by another NGO. We therefore use 30 schools supported by three other NGOs – whose projects have a different focus – as a control group. In 10 of these schools, project implementation began between the 2012 and 2014 data collection waves, and they are included in our sample as “Control 1” group, while in the remaining 20, project implementation began before the 2012 data collection wave, and they are included in our sample as “Control 2” group.⁵⁴ In each school, we interviewed a sample of pupils, their primary caregivers, and their teachers.

In 2012 we held a baseline survey. In each school, we drew a random sample of 12 pupils stratified by class (4 from each P2, P4 and P6 classes) to be interviewed. In cases where one of the grades was not available (due to exams etc., 6 pupils from each of the two remaining classes were selected). In the summer of 2014 we conducted an end line survey. For each school, we selected all the pupils interviewed during the baseline and still enrolled at the school. We then randomly selected more pupils so as to interview at least 4 from each baseline cohort that should still be enrolled (4 from each P2, P4 and P6 classes). Next, we randomly selected enough P2 pupils to bring the total sample to 16. We increased the number of second-graders as compared to the baseline in order to reduce the relatively high noise in the responses of the youngest children. Finally, we again interviewed the he teachers of P2, P4 and P6 were interviewed where available and the primary caregiver of each of the sampled pupils was interviewed. Table 8 shows the composition of our sample used to analyze the primary education components.

Table 8: Sample overview

	Treatment		Control 1		Control 2	
	2012	2014	2012	2014	2012	2014
WCH intervention	Yes	Yes	No	No	No	No
Other NGO intervention	Yes/No ⁵⁵	Yes/No ⁵⁵	No	Yes	Yes	Yes/No ⁵⁶
Schools	12	12	10	10	20	20
Pupil-caregiver couples	144	192	120	160	240	320

In our analysis, we distinguish three kinds of outcome indicators:⁵⁷

- Long-term educational outcome indicators, on which the intervention is likely to have any impact only after several years. Both the QEIP and DEAL interventions should eventually impact these indicators.
- Short-term wellbeing-related psychosocial outcome indicators, which could be affected by the DEAL component of the intervention shortly after it has started.
- Short-term personality-related psychosocial outcome indicators, which could also potentially be affected by the DEAL component of the intervention shortly after it has started.

Depending on the kind of outcome indicator, we use different subs-samples to estimate the impact of the project:

⁵⁴ For a list of the sampled schools, see Appendix 1.

⁵⁵ Three of the schools were also supported by one of the other NGOs.

⁵⁶ In five of the schools, the intervention had finished by 2014. Since the project was designed to have long-lasting impact, we treat all the schools in group Control 2 in the same manner.

⁵⁷ For the survey instruments used to measure the various outcome indicators, see Appendices 2-19.

- To estimate long-term project impact on the educational outcome indicators, we use Control group 1 – where long-term effects of the other NGOs' projects could not have taken place yet by the time of our follow-up data collection in 2014 – as a control group, to which we compare the treatment group, excluding the 3 schools which overlap with other ongoing NGO projects.
- To estimate short-term project impact on the psychosocial outcome indicators, we combine both control groups into one, to which we compare the treatment group. This is possible because the NGO project in the control schools was not aimed at children's psychosocial wellbeing and should therefore have no effect on it.

Table 9 and Table 10 report the descriptive statistics on the long-term educational outcome indicators and the short-term psychosocial outcome indicators (related to the children's wellbeing) respectively. Table 11 summarizes additional psychosocial outcomes related to the children's personality traits, where we do not necessarily expect a direct project effect.

Table 9: Long-term educational outcome indicators

	Treatment		Control		ALL
	2012	2014	2012	2014	
Textbook	0.611 (0.490) 108	0.493 (0.502) 144	0.508 (0.502) 120	0.425 (0.496) 160	0.500 (0.500) 532
Absent	0.259 (0.440) 108	0.208 (0.408) 144	0.242 (0.430) 120	0.188 (0.392) 160	0.220 (0.415) 532
Reading	0.301 (0.335) 107	0.172 (0.283) 144	0.297 (0.368) 120	0.137 (0.233) 160	0.216 (0.310) 531
Math	0.521 (0.318) 108	0.414 (0.352) 144	0.482 (0.302) 120	0.355 (0.311) 160	0.433 (0.327) 532

Legend: mean
(std. deviation)
observations

Where

- *Textbook*: Dummy equal to 1 if the pupil has a reading textbook, 0 otherwise.
- *Absent*: Dummy equal to 1 if the pupil has been absent from school for a continuous week this school year, 0 otherwise.⁵⁸
- *Reading*: The fraction of words from a simple, short (68 words) English text the pupil was able to read within a minute.
- *Math*: Fraction of 7 simple mathematical problems which the pupil was able to solve correctly.

⁵⁸ The 2012 and 2014 levels cannot be directly compared since the two surveys were conducted at a different time of the year (November and June respectively). The changes in the levels can nonetheless be compared using a difference-in-differences approach.

Table 10: Short-term psychosocial outcome indicators – Wellbeing

	Treatment		Control		ALL
	2012	2014	2012	2014	
Esteem	0.721 (0.180) 144	0.737 (0.178) 192	0.744 (0.166) 360	0.737 (0.167) 480	0.737 (0.170) 1176
Emo. wb.	0.435 (0.210) 143	0.469 (0.178) 192	0.453 (0.189) 360	0.439 (0.201) 480	0.448 (0.195) 1175
Phys. wb.	0.504 (0.218) 143	0.526 (0.207) 192	0.492 (0.205) 360	0.484 (0.209) 480	0.496 (0.209) 1175
Fam. rel.	0.854 (0.164) 144	0.870 (0.157) 192	0.871 (0.160) 360	0.865 (0.163) 480	0.866 (0.161) 1176
Peer rel.	0.834 (0.151) 144	0.818 (0.149) 192	0.831 (0.155) 360	0.837 (0.155) 480	0.832 (0.154) 1176

Legend: mean
(std. deviation)
observations

Where

- *Esteem*: Index of self-esteem on a scale from 0 (lowest) to 1 (highest), constructed from a 4-item set of 6-point Likert-type questions.⁵⁹
- Wellbeing
 - o *Emo. wb.*: Index of emotional wellbeing on a scale from 0 (lowest) to 1 (highest), constructed from a 3-item set of 6-point Likert-type questions.⁶⁰
 - o *Phys. wb.*: Index of physical wellbeing on a scale from 0 (lowest) to 1 (highest), constructed from a 3-item set of 6-point Likert-type questions.⁶⁰
 - o *Fam. rel.*: Index of quality of family relations on a scale from 0 (worst) to 1 (best), constructed from a 3-item set of 6-point Likert-type questions.⁶⁰
 - o *Peer rel.*: Index of quality of peer relations on a scale from 0 (worst) to 1 (best), constructed from a 3-item set of 6-point Likert-type questions.⁶⁰

⁵⁹ Adapted from Rosenberg after several lab and field tests to ensure cultural and contextual validity. Rosenberg, M. (1965). *Society and the Adolescent Self-Image*. Princeton: Princeton University Press.

⁶⁰ Adapted from Ravens-Sieberer et al. after several lab and field tests to ensure cultural and contextual validity. Ravens-Sieberer, U., A. Gosh, T. Abel, P. Auquier, B.-M. Bellach, J. Bruil, W. Dür, M. Power, and L. Rajmil (2001). "Quality of Life in Children and Adolescents: A European Public Health Perspective," *Sozial- und Präventivmedizin*, 46: 294-302.

Table 11: Short-term psychosocial outcome indicators – Personality

	Treatment		Control		ALL
	2012	2014	2012	2014	
Intel.	0.686 (0.184) 143	0.704 (0.166) 192	0.712 (0.170) 359	0.705 (0.178) 480	0.705 (0.174) 1174
Consc.	0.795 (0.187) 141	0.781 (0.204) 192	0.792 (0.198) 359	0.797 (0.191) 480	0.793 (0.194) 1172
Extra.	0.725 (0.170) 143	0.736 (0.168) 192	0.747 (0.153) 360	0.742 (0.154) 480	0.740 (0.158) 1175
Agree	0.771 (0.154) 143	0.759 (0.158) 192	0.758 (0.157) 359	0.763 (0.155) 480	0.762 (0.156) 1174
Emo. st.	0.606 (0.176) 142	0.590 (0.172) 192	0.594 (0.180) 360	0.600 (0.181) 480	0.597 (0.178) 1174
Locus	0.852 (0.151) 143	0.842 (0.138) 192	0.839 (0.134) 359	0.843 (0.140) 480	0.843 (0.139) 1174

Legend: mean
(std. deviation)
observations

In the table above we use five big personality traits:

- *Intel.*: Index of level of intellect on a scale from 0 (lowest level observed in the sample) to 1 (highest level observed in the sample),⁶¹ constructed from a 6-item set of 6-point Likert-type questions.⁶²
- *Consc.*: Index of level of conscientiousness on a scale from 0 (lowest level observed in the sample) to 1 (highest level observed in the sample),⁶¹ constructed from a 6-item set of 6-point Likert-type questions.⁶²
- *Extra.*: Index of level of extraversion on a scale from 0 (lowest level observed in the sample) to 1 (highest level observed in the sample),⁶¹ constructed from a 6-item set of 6-point Likert-type questions.⁶²
- *Agree*: Index of level of agreeableness on a scale from 0 (lowest level observed in the sample) to 1 (highest level observed in the sample),⁶¹ constructed from a 6-item set of 6-point Likert-type questions.⁶²
- *Emo. st.*: Emotional stability on a scale from 0 (lowest level observed in the sample) to 1 (highest level observed in the sample),⁶¹ constructed from a 6-item set of 6-point Likert-type questions.⁶²
- *Locus*: Locus of control on a scale from 0 (lowest level observed in the sample) to 1 (highest level observed in the sample),⁶¹ constructed from a 6-item set of yes/no questions.⁶³

⁶¹ The values can thus be compared within the sample, but should not be interpreted as an indication of an overall level of the trait.

⁶² Adapted from the International Personality Item Pool to follow Goldberg after several lab and field tests to ensure cultural and contextual validity.

Goldberg, L. "The Development of Markers for the Big-Five Factor Structure," *Psychological Assessment*, 4(1): 26-42.

⁶³ Adapted from Levenson after several lab and field tests to ensure cultural and contextual validity.

Levenson, H. "Differentiating among Internality, Powerful Others, and Chance." In H. m. Lefcourt (Ed.), *Research with the Locus of Control Construct*, Vol. 1, p. 14-63. New York, Academic Press.

3.1.2. VST component

For the VST component a total of 150 youths had participated in the training by 2014. Of those, WCH had contact details for 134 graduates. We attempted to interview all of them, but only 99 were available for interview. We collected data on economic and demographic issues.

- *Age*: age in years
- *Female*: Dummy equal to 1 if female, 0 if male
- *Wealth*: Index on a scale of 0 to 1 constructed from yes/no to questions about possession of common assets
- *Employed*: Dummy equal to 1 if employed, 0 if unemployed

Table 12 gives a representation of our sample, while Table 13 reports the descriptive statistics on the data gathered.

Table 12: Sample overview

Class Year	Student population	Contacts available	Final sample
2012	50	43	33
2013	100	91	66
Total	150	134	99

Table 13: Descriptive statistics

	At enrollment	2014
Age	22.4 (4.1) 96	23.7 (4.1) 96
Female	0.333 (0.474) 99	
Years of education		8.95 (2.00) 41
Wealth	0.598 (0.272) 99	0.627 (0.262) 99
Employed	0.414 (0.495) 99	0.879 (0.328) 99

Legend: mean
 (standard deviation)
 Observations

3.2. **Analyses and results**

3.2.1. Primary education components

We estimate long-term educational effects using a difference-in-differences (DID) approach as well as difference-in-differences with kernel propensity score matching (DID-PSM). Although the WCH intervention was already underway by the time of the first data collection wave, we consider the WCH-supported schools untreated in 2012 as the project could not have yet affected the long-term education outcome indicators. Indeed, there is no difference between the 2012 education outcomes in these schools and those in control group 1, which were receiving no NGO support at the time (see Appendix 21). We compare the changes in educational outcomes in these schools (excluding those which overlap with control group 2, where a simultaneous project aimed at improving the same educational outcomes was under way) to those in control group 1. Schools in control group 1 received no NGO support in 2012. Another project aimed at improving educational outcomes did start there in 2013, but the long-term effects of this project could not yet have been felt in 2014. We therefore consider control group 1 untreated throughout the time of this study.

Since the WCH project started before we were contracted to conduct this evaluation, and since it did not expand during the course of the evaluation, it was impossible to collect true baseline data for short-term psychosocial outcome indicators. We are therefore limited to estimating a between-subject difference (BSD) or average effects of the intention to treat using kernel-based propensity score matching (PSM) on the 2012 cross-section of data. The results from these estimations should of course be interpreted with caution as the method cannot account for initial outcome levels.

Since the other NGO programs did not target pupils' psychosocial wellbeing, we can utilize the whole width of our sample. We use data from all 12 WCH-supported schools in the treatment group, and we combine control groups 1 and 2 into one control group. We additionally estimate medium-term trends of the short-term psychosocial outcomes employing DID and DID-PSM techniques.

3.2.1.1. Research question 1: Provide the results; include sensitivity analyses; succinctly describe the major results.

Table 14 summarizes the estimated long-term project effects on educational outcome indicators from DID and DID-PSM approaches, none of which are statistically significant from zero. Table 15 summarizes the estimated project effects on the short-term psychosocial outcomes related to the children's wellbeing, as well as the medium-term trends of these outcomes in the treated areas. Finally, Table 16 summarizes the estimated project effects on – and the medium-term trends of – additional psychosocial outcomes related to the children's personality.

Table 14: Long-term project effects on educational outcomes

Indicator	DID	DID-PSM
Textbook	-0.198 (0.277)	-0.041 (0.098)
Absent	0.018 (0.241)	0.015 (0.074)
Reading	-0.057 (0.071)	-0.009 (0.045)
Math	-0.014 (0.059)	-0.013 (0.058)

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Probit/tobit marginal effects reported for DID, linear probability coefficients reported for DID-PSM.

Standard errors clustered at the school level in parentheses.

Full estimation results are reported in Appendix 23.

Table 15: Short-term project effects on wellbeing-related psychosocial outcomes

Indicator	Short-term effects		Medium-term trends	
	BSD	PSM	DID	DID-PSM
Esteem	-0.018 (0.013)	-0.020 (0.017)	0.019 (0.012)	0.001 (0.016)
Emo. wb.	-0.017 (0.020)	-0.018 (0.021)	0.037 (0.034)	0.033 (0.039)
Phys. wb.	0.019 (0.024)	0.018 (0.022)	0.023 (0.032)	0.018 (0.028)
Fam. rel.	-0.012 (0.014)	-0.012 (0.017)	0.018 (0.023)	0.017 (0.025)
Peer rel.	0.008 (0.019)	0.004 (0.015)	-0.032 (0.025)	-0.031 (0.026)

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses.

Full estimation results are reported in Appendix 24, Appendix 25, Appendix 26, Appendix 27 and Appendix 28.

Table 16: Short-term project effects on personality-related psychosocial outcomes

Indicator	Short-term effects		Medium-term trends	
	BSD	PSM	DID	DID-PSM
Intel.	-0.025* (0.015)	-0.028* (0.019)	0.020 (0.025)	0.014 (0.027)
Consc.	0.004 (0.018)	-0.003 (0.019)	-0.031 (0.020)	-0.030 (0.025)
Extra.	-0.009 (0.015)	-0.013 (0.017)	0.014 (0.022)	0.008 (0.022)
Agree	0.013 (0.018)	0.013 (0.015)	-0.019 (0.029)	-0.017 (0.028)
Emo. st.	0.009 (0.010)	0.011 (0.017)	-0.025 (0.016)	-0.018 (0.020)
Locus	0.025 (0.022)	0.014 (0.015)	-0.028* (0.016)	-0.015 (0.014)

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses.

Full estimation results are reported in Appendix 29, Appendix 30, Appendix 31, Appendix 32, Appendix 33 and Appendix 34.

We detect no impact on any of the main outcome indicators, i.e. the educational and the wellbeing-related ones. We do detect some changes in the additional personality-related indicators, with children in schools where the project is active showing somewhat lower levels of intellect (openness) than their counterparts in the control schools. In the medium term, these levels did not change significantly differently than those of children in the control schools. We detect no short- or medium-term significant impact of the project on the remaining Big 5 factors. However, there is some indication that the intervention leads to a slight shift of the locus of control from internal to external in the medium-term.

The results so far are summarized in Table 17 which gives an overview of the different effects over the various outcome indicators. We find no significant effect of the project on long-term educational outcomes. Similarly, we find no significant effect of project impact on most short-term psychosocial outcomes. The two exceptions are intellect (openness) where we consistently find a negative short-term effect with no medium-term improvement, and locus of control which possibly decreased in the treated areas. However, the evidence cannot be considered conclusive as the short-term effect estimation does not control for initial levels, and the medium-term effect is statistically insignificant in the DID-PSM estimation.

Table 17: Impact overview

Outcome indicator	Short-term effect	Medium-term trend	Long-term effect
Textbook			0
Absent			0
Reading			0
Math			0
Esteem	0	0	
Emo. wb.	0	0	
Phys. wb.	0	0	
Fam. rel.	0	0	
Peer rel.	0	0	
Intel.	—	0	
Consc.	0	0	
Extra.	0	0	
Agree	0	0	
Emo. st.	0	0	
Locus	0	—	
Legend:	++ Conclusively positive effect / increasing trend	(all estimations yield a significantly positive result)	
	+ Likely positive effect / increasing trend	(some estimations yield a significantly positive result)	
	0 No effect / stable trend detected	(no significant results)	
	– Likely negative effect / decreasing trend	(some estimations yield a significantly negative result)	
	— Conclusively negative effect / decreasing trend	(all estimations yield a significantly negative result)	

The fact that we find no statistically significant project effects on many of the outcome indicators could in theory be due to an insufficient sample size and a consequent low power of our estimations. However, our sample was as large as budget and time considerations as well as project specifics allowed, so increasing the sample size based on ex-ante power analysis would not have been possible. Conducting an retrospective power analysis to compute the minimum detectable effect sizes (and thus to determine whether statistically insignificant results reflect no actual deference between the treatment and control groups or just a low-powered estimation) is a controversial issue,⁶⁴ often considered fundamentally flawed.⁶⁵ The main reason is that it is immediately obvious that as the significance level increases, retrospective power decreases. Hence in case there is a significant effect, the power will be high, while the power will by definition be low if there is no significant effect. This implies that if we find a significant effect, a power analysis becomes redundant for apparently the power of the test is big enough. It also implies that if we do not find a significant effect the power is apparently too low to pick up the observed effect size. A similar reasoning holds for the reverse power analyses: if the impact is insignificant apparently the sample is too small to pick up the possible effect. Additional information that can be obtained by conducting the reverse power analyses is minor. Retrospective power analyses, also in the form of reverse power analyses suffer from the “power approach paradox.”⁶⁵ Considering the fundamental critiques of retrospective analyses, we do not report and power calculations or minimum detectable effect sizes.

3.2.1.2. Research question 2: Did the project reach its objectives? Can the results be attributed to the project? If not, why not? Did other factors play a role?

Three conclusions can be drawn from the results presented above regarding reaching the projects objective. First, we detect no long-term impact of the project on the four observed educational outcome indicators. Second, we find no short- or medium-term impact of the project on the 5 observed well-being-related psychosocial outcome indicators. Third, we find suggestive evidence of negative project impact on 2 of the 6 additional personality-related psychosocial outcome indicators.

We did our utmost to attribute any detected impact to the project and to rule out the effects of other factors on the results by controlling for a wide range of potential confounding factors (see appendices A2-A15). Some of these factors do indeed seem to significantly affect the outcome indicators, as is summarized in Table 18 and Table 19.

Table 18: Other factors impacting educational outcomes

	Female	ASI	Literacy caregiver	HH size	IQ
Textbook	–	0	0	0	
Absent	+	0	0	0	
Reading	0	0	0		0
Math	–	0	0		+
Legend:	++	Conclusively positive effect (all estimations yield a significantly positive result)			
	+	Likely positive effect (some estimations yield a significantly positive result)			
	0	No effect detected (no significant results)			
	–	Likely negative effect (some estimations yield a significantly negative result)			
	---	Conclusively negative effect (all estimations yield a significantly negative result)			

⁶⁴ Thomas, L. (1997). “Retrospective Power Analysis,” *Conservation Biology* 11(1): 276-280.

⁶⁵ Hoenig, J. M. , and D. M. Heisey (2001). “The Abuse of Power: The Pervasive Fallacy of Power Calculations for Data Analysis,” *The American Statistician* (55): 1-6, 19-24.

Table 19: Other factors impacting psychosocial outcomes

	Age	Female	IQ	ASI	Parent	Intel. caregiver	Consc. caregiver	Extra. caregiver	Agree caregiver	Emo. st. caregiver	Esteem caregiver	Locus caregiver	War exposure caregiver	Trauma caregiver
Esteem	+	-	++	0	0	0	+	+	0	0	++	--	0	0
Emo. wb.	++	+	++	++	0	0	0	0	0	--	0	+	0	+
Phys. wb.	0	++	-	0	0	--	0	0	+	--	0	0	++	+
Fam. rel.	--	0	+	0	+	0	++	0	0	0	+	-	-	0
Peer rel.	0	0	++	--	0	+	++	+	0	0	0	0	-	0
Intel.	0	0	++	-	0	++	0	-	0	0	++	0	++	-
Consc.	++	0	-	--	-	0	++	0	0	0	0	0	0	++
Extra.	0	0	++	--	+	0	0	0	0	0	0	0	0	0
Agree	++	0	+	0	0	0	0	++	++	-	0	0	0	++
Emo.st.	0	0	0	0	+	-	0	-	0	++	+	--	-	-
Locus	+	0	+	0	0	--	0	++	0	0	++	++	0	0
Legend:	++	Conclusively positive effect		(all estimations yield a significantly positive result)										
	+	Likely positive effect		(some estimations yield a significantly positive result)										
	0	No effect detected		(no significant results)										
	-	Likely negative effect		(some estimations yield a significantly negative result)										
	--	Conclusively negative effect		(all estimations yield a significantly negative result)										

3.2.1.3. Research question 3: How relevant are the results?

On the macro level, the United Nations' Millennium Development Goals (MDGs) seek to "[e]nsure that by 2015, children everywhere, boys and girls alike will be able to complete a full course of primary schooling." Progress towards this goal is typically measured by the three targets: the net enrollment ratio in primary education; the proportion of children who complete the primary school cycle; the literacy rate of 15-24 year olds. In addition, an MDG for gender parity is measured by the ratio of female to male enrollment in the primary and secondary school cycles. The World Bank, among others, has favored the primary completion rate as the indicator that best reflects the MDG education goal that children "complete a full course of primary schooling." By this indicator, the world has made substantial progress. The primary completion rate in low-income countries increased from 66 to 74 percent between 1991 and 2004, with growth in all of the poorer regions: Latin America and the Caribbean (86 to 97 percent); Middle East and North Africa (78 to 88 percent); South Asia (73 to 82 percent); and Sub-Saharan Africa (51 to 62 percent). Yet, according to a number of studies the rapid expansion deteriorates quality to the extent that low retention and high drop-out rates prevent universal completion from being achieved.^{66,67}

More on the national level, educational improvements are one of the key points addressed in the National Development Plan written by the government of Uganda. In more detail, the project contributes to first Increased access and equity of primary education for girls and boys. Second, Improve quality and relevance of primary education for girls and boys. Third, Improve effectiveness and efficiency of primary education. Though, research question 2 already indicated that there is only a weak contribution of this project.

The project complements the strategies followed by the Ugandan government by expanding and improving primary school infrastructural facilities, enhance instructional quality to increase pupils' achievement of literacy, numeracy, and basic life skills, and to Ensure that schools manage instructional programs, staff and other resources and become accountable to their communities.

3.2.1.4. Research question 4: How efficient was the project?

A detailed description of the project costs is can be found in Appendix 35. However, due to the large number of interventions aiming at beneficiary groups of different sizes, it is hard to measure the financial efficiency of the project.

⁶⁶ Lewin, K. M. (2007). "Improving access, Equity and Transitions in Education: Creating a Research Agenda." Project report. Falmer: Consortium for Research on Educational Access, Transitions and Equity (CREATE).

⁶⁷ Lewin, K. M. (2008). "Strategies for Sustainable Financing of Secondary Education in Sub-Saharan Africa." World Bank Working Paper No. 136. Washington, D.C.: The World Bank.

3.2.2. VST component

The beneficiaries of the project are of quite a specific demographic category: Disadvantaged, troublesome youths from one of the most remote and least developed parts of Uganda who have nonetheless completed at least primary education, and were capable of undergoing vocational skills training. This makes it difficult to identify a sufficiently similar control group. None is therefore used.

Given the small total number of beneficiaries and the consequently small sample, we rely mainly on qualitative data collected through semi-structured interviews. The nature of the data and the sample size predicate the analytical approach which involves descriptive and t-test statistics of coded qualitative data combined with simple socioeconomic quantitative indicators and illustrated with before and after narratives.

It is possible that graduates who have had a positive experience with the program are more likely to agree to be interviewed than those with a less positive experience. This could also lead to an overestimation of impact.

3.2.2.1. Research question 1: Provide the results; include sensitivity analyses; succinctly describe the major results.

In Table 20 we report our main findings regarding the VST analysis. We find that the project had no detectable impact on the beneficiaries wealth (measured in terms of possession of common assets). Given the roughness of our measure and the small sample size, this is not unexpected. The project had large and statistically very significant impact on the employment level of interviewed beneficiaries, which more than doubled. While, due to the lack of a control group, we cannot rule out that the graduates would have found a job anyway, most of the respondents who gained employment following graduations do assign some role in this to the project.

Table 20: Project effects

	At enrollment	2014	Difference
Wealth	0.598 (0.272)	0.627 (0.262)	0.029 (0.038)
Employed	0.414 (0.495)	0.879 (0.328)	0.465 ^{***} (0.069)

^{*} $p < 0.10$, ^{**} $p < 0.05$, ^{***} $p < 0.01$
Standard errors in parentheses

In order to infer the same about the whole beneficiary population, we have to make several assumptions:

1. The sample of beneficiaries whose contact details were available is representative of the whole beneficiary population in terms of pre- and post-training levels of employment.
2. The sample of interviewed beneficiaries is representative of the sample whose contact details were available in terms of employment level before training.
3. The sample of interviewed beneficiaries is representative of the sample whose contact details were available in terms of post-training employment.

We make several simulations in which we gradually relax these assumptions as summarized in Table 21 below along with the associated sample size.

Table 21: Effect simulation overview

	Assumption 1	Assumption 2	Assumption 3	Sample size
Scenario 0	YES	YES	YES	99
Scenario 1	YES	YES	NO	134
Scenario 2	YES	NO	NO	134
Scenario 3	NO	YES	NO	150
Scenario 4	NO	NO	NO	150

It can be expected that graduates who have had a positive experience with the program were more likely to agree to be interviewed than those with a negative experience. It is therefore quite possible that Assumption 3 does not hold, and that post-training employment levels are lower in the whole population

than in our sample. In Scenarios 1-4, we instead assume that none of the beneficiaries whose contact details were available but whom we could not interview got a new job after their training.

In Scenarios 2 and 4, we relax Assumption 2 so as to find the lowest level of pre-training employment which would render the project impact statistically insignificant. While it is quite possible that Assumption 2 does not hold, there is little reason to believe that the pre-training levels of employment should be lower in our sample than in the whole population.

Finally, we relax assumption 1 in Scenarios 3 and 4 by assuming the other extreme, i.e. that there was no gain in employment amongst the beneficiaries whose contact details were unavailable.

Table 22: Effect simulation results

	At enrollment	2014	Difference
Scenario 0	0.414 (0.495)	0.879 (0.328)	0.465*** (0.069)
Scenario 1	0.410 (0.494)	0.649 (0.479)	0.239*** (0.059)
Scenario 2	0.552 (0.499)	0.649 (0.479)	0.097 (0.060)
Scenario 3	0.413 (0.494)	0.580 (0.495)	0.167*** (0.057)
Scenario 4	0.487 (0.501)	0.580 (0.495)	0.093 (0.058)

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$
Standard errors in parentheses

Assuming similar pre-training levels of employment in the sample and the beneficiary population, but no employment increase outside of our sample, the project would still lead to a 24% point increase in employment, significant at the 1% level. Pre-training employment levels would have to be at least 8% points lower in our sample as compared to the whole population in order for the before-after difference to become statistically insignificant. Such extreme scenarios are however just as unlikely as perfect representativeness of the sample. Their results should be interpreted as a lower bound similarly to the results of Scenario 1 being interpreted as an upper bound of the project's impact on employment. While the exact magnitude of the impact of the project on the employment status of the beneficiaries is impossible to estimate, it is likely to be significant both statistically and in terms of its magnitude.

3.2.2.2. Research question 2: Did the project reach its objectives? Can the results be attributed to the project? If not, why not? Did other factors play a role?

By more than doubling the employment rate among its graduates, the project seems to be on a good way to reaching its objective of increasing the beneficiaries' income by giving them vocational skills and thus enabling them to find gainful employment. This has not, however, been reflected in their wealth in any statistically significant way. While the lack of detectable impact on wealth may be partially due to the relatively rough outcome indicator used, it is also likely to be caused by several shortcomings of the project itself.

3.2.2.2.1. Quality of training

The training subcontracted by WCH from CAESOP, its service provider, was of very doubtful quality. The courses were, for the most part, not intensive. There was a lot of absenteeism from the side of the teachers, and when at the school, they lounged in the shade or in their staff room most of the time while the students either practiced on their own or did nothing. "If we were to open these engines, we just go and plead to a teacher. That teacher who was supposed to help us in opening and removing and dismantling the engine, was not there. There was just this protocol teacher for driving. We would go there and plead for. They were not committed. That teacher personally was not being paid." Another respondent added, "The school itself was not so good. The problem in the school was just teachers. Teachers could not come in time. Sometimes they just miss lessons completely. But once they come, those ones who are sharp will catch up, those ones who are dull and need things repeated will fail."

The materials needed in the courses were often unavailable, making it impossible to practice, and the equipment was old and did not function properly. The car needed for driving lessons, for example, did not run in 2012 due to both lack of fuel and a variety of mechanical defects. The lack of computers and electrical power was not a problem only because the school decided that there was insufficient demand on the side of the students to justify offering an IT course.

The class of 2012 did not receive business skills training as no teacher was available, though the various trade teachers did try to relay their own business experience to them. Furthermore, there seemed to be no comprehensive examinations.

3.2.2.2.2. Organization

Besides issues with the quality of the training, there were also problems in communication between the students, WCH staff and the school. The responsibility for the students fell on the WCH field offices from the districts of their origin, while the training took place in another district (with a WCH field office of its own). This dichotomy made it hard for the students to have their questions and complaints heard. "The school we were taken to was not good in terms of accommodation, administration, food, teachers were not teaching every day," remembered one graduate. Another respondent claimed that the students had to fight for food and that teachers would come at 9 or 10. When they complained to the management, they were told to keep quiet.

3.2.2.2.3. Post-training support

Each of the graduates were supposed to receive a Start-up Kit to take back with them after graduating. Each course had a different set of tools. For example those from the Tailoring and Garment Cutting were supposed to receive a sewing machine and other tools such as a pair of scissors and some thread and needles, and the Driving and Elementary Mechanics were supposed to receive a toolbox with a set of tools to allow them to do basic repairs. Table 23 shows that most of the graduates were not pleased with what they received in the Start-up Kits.

Table 23: Start-up Kits

The kit contained enough to start working	36%
The kit did not contain enough to start working	30%
The kit was incomplete	27%
No kit received	7%

Less than half of the respondents were satisfied with what they received in the Start-up Kits. The majority spoke of things missing or the toolkit simply not being enough to start working. Seven respondents did not even receive anything at all after they graduated, "They promised they would bring our materials later. So since we came back I have not seen anything."

One respondent from the Driving and Elementary Mechanics course who claimed tools were missing explained, "They even told us. They even indicated some missing tools. They promised to bring but they didn't." When asked who promised, he responded, "The office, War Child." A respondent from the group who felt the tools were not enough said, "By the time War Child was giving us our tools, they was giving us advice how to start our work, how to be in a group. Like us who went to catering we were eight. Then they was giving us advice if we feel like sharing all these things and you open your hotel and you start your business. It seems here that respondents were advised to share their toolkits to make a complete and perhaps more useful set. Other respondents, like one who took the Carpentry and Joinery, course explained that they received tools but things like a smoothening plane were not given which make the difference in terms of quality for the final product. Others added their concerns about the quality of the kits, "They have given us the weak ones, the ones that get broken. Ok I can say the duplicate ones, not the original and then some of the tools were missing."

The respondents who claimed that they did not receive any Start-up Kit from War Child gave different reasons for this. For example one respondent explains: "There were some ghost students being taken from Abim district as a whole [...] our supervisor was a Langi, his tribe was Langi, he brought his relative for that training. When we came back there was now a complaint. That complaint, I aired it out. These people went, now when they called us now to get the tools, they refused to give me my tools, that there when I was in the school I was someone who cannot keep any secret and from that I was disturbing

people; they refused to give me any tools." For other respondents it is as if they were simply forgotten, "They promised they would bring our materials later. So since we came back I have not seen anything."

33 of the 35 respondents who felt the Kit was enough were using their skills to earn an income. Of the 7 who didn't get a Kit, 6 saw no change in their income situation or were worse off. The one exception in this group trained in bricklaying and was able to start working on construction sites without the tools.

Some people did not receive certificates and were finding it hard to find jobs because of this. Unfortunately, since we did not know this was a common issue, we did not directly ask the respondents whether they received a certificate or not. However, 22 respondents explicitly stated that they did not receive certificates. A respondent explains his situation, "We stayed about one whole month again, then they called us for the certificates. We went, us students we went with them there. They received their certificates, I waited as if it is there, but nothing. So I went to Mali [supervisor] and complained, the he told me it's the War Child Lira who provided all those certificates and the kits as well. And then he told me you go and wait, in January you come and receive yours as well. I went back, there is nothing. And no one who can help me. So I've just been now stranded."

Similarly, the students of Driving and Elementary Mechanics were not given an opportunity to obtain a driving permit. One of them for instance complained: "At first they had promised us they are going to give us driving permits. After then they only trained us, they gave us tools and certificates, but our permit was not given."

3.2.2.3. Research question 3: How relevant are the results?

Besides having the (so far unfulfilled) potential of contribution to MDG1 (eradication of poverty and hunger) by improving the socioeconomic situation of its beneficiaries, the VST component of WCH's project is also relevant in the context of Uganda's National Development Plan. In particular, the helps achieve Objective 1 of section 7.3.3, i.e. to increase access and equity of BTVET,⁶⁸ particularly through Strategy 2, i.e. improving equity in the participation of girls and needy students.

3.2.2.4. Research question 4: How efficient was the project?

A detailed description of the project costs is can be found in Appendix 35. However, due to the large number of interventions aiming at beneficiary groups of different sizes, it is hard to measure the financial efficiency of the project.

3.3. Discussion and conclusions

WCH's project under evaluation had three distinct components. QEIP, designed to improve the functioning of schools and thus the quality of education in them; DEALs, which should improve the psychosocial wellbeing of conflict-affected children; and vocational skills training (VST), through which youths are given skills meant to increase their employment prospects and thus improve their socioeconomic situation.

We find no significant improvement of educational outcomes as a result of QEIP. Two possible explanations offer themselves for this: Either this intervention component truly has no effects, or not enough time has passed since the intervention for the effects to manifest themselves. Given the time-limitation of this study, it is impossible to tell which of the two explanations is more likely.

Similarly, we find no effect of the DEALs on the psychosocial wellbeing of the children. In this case, however, reason can hardly be the short time-span of the study as the intervention should have an almost immediate impact. It is important to note here that even after extensive probing (including descriptions of possible activities), the children often did not know whether or not they had participated in any DEAL activities. The estimation of the effects of the DEAL components are thus based on an intention to treat, not on actual treatment, which may theoretically dilute the effects. However, the fact that the many of the intended beneficiaries could not tell whether they received any of the benefits speaks to the probable intensity of the treatment.

In sharp contrast to the first two components, the VST component seems to have been quite successful in achieving its goals, having helped increase the employment level of its beneficiaries in the order of tens of percentage points. Given the very low quality of the actual training (subcontracted to an external service provider), this effect could have probably been even higher, suggesting that the VST intervention has a great potential. Unfortunately, the higher employment levels did not translate into improved

⁶⁸ Business, Technical, Vocational Education and Training.

economic outcomes (proxied for by an asset index). The VST component thus achieved its self-defined goals, but its contribution to achievement of the MDGs is very limited.

The overall impact of WCH project was thus quite limited, which is reflected in the relatively low scores shown in Table 24.

Table 24: Evaluation table

Question	Score
The project was well designed	5
The project was implemented as designed	5
The project reached all its objectives	3
The observed results are attributable to the project interventions	5
The observed results are relevant to the project beneficiaries	5
The project was implemented efficiently	

4. Capacity development

4.1. Data collection and analytical approach

For putting up the baseline on capacity development for the SPO War Child Uganda Pader Office the evaluation tools are shortly explained. For the field research for the baseline and endline (follow-up assessment) studies two special Research Manuals were written.⁶⁹ The analytical approach in this technical report regards not only the contribution of CFA funding meant for the SPO's capacity to the actual development changes in the capacity of the SPO, but also to the contribution of changes in the SPO capacity to SPO outcomes (contribution analysis).

4.1.1. Background documents

For both the baseline as the endline initially on strategy, context and activities were studied and verified with concerned SPO (War Child Uganda Pader Office, and then Pader/Abim offices) and related CFA (War Child Holland with as direct implementer War Child Kampala Office).

4.1.2. Focus groups/group interviews

Focus group interviews were held with staff members of War Child Holland Head Office, War Child Kampala office and War Child Pader/Abim offices, staff and stakeholder organizations for getting data on the organizations development and its working environment. In these interviews attention was given to the organization's *Timeline* until the baseline year 2012, its *Theory of Change*, and the *Results Chain CFA - SPO - Target groups / stakeholders*. *Observation* of the SPO's office and working environment gives additional information about the SPO.

A complementary approach was followed in the fieldwork of the endline study that has taken place during the period July 2014; herein interview formats were used emphasizing *key changes and wished changes* within the SPO, as seen by interviewees from the SPO personnel, from externals and from the supporting CFA.

4.1.3. Organizational self-assessment

In the baseline as well as the endline organizational self-assessments were done with respondents of the SPO; in the endline assessment was aimed at a participation of 30% of the respondents present in the baseline assessment; for War Child Uganda this was above 33%⁷⁰; the endline workshop has taken place on 15 July 2014. The same questionnaire covering 5 Core Capabilities and connected indicators with prompting questions was used, in order to facilitate comparability between the baseline and endline outcomes.

⁶⁹ Kamphuis, E. (2012). "Evaluation Study Capacity Development of Southern Partner Organisations – Baseline – Uganda." Research Manual. Molenrij/Kampala: ETC International.

Kamphuis, E. (2014). "Evaluation Study Capacity Development of Southern Partner Organisations – Endline – Uganda." Research Manual. Molenrij/Kampala: ETC International.

⁷⁰ The workshop was attended by 10 War Child staff i.e.: 1 Country Director, 1 Project Coordinator / 3 project officers from the War Child Pader Office, 1 Field Location Manager / 1 Project Coordinator from Lira Office, 1 Field Location Manager / 1 project coordinator from Gulu Office, and 1 Project coordinator from Abim Office; 7 out of 10 persons did not attend the baseline workshop.

Outcomes of the self-assessment in the baseline were related to all elements of *Focus groups/group interviews* for making up a *Synthesis scoring form* that is the basis for the evaluation of each core capability and its underlying aspects. After processing the *Synthesis scoring form* a debriefing feedback meeting with War Child Uganda has taken place on 28 September 2012 to discuss determining factors for the given scores. After this debriefing additional *self-reporting* was requested from the respondents; they were asked to issue their remarks/comments on the synthesis scoring form. Final scoring and related explanations were given by the evaluators and peer reviewed.

Outcomes in the endline were related to interview findings (with War Child staff, externals, and War Child Holland). Then endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, reflecting changes in core capabilities and their underlying aspects over the period June 2012- June 2014, were qualified in terms of 'improved', 'stable', or 'worsened'. These qualifications were generated by an Excel tool that was specially developed for this purpose; the tool generated endline scores per core capability and their underlying aspects, based on multiple choice answers on 64 questions; the other 18 questions regarded open requests for additional comments per different aspect/core capability and did not influence the scoring. The tool thus firstly determined endline scores per core capability and their underlying aspects and these scores were then related with the scores of the baseline study for getting the change qualifications⁷¹. The change qualifications of the core capabilities and their underlying aspects were linked with an inventory of determining factors for these changes. This was done in workshop sessions and interviews; for the War Child Uganda Pader/Abim Offices change qualifications, determining factors and open comments provided in the questionnaire were captured in a workshop report and interview reports. The workshop report was reviewed in a special feedback meeting with War Child Uganda on 28 August 2014; subsequently the workshop report was peer reviewed, and served as input for the evaluator's final assessment.

4.1.4. Contribution analysis

The organizational self/assessment and interviews/core group discussions were carried out in service of the contribution analysis and related triangulation on 2 aspects:

- the contribution of CFA funding meant for the SPO's capacity to the actual development changes in the capacity of the SPO
- the contribution of changes in the SPO capacity to SPO outcomes

In the analysis of the contribution in SPO capacity changes to SPO outcomes was focused:

- on changes in the Core capabilities To act and commit and To Adapt and self-renew, and
- on changes in one or maximally two SPO outcome areas.

CFA's and SPO's have intentions with their policies and operations thereof: i.e. these organizations depart both from their Theory of Change (ToC), which postulates intended *development pathways* for realizing their outcomes. In principle each ToC encompasses the aspects of: Program/ project/initiative, Context, Ideas/theories, Process/sequence of change, and Reflection and decision making⁷². These aspects will shortly addressed insofar they are relevant in the explanation of the indented outcomes realization of the CFA and SPO.

In the analysis of the factors behind observed changes in War Child Uganda Pader/Abim Offices' outcome realization, one needs to depart from a notion of the sequence as is displayed in the Figure 1.

⁷¹ The scores of the baseline study were in 2012 not made up by means of this tool; the final scores were then determined by putting up the Synthesis scores. For consistency sake the original 2012 scores were reviewed with the Excel tool, in order to get a comparison between the baseline and endline scores on the same basis; in a view cases baseline scores had to be adapted; these adaptations were in general marginal. Through the review of the baseline scores with the Excel tool, both baseline and endline scores are given with one decimal.

⁷² Vogel, I. (2012). "Review of the Use of 'Theory of Change' in International Development." Review report. London: Department for International Development (DFID), p. 14-15, 28.

Figure 1: Results Chain scheme with Outcome Areas

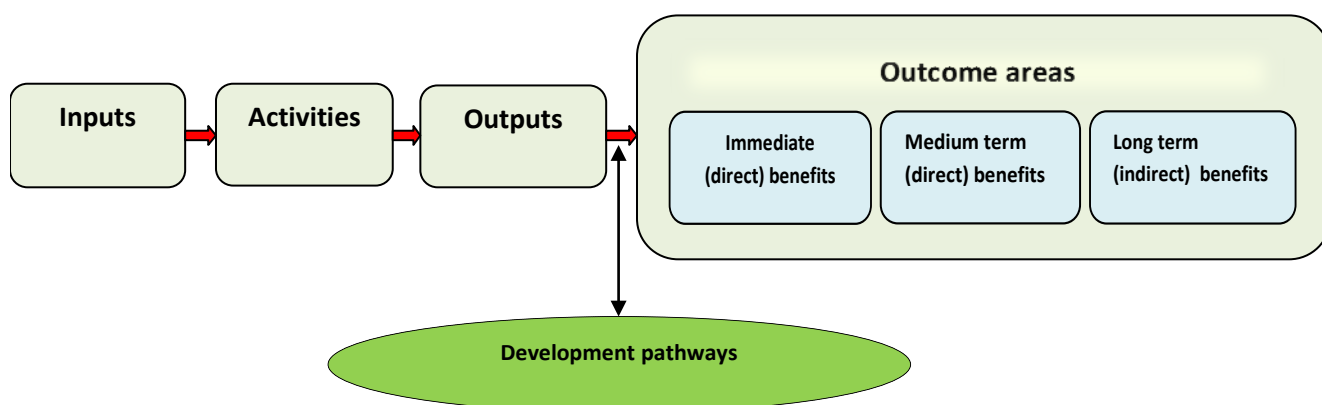


Figure 1 shows that in case of the MFS2 evaluation CFA's and SPO's both produce *Outputs* for 'their' beneficiaries (i.e.: technical trainings, health insurance, advisory/counselling services, extension services, educational services) by carrying out *Activities* (i.e.: organization & delivery of mentioned services, and by using *Inputs* (i.e.: own income, funding from thirds, services from others, upgrading own personnel). In the provision of a plausible explanation for changes by analyzing the contributions to observed changes, there is a main focus on the question how and what extend the *Outputs* contribute to the realization of a range of intended *Outcomes*. Additionally, *Outcomes* can be realized *Immediately* (maximally 1 year), *at Medium term* (2-3 years) or *at Longer term* (4 years and beyond), depending on what was intended. Hence answering the questions how and to what extend *Outputs* do contribute to the realization of intended *Outcomes* within different *Outcome Areas*.⁷³

As War Child's outcome areas for analysis were chosen: *War Child's Quality Education Improvement Program (QEIP)* and *Community Based Child Protection Program (CBCP)*. These outcome areas and related activities were chosen, because of War Child's main focus on education and child protection in Uganda in 2012 and 2013; until 2014 this concerned the core of War Child Holland/Kampala Office's support to War Child Uganda Pader Office.⁷⁴

4.1.5. Observation forms

Regarding War Child Uganda Pader/Abim Offices a detailed chronology of study/research activities was recorded on Observation forms. In the forms was also space for the researchers to make observations on the research process, the collected data, or the cooperation extended by War Child Uganda Pader/Abim Offices and War Child Holland/Kampala Offices as related CFA.

4.1.6. Reasons for choice of mentioned methods

Organizational assessments regard essentially interactive processes between the evaluated organization and the evaluators. Taking a baseline does not only concern the handling of measurement tools, but also the triangulation of collected findings in interviews/focus groups. The followed approach is thus a mixture of two perspectives. Firstly: the application of survey research and feedback, and secondly: the strong attention for people working in organizations that face changes. For that reason data gathering through a questionnaire and self-assessment went hand in hand.

Respecting the two perspectives simultaneously means that research techniques like Difference-in-Differences are not applicable in this assessment framework. Factors influencing organizational development are complex and multidimensional and cannot be captured in the 5C research within a

⁷³ Kamphuis, E. (2014). "Evaluation Study Capacity Development of Southern Partner Organisations – Endline – Uganda." Research Manual. Molenrij/Kampala: ETC International, p. 5-6. N.B. Instead of Process Tracing this technical report speaks of Contribution analysis as a better alternative to describe the followed type of analysis.

⁷⁴ Kamphuis, E. (2014). "Evaluation Study Capacity Development of Southern Partner Organisations – Endline – Uganda." Research Manual. Molenrij/Kampala: ETC International, p. 5-6. N.B. Instead of Process Tracing this technical report speaks of Contribution analysis as a better alternative to describe the followed type of analysis.

timeframe, geared to a more profound contribution analysis that was done in relation to the SPO War Child Uganda Pader/Abim Offices and the CFA War Child Holland/Kampala Offices.⁷⁵

Organizational assessments combine different measuring and observation methods, as mentioned above with assessment based on expertise in the area of organizational development. Difference-in-Differences and Randomized Controlled Trial (randomized assignment) for example can hardly be matched with such combination.

The choice for the mentioned methods has implications for type of evidence the endline study can generate and consequently in what terms effectiveness of interventions can be qualified. Table 25 gives an overview of the 4 possible levels of evidence, the related parameters of evidence / types of research, and hence the qualifications of the effectiveness of interventions.⁷⁶

Table 25: Evidence ladder

Levels of evidence	Parameter of evidence	Types of research	Effectiveness of interventions
4. Causal	As in 1, 2, and 3, but there is now sound and substantial evidence that the outcome is caused by the intervention and/or clear evidence showing which ingredients of the intervention are responsible for the outcome.	- Randomized Control Trial - Repeated case studies (N=1 designs)	Efficacious
3. Indicative	As in 1 and 2, but it has now been demonstrated that the intervention clearly leads to the desired outcomes (e.g. goals are attained, target problems decrease, competencies increase, clients are satisfied).	- Quasi-experimental studies - Theory of Change studies - Norm referenced approaches - Benchmark studies - Client satisfaction studies - Goal attainment studies - Quality assurance studies	Functional
2. Theoretical	As in 1, but the intervention now has a plausible rationale (i.e. a program theory) to explain why it should work with whom	- Reviews - Meta-analysis - Expert knowledge studies	Plausible
1. Descriptive	The essential elements of the intervention (e.g. goals, target group, methods and activities, requirements) have been made explicit	- Descriptive studies - Observation studies - Analysis of documents - Conduct of interviews	Potential

The approach followed, including the contribution analysis, in the MFS2 evaluation regarding the Capacity development of Southern partner organizations is mainly related to the evidence level 'theoretical'. The effectiveness of the interventions can the best be qualified as 'plausible'. The types of research related to the levels of evidence 1 and 2 (Descriptive and Theoretical) corresponds with the described earlier research approach in this chapter.

The use of the 5 Core capabilities conceptual framework made it possible to compare baseline and endline scores of core capabilities and thus to reach to a certain extend the level of evidence 'indicative'. One should however realize that for the determination of the final scores and the qualifications of

⁷⁵ In 3 out of the 8 endline studies this contribution analysis was done, which is in line with the outcomes of Rongen, G. (2014). "Overview Discussion and Action Points, Workshop Joint MFS II Evaluations, Amsterdam, 26 and 27 February 2014." Contribution analysis for all 8 endline studies would require more research time and that would overstretch the budget boundaries for the capacity development research component of the Joint MFS2 Evaluations Uganda

⁷⁶ This overview is based on the various 'ladders of evidence' that are in use in health research; the overview takes the realities of developmental research into account.

capability changes, interviews, workshops, observation studies, and core group discussions were vital. Time constraints made it not possible to carry out a profound Theory of Change study or client satisfaction studies. Hence the capacity development study can the best generate plausible explanations of the effectiveness of researched interventions. It appears doubtful whether the extra contribution analysis component fully justifies an evidence level 'indicative' and a qualification of the effectiveness of the interventions as 'functional'.

4.2. Results

This chapter provides firstly a descriptive analysis of War Child Uganda Pader/Abim Offices 's capacity development by analyzing the relative changes in the scores of the five core capabilities. And secondly plausible explanations of the outcomes will be given that were the result (outcomes) of the observed changes, thereby pondering the evidence that either confirm these explanations or may overturn them.

4.2.1. Changes in War Child Uganda Pader/Abim Offices 's capacity development

In the following a descriptive analysis of the findings is given with respect to Changes in War Child Uganda Pader/Abim Offices 's capacity development that were collected during the follow-up assessment (endline study) following the approach described in the previous chapter. The endline study generated scores per core capability and their underlying aspects that are based on scores per indicator. The comparison between baseline and endline scores are here not given at indicator level, as the scores on aspects underlying the core capabilities give sufficient insight in the major changes per each core capability⁷⁷ and thus on the organization's capacity development over the period June 2012 - June 2014 (i.e. baseline scoring and endline scoring periods). Per each aspect an explanation is given on the finally assigned change qualifications, based on the change qualifications given stemming from the questionnaires used in the organizational self-assessment. If the difference between the baseline and endline scores was between -0.25 and + 0.25, the aspect change was qualified as "stable", if the difference was more than + 0.25, then the qualification was "improved", and if the difference was less than -0.25, the aspect change was qualified as "worsened". The final change qualifications, set by the evaluator, take into account what emerged in the workshops, interviews, focus group meetings and the final feedback meeting with War Child Uganda Kampala Office. The baseline and endline scores are given with one decimal to make clear how the Change qualifications stemming from the questionnaires were given. After the explanations of the change qualifications per aspect, an explanation is given on the overall change qualifications per entire core capability.

In the endline assessment 10 staff members from War Child Uganda (including the executive director participated) . Observations/comments per aspect per each core capability in *italics*. Related to the change qualifications should be noted in view of War Child's peak in performance on capacity development in 2013 and phasing out thereafter, an extra column has been added to the table, in order to get a more detailed picture of the capacity development process over the period June 2012 - June 2014; the score per June 2014 has been profoundly influenced by the phasing out process that was already started. The Score end 2013 is given in number with one decimal, as was also done in the baseline and endline scores; all scores fit in the range 1 - 10. All 2013 scores and comments are made in dialogue with War Child Uganda's management in Kampala and the offices of Pader, Abim, Lira and Gulu. The periods and years between brackets indicate when mentioned changes did take place.

⁷⁷ Detailed data at indicator level are captured in the Excel scoring tool and can be made available. In this Excel sheet can be seen how the score per each core capability and per each underlying aspect is built up.

Table 26: Capability to act and commit

Indicator	Baseline score	Score end 2013	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
1 Capability to act and commit	3.1	3.5	3.0	Stable	Stable
1a Level of effective leadership	3.0	4.0	2.8	Worsened	Improved
1b Level of realistic strategic planning	3.3	4.0	2.8	Worsened	Improved
1c Level of translation of strategy into operations	2.8	3.7	3.6	Improved	Stable
1d Level of staff capacity and motivation	3.1	3.0	3.0	Stable	Stable
1e Level of financial resource security	3.3	4.0	3.1	Stable	Stable

1a. *Improved:* Level of effective leadership was influenced by profound changes in Pader office; the Pader office has become an office operating under the field location office of Lira, after senior new leadership has been put in place in Pader Office in 2013, as also on country office level (last 6 months the then interim Country Director combined the management of the Country Office with the management of the Pader Office). As a result project coordination was well supervised and project operations improved (Q2 - 2013). In meeting the challenges to firstly make the intensive capacity development for the improvement of the Pader office's operations possible and secondly to start implementing a downscaling scenario for the Pader and Abim offices thereafter (Q1, Q2 - 2014), contradicting requirements were put on the new country director and his team of Field Location Managers. They proved to be effective in both areas, but the drastic changes that went along with the downscaling did cause mixed scores on the aspect of effective leadership; in such kind of transformation processes usually there are people in favor, but also people strongly against changes.

1b. *Improved:* Strategic plans are not put up by Pader office, but by the Country Office; Pader office field staff is increasingly involved in the strategic planning at national level, but it was primarily tasked to develop annual plans. The Country Office designed strategic plans and also started the downscaling in the Uganda program, due to War Child's Head Quarter's decision to phase out from Uganda. From then on (i.e. beginning 2014, the emphasis was on the implementation existing plan and operations; besides that the transfer existing activities to other organizations is now actively pursued, as part of the phasing out strategy. The urgent need for downscaling forced everybody in the country team to be as realistic as possible about what could be done with the staff present.

1c. *Stable:* The translation strategy into operations is part of established operation routines within the entire War Child organization and hence also in the Pader office. However: the operations are now to be implemented by lower number of staff due to the planned scaling down of the Uganda program. In this scale down War Child's QEIP activities were to go on until the end of the phasing out, whereas TVET related activities within QEIP were to be downscaled more rapidly (Q1 - 2014). Increased focus on empowerment (of school committees, or communities) was emphasized (Q1, Q2 - 2014). With the downscaling the perception of communities what War Child can deliver changed (Q4 - 2013).

1d. *Stable:* Staff capacity could stay reasonably in place for ongoing program activities, due to internal reallocation human resources; it is difficult to say whether staff motivation was affected by current situation of downscaling; most staff present in the baseline was not there anymore in 2013 (only 2 were still there); there were worries about future employment with staff who's contracts were to be ended. At the other hand there seems to be more team spirit than before and a clearer vision of where the country team should be going.

1e. *Stable:* War Child's fund raising mechanisms are on the whole still strong, but not relevant anymore for War Child Uganda as from 2014 onwards. Fund raising is still relevant for War Child Holland for projects that will help to sustain the current and past projects, as well as for emergency interventions, despite the scaling down of operations. In the fund raising strategies at the level of War Child's entire organization new and innovative orientations are sought, because fundraising is expected to become slower than planned growth; funding for charities suffers from the current economic situation.

Overall score core capability To act and commit is Stable, but at aspects level (1a and 1b) there were clear improvements, due the new management that had to deal with equipping the Pader office with the needed capacity development inputs for program delivery, and with the scaling down of the Uganda program shortly thereafter. Within the phasing out scenario clarity about everybody's tasks was reached, and based on that teaming up to do the job. However: there is feeling of uncertainty stemming from employment termination by War Child.

Table 27: Capability to adapt and self-renew

Indicator	Baseline score	Score end 2013	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
2 Capability to adapt and self-renew	3.3	3.4	2.9	Worsened	Stable
2a Level of effective application of M&E	3.2	4.0	3.0	Stable	Improved
2b Level of strategic use of M&E	3.4	4.0	2.9	Worsened	Stable
2c Level of openness to strategic learning	3.2	5.0	2.6	Worsened	Stable
2d Level of context awareness	3.3	3.3	3.1	Stable	Stable

2a. *Improved*: A lot of M&E tools were developed over the period 2012 - 2013, such as the Indicator Progress Cards (IPC), Project Administrative System (PAS), monthly & bi monthly reports formats; annual, monthly and weekly planning tools. This took place at the peak of implementation and staff capacity building in these years. A M&E Officer was recruited mainly to support the new M&E tools that were developed. Digitalization of M&E systems introduced with the use of tablets, internet & specialized software (Q1 - 2014).

2b. *Stable*: There was no need developing new tools in 2014, as all earlier developed tools were already in place, and no future strategy for Pader and Abim offices had to be developed. What needs to be improved under M&E is the structured way of applying the tools, as also the documentation of success stories. Another challenge to implement the M&E tools regards the internet connection and the capacity for the staff to quickly understand how to use the applications.

2c. *Stable*: Staff has shown openness, willingness to change into new a strategy, as well as flexibility and eagerness to learn over the period 2012 - 2013. On the exit strategy most of the national staff were not happy, but in general this did not concern strategy learning as such; this unhappiness is expressed in the workshop score (uncertainty about future employment), while the score for 2013 would have been different. There were lot of learning/review meetings between the three locations (Pader, Lira and Abim) in 2013 on the Community Based Child Protection step-by-step approach, which greatly helped all the locations to have common understanding of the approach through learning from each other. The use of research (e.g. QEIP research) to analyze project success, points for improvement, and being more open to external evaluations than four years ago, are other examples of this openness. Hence overall this aspect gets the qualification stable.

2d. *Stable*: Context awareness seen as essential for carrying out on-going activities, especially on sub-county and parish levels; context awareness is strongly embedded in all project activities; the context awareness remained over the period June 2012 - June 2014 stable.

Overall score core capability To adapt and self-renew with qualifications of improvement on aspect 2a and stable on aspects 2b, and 2c. Overall the core capability qualifies as stable, but underneath this qualification 3 contradicting ratings (for 2a, 2b, and 2c) occur. The big difference between the situation in 2012 and partially 2013, when the Pader office building came into full operation, and the situation that everybody was informed about War Child's phasing out from Uganda, attributed to these ratings.

Table 28: Capability to deliver on development objectives

Indicator	Baseline score	Score end 2013	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
3 Capability to deliver on development objectives	3.2	3.2	3.1	Stable	Stable
3a Extend to which organization delivers on planned products and services	3.2	3.2	3.1	Stable	Stable
3b Extent to which delivered products and services are relevant for target population in terms of the effect they have	3.4	4.0	3.3	Stable	Improved
3c Level of work efficiency	3.0	2.9	2.9	Stable	Improved

3a. *Stable*: There were temporary delays in implementation in Pader office (Decreasing realization set targets: less beneficiaries reached Q4 – 2013, Q1, Q2 -2014) , due to reduction of human resources of Pader Office (Q3, Q4 - 2013); This was a consequence of changing the Lira office into Field Location Office that takes care of the Pader, Abim and Gulu offices. Staff turnover in the Pader Office occurred, because Pader staff members were in search of longer job security in 2014, and the Pader office operating with a Field Location Manager. Mentioned delays could be overcome by bringing more POs to the Pader Office, whose contracts ended in June 2013 in other locations (War Child outcome monitoring Uganda 2013 shows no delays). Also intensified capacitating & refurbishing operations of staff has taken place, jointly with intensified focus on efficient use of declining availability of resources (Q2, Q3, Q4 - 2013, and Q1 - 2014); At the same time increased attention to pro-activeness with respect to target groups regarding their interests was pursued (Q3, Q4 - 2013, Q1 - 2014).

3b. *Improved*: Feedback mechanisms were in place for maintaining relevance of organization's activities, but scaling down had consequences for service delivery effects on the target audience in the second half of 2013 and later. Relevance of QEIP and CBCP remained over the whole period June 2012 - June 2014, because related approaches were developed during the program implementation, i.e. QEIP/CBCP are based on needs of the communities.

3c. *Improved*: The number of staff members in the Pader and Abim offices was reduced (less project officers in the field); this induced more efficient utilization of remaining project officers. Efficiency measuring methods are however not consequently applied (like input/output ratio or other ratio's).

Overall score core capability To deliver on development objectives gets the qualification stable; on aspects level there were clear improvements in the aspects 3b and 3c; the improvement of 3b is strong and convincing and even maintains its level in comparison with the baseline, but the improvement 3c regards a one off measures (rationalizing human resources utilization), induced by the upcoming phasing out. Still there is no consistent efficiency measuring taking place over time (i.e. over the period June 2012 - June 2014).

Table 29: Capability to relate

Indicator	Baseline score	Score end 2013	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
4 Capability to relate	3.7	3.7	3.5	Stable	Stable
4a Level of involving external parties in internal policy/strategy development	3.4	3.5	3.3	Stable	Stable
4b Level of engagement of organization in networks, alliances and collaborative efforts	4.0	4.0	3.6	Worsened	Stable
4c Extent to which organization is actively engaging with target groups	3.6	4.0	3.6	Stable	Stable
4d Level of effective relationships within the organization	3.8	3.6	3.4	Worsened	Stable

4a. *Stable:* Involvement of stakeholders in Pader & Abim is key in War Child Holland's programs/projects. This involvement and related policy remained the same, in spite of the upcoming phasing out. A lot of NGOs have ended their operations in the locations of Pader and Abim, and this is not related to the exit of War Child itself. Mentioned War Child Offices in Pader and Abim still keep in touch with the relevant stakeholders of their programs/ projects. There is no way War Child could exclude local authorities looking at the approach of War Child's interventions. The organization continues external relations with other agencies on the ground as well. Staff in Pader continues to attend the district forum meetings, does joint campaigns, such as the Global education campaign and Day of the African Child each year, including 2014.

4b. *Stable:* War Child has always been well connected to different networks/alliances for streamlining its work with different organizations, districts, and other implementing parties. The number of external parties is decreasing in Pader and Abim Districts, where Conn@ct.Now program is operating; this program will come to an end and other funding will not be available, due to phasing out. Phasing out makes dialogues with organizations needed that may take over War Child activities: in 2014 War Child is engaged in identifying potential agencies that could continue working with the established War Child, structures to ensure sustainability of the interventions, when War Child exits. Here is challenging that other organizations also exit of from operational locations (2013, 2014); nevertheless War Child started identifying potential parties operating in these locations, which meant intensifying coordination between actors in these networks (Q1, Q2 - 2014). So War Child works towards linking district structures and schools with other organizations doing similar work as War Child has been doing. War Child is however not handing over activities, since the organization will complete before the end of 2014 all activities to which it has committed itself. War Child could however support other institutions operating in the same intervention locations to facilitate sustainability in 2015 by means funding or handing over of assets. The mapping out for such NGOs/ institutions is ongoing. War Child will make developed methods, approaches and materials available for these organizations (in line with its Strategy 2015; see Chapter 3 *Profile Southern Partner Organization (SPO)*).

4c. *Stable:* Strong direct engagement with target groups is there for on-going programs (consequence of War Child's self-implementation model), and for establishing sustainable solutions for target groups after phasing out. War Child's own approach is very much geared to this direct engagement with target groups over the period June 2012 - June 2014 this engagement remained intensive (increased up to mid-2013 and then remained stable by sustaining existing contacts).

4d. *Stable:* In the course of 2013 Pader office was reorganized and new personnel was trained and other replaced; in the workshop and interviews was stated that these processes did not affect drastically internal relations.

Overall score core capability To relate gets the qualification stable. Aspects 4a, 4b and 4c reflected at the time of the baseline already high levels and these could be strongly maintained, in spite of a change in focus of related activities due to the phasing out. For aspect 4d the picture is more mixed for the evaluator; the staff claims in interviews that internal relations were not affected by the reorganization, whereas the score according to the questionnaire is lower than in the baseline.

Table 30: Capability to achieve coherence

Indicator	Baseline score	Score end 2013	Endline score	Change qualification-questionnaire	Evaluator ´s change qualification after workshops/interviews
5 Capability to achieve coherence	3.6	3.5	3.7	Stable	Improved
5a Existence of mechanisms for coherence	3.7	3.7	3.7	Stable	Stable
5b Level of coherence of various efforts of organization	3.5	2.5	3.6	Stable	Improved

5a. *Stable:* War Child's organization has sound set of internal regulations, guidelines, and instructions for a/o human resources management, M&E, procurement, and logistics; these are frequently updated and new one developed; this practice is maintained in spite of phasing out, because in other countries the organization continues operating or starts up new programs (Q1, Q2 - 214); War Child did not open new program countries, some program countries have gotten new projects.

5b. *Improved:* The level of internal coherence was low in the baseline; this was due to specific issues in Pader office; the start of the phasing-out stimulated coherence at organizational within the organization, when the internal reallocation of human resources (i.e. swapping of staff from offices with differing characters) was completed; then internal coherence appeared to be strengthened (Q1, Q2 - 2014). The change in leadership in mid-2013 also contributed to this process of regaining coherence. The reallocation of staff was done with consciousness of possible synergies; synergies between activities of different office was strongly needed, because the reallocation also meant a reduction of human resources for a same workload as before.

Overall score core capability To achieve coherence has shown overall improvement. The strongest improvement was realized in aspect 5b (synergies through reallocation), whereas aspect 5a remained solidly at a high level, and represents mainly War Child's strong internal structures, rules & regulations, jointly with their considerate application.

4.2.2. Main conclusions on capability changes War Child Pader/Abim Offices

Table 31 gives a summary at core capability level of the baseline and endline score.

Table 31: Capability overview

Core capability	Baseline	Endline	Final change qualifications
1 To act and commit	3.1	3.0	Stable
2 To adapt and self-renew	3.3	2.9	Stable
3 To deliver on development objectives	3.2	3.1	Stable
4 To relate	3.7	3.5	Stable
5 To achieve coherence	3.6	3.7	Improved

Before drawing main conclusions on the capacity changes of the War Child Pader /Abim Offices, it should be noted again that two distinct episodes were contributing to these capacity changes i.e. firstly the intensive efforts to get the capacity of Pader office at the level required for the committed program activities within Conn@ct.Now, and secondly the rapid consequences stemming from War Child's decision to phase out from Uganda per 2016. To honor these two episodes an extra column for depicting the situation end 2013 was inserted per each core capability. The scores put there were also taken into account when giving the final qualifications at core capability level.

Clear improvements at aspects level were realized under the core capabilities To act and commit, and To deliver on development objectives; to these improvements War Child's distinct orientation on these core capabilities contributed (see Chapter 3 paragraph Support Co-funding Organization (CFA) to SPO, specifically the table *War Child's targeting capacity development during the endline - Endline report measurement*). This orientation is not exclusive for War Child Holland's work in Uganda, but strongly embedded in the whole organization in with its Strategy 2015 for Capacity building (see Chapter 3 Profile of the SPO); regarding the aspect work efficiency was concluded that delays were overcome, but that efficiency measuring is not consequently applied and hence deserve attention.

The 'embedded' character of War Child's general strong orientation on internal learning and innovation is also reflected in War Child Uganda's orientation (see also the same table *War Child's targeting capacity development during the endline - Endline report measurement*). Within core capability To adapt and self-renew the aspect effective application of M&E improved; the perspective of phasing out was not having a negative influence. For the strategic learning from M&E this was more the case: in 2013 this went well, but with the perspective of phasing out future strategies became less relevant, except the

strategy for handing over approaches/methods to likewise organizations in Uganda. The core capability To relate remained firmly (i.e. at high level) stable. Core capability To achieve coherence showed improvement, because in view of the specific perspective of War Child Uganda, the organization was forced to look more quickly in synergies, while scaling down human resources.

War Child Holland has set its targets for fundraising lower than was envisaged in Strategy 2015. War Child Uganda and also their Pader/Abim offices were not deploying activities for Uganda programs; Conn@ct.Now was to be finished in accordance to the organization's set commitments. War Child's approach towards War Child Uganda Pader Office has from 2012 onwards been changed essentially in its main orientation to the Uganda program. Now the organization is oriented on its commitment to finalize the Conn@ct.Now program. This program provides funds for project implementation, for preparation and management, and for communication & awareness raising⁷⁸. Funding for capacity development is integrated in preparation and management, and as such not broken down in the Annual Accounts of the organization; most costs are related to the core capability To deliver on development objectives.

When looked at the scores at core capability level and aspects level with related explanations, there is improvement of the core capability 5, and at aspects level within core capabilities 1, 2, and 3. Within core capability 3 the efficiency question deserves attention. War Child Holland's support maintained the *same orientation*, as was envisaged in its original focus on core capabilities 1,2, and 3.

4.2.3. Plausible explanations of Ward Child Uganda Pader/Abim Offices' outcome realization

In the light of the adapted and subsequently applied research approach the effectiveness of interventions can be described in terms of a plausible explanation.⁷⁹ This report attends to two types of contributions that are described in the Results chain scheme in Fig 1 (see Chapter 4):

- the contribution of War Child Holland funding to the actual changes in War Child Uganda Pader/Abim Offices' core capabilities To act & commit and To adapt & self-renew
- the contribution of these changes in War Child Pader /Abim office's capacity to its realized outcomes in the *Outcome areas: Quality Education Improvement Program (QEIP) and Community Based Child Protection Program (CBCP)*.

These outcome areas and related activities were chosen, because of War Child's main focus on education and child protection in Uganda, which is in 2012 and 2013; until 2014 this concerned the core of War Child Holland/Kampala Office's support to War Child Uganda Pader Office.⁸⁰ Table 32 gives the relevant elements of the Theory of Change of War Child Holland and that of War Child Uganda Pader/Abim Offices that underlie the Results chain War Child Holland - War Child Uganda - Pader/Abim Offices from inputs to outcomes.

⁷⁸ WCH (2014). Annual Accounts War Child Holland 2013. Amsterdam: War Child Holland (WCH), p. 19.

⁷⁹ Or: 'the plausibly explanation of a specific outcome in a specific historical case, the identification of actors/factors that contribute to this outcome, and the assessment their relative importance', see:

Mayne, J. (2008). "Contribution Analysis: An Approach to Exploring Cause and Effect," ILAC Brief 16, p. 1.

Kamphuis, E. (2014). "Evaluation Study Capacity Development of Southern Partner Organisations – Endline – Uganda." Research Manual. Molenrij/Kampala: ETC International, p 4.

⁸⁰ Kamphuis, E. (2014). "Evaluation Study Capacity Development of Southern Partner Organisations – Endline – Uganda." Research Manual. Molenrij/Kampala: ETC International, p. 5-6.

N.B. Instead of Process Tracing this technical report speaks of Contribution analysis as a better alternative to describe the followed type of analysis.

Table 32: Overview relevant ToC elements War Child Holland - War Child Uganda Pader/ Abim Offices

Elements	War Child Holland	War Child Uganda Pader/Abim Offices
Ideas/theories on change	Safe environment for children in communities and schools	War Child's self-implementation approach, i.e. working directly with communities by building/strengthening community structures
Program/project/initiative seeking changes	Enabling Pader/Abim offices to contribute to quality education and child protection in Pader & Abim Districts	Strengthening community/school structures/setup, seeking cooperation with sub-count/parish leaders, communities and schools in Pader and Abim Districts
Process/sequence of change	MFS2 Funding of Conn@ct.Now program <u>Education (MDG 2):</u> Quality Education Improvement Program (QEIP). Implemented in primary schools for 2 years <u>Child protection (MDG 4-6):</u> Community Based Child Protection (CBCP) War Child developed/replicated/tailored QEIP and CBPC programs for Uganda ⁸¹	Services offered within War Child QEIP and CBPC strategies:: <u>QEIP:</u> Teachers development, teaching materials development, school management support, establishment Parent Teacher Associations (PTA) and School Management Committees (SMC); non-formal schooling i.e. community-based learning, e-learning supported), infrastructural support to schools; Training stakeholders in education sector in leadership/ supervision of schools; joint development school plans joint monitoring of school plan results <u>CBCP:</u> Support to community-based child protection groups / child rights groups; training of Child Protection Committees (CPC) on child protection issues /set-up complementary REFLECT circles at village level; identification children at-risk, develop community based solutions; training of community child protection at sub-county level for dealing with child protection in communities
Reflection and decision making	Periodic capacity assessments, feedback and dialogue	Increased joint decision-making with district/sub-county/parish leaders on the course of QEIP and CBCP activities. Joint concern about addressing school dropouts and child abuse. M&E on realized outputs and outcomes shared with these leaders and used for QEIP and CBCP in other sub-counties/parishes
Context	Changing policies international development funding with respect to charities	Operational environment for post conflict and rehabilitation activities improved in North Uganda, due to sustained overall stability, in spite of incidents. District and parish leaders open for working together on improvements primary education and child protection

Table 33 gives results chain gives a display of War Child Holland's inputs contributing to War Child Uganda Pader/ Abim Offices' core capabilities To act & commit and To adapt & self-renew that are instrumental in the realization its activities. The outputs that these activities produce, generate immediate (direct) outcomes and after that medium term (direct) benefits. It concerns the originally planned Rollout of the new War Child programming framework 2012 – 2013 (QEIP, CBCP, ICT, DEAL's modules). The rollout was affected by the scaling down of War Child's activities in Uganda, due to recalibrating overall policy War Child Holland Head Office. The results chain table refers to the current activities carried out by the Pader /Abim Offices; the table gives the results chain analysis carried out the with War Child Uganda Pader /Abim offices, and verified in field visits. It is focused on the outcome areas Quality Education Improvement Program (QEIP) and Community Based Child Protection Program (CBCP) in the Pader /Abim Districts.

⁸¹ Other areas like Psychosocial Support, Children Creating Change (CCC), and Building Skills Changing Futures Program (BSCF) not mentioned, because only outcome areas only concentrated on QEIP and CBCP in this report

Table 33: Results chain for War Child Uganda Pader/ Abim Offices' outcome areas: Quality Education Improvement Program (QEIP) and Community Based Child Protection Program (CBCP)

Inputs of CFA	Activities of SPO	Outputs	Outcome areas	
			Immediate (direct) benefits	Medium term (direct) benefits
<p>Finance:</p> <ul style="list-style-type: none"> - During 2012 - 2014 € 2,567,753 total project costs War Child only (no specification for capacity development) within Conn@ct.Now Program (MFS2 funding) <p>Personnel support:</p> <p>Pader:</p> <ul style="list-style-type: none"> - Re-staffing Pader office - Programmatic capacity building staff Pader office - Capacity building operations staff - ICT capacity building of staff for M&E - 2012-2013 6 Project Officers PO's in 6 Sub Counties - Downscaling: Until December 2013 6 PO's; in July 2014 3 PO's in 3 'difficult' Sub Counties all under Conn@ct.Now <p>Other support:</p> <ul style="list-style-type: none"> - Technical support in kind from District Education Office (DEO) on tutoring, inspection, and selection teachers - Support in kind from communities with materials, food, and labor - External trainers - District staff (Council speaker) <p>Abim:</p> <ul style="list-style-type: none"> - 2012-2013 6 Support Project Officers PO's in 6 Sub Counties - Downscaling: July 2014 2 PO's in 6 Sub Counties - Technical support in kind from DEO on tutoring, inspection, and selection teachers - Support in kind from communities with materials, food, and labor 	<p>Capability to act & commit:</p> <p>QEIP:</p> <ul style="list-style-type: none"> - Selection schools, 3-days trainings SMC/PTA (their roles & responsibilities, meetings with parents, teachers and pupils for inputs in yearly school plans through SWOTs per target group) - Jointly with DEO teacher trainings on school curriculum, teaching content - Procurement of school books, furniture, lighting, music instruments - Jointly with DEO development of work plans all schools in each Sub County - Focus on addressing factors behind dropouts (early marriages, low school fees, child abuse) by cooperation between DEO, police, War Child, and school - Establishment of Sub county Education Committees (SEC's) - Advocacy international educational campaigns (Global African School day, Annual Parents day, Global Education Week) <p>CBCP:</p> <ul style="list-style-type: none"> - Training Child Protection Committees (CPC's) - Training War Child staff in child protection issues - 8 steps approach to Child Protection (CP): (1) leadership mobilization per Sub County, (2) Community meetings at parish level, (3) Identification CP issues per parish, (4) Basic CP training, (5) Risk analysis ID issues, (6) pathway analysis, (7) SWOT analysis, (8) Dialogue on work plans and implementation - Community mobilization (CPC's selection and re-organization): 12 CPC's in Pader District, 24 CPC's in Abim District - 2012-2014: Linking CPC's to existing government structures (police, Child Protection Unit, Community Development Office –CDO) - Basic training on child protection for these structures - Joint development of work plans for further training on child protection - Community based sensitization on child protection for CPC's <p>Capacity to adapt & self-renew</p> <p>QEIP:</p> <ul style="list-style-type: none"> - Jointly with DEO monitoring school exams, M & E in schools, and quality control educational content - Involvement in back to school campaigns and pupils retention through using UNICEF tracking tools on school presence pupils <p>CBCP:</p> <ul style="list-style-type: none"> - Report on child protection activities (8 steps approach) <p>General:</p> <ul style="list-style-type: none"> - Improved ITC-based M&E systems 	<p>QEIP:</p> <ul style="list-style-type: none"> - Over period 2012 – 2014 QEIP outputs realized in: 24 schools in Pader 33 schools in Abim - In these schools SWOTs, joint DEO teacher trainings, procurement of school materials, and putting up school plans carried out - Dropout factors addressed in Pader and Abim Districts - SEC's active in both districts (numbers not known) - Participation in Global African School day, Annual Parents day, Global Education Week <p>CBCP:</p> <ul style="list-style-type: none"> - 30 people per parish; 12 parishes in Pader and 20 parishes in Abim - Annual child protection work plans per parish structure elaborated - QEIP reports - CBCP reports 	<p>QEIP:</p> <ul style="list-style-type: none"> - 57 SMCs established; in each school PTAs appointed - Improved earning environment for pupils - Well-equipped teachers through Teachers Deals approach - Increased enrollment and higher pupils retention (i.e. lower dropout rates) - Improved P7 examination results - In Global Education Week Abim District nationally recognized having highest enrolment and retention rates - Worries about upcoming absence War Child with respect to addressing child abuse cases <p>CBCP:</p> <ul style="list-style-type: none"> - Reduced cases of child abuse - In Abim District: Early child marriages, corporal punishment 2012 300 cases, 2013 100+ cases, Jan-Jun 2014 43 cases - Reduces report/cases to war child as CPC's handle these - Empowered and strengthened CPC's <p>General and QEIP/CBCP:</p> <ul style="list-style-type: none"> - Timely and adequate reporting - Outcome reporting MDG2 and MD G4-6 Uganda 2013 on QEIP and CBCP 	<p>QEIP:</p> <ul style="list-style-type: none"> - Phasing out War Child from Uganda means decline of Capability To Act and to Commit, where it concerns the scope of activities that can be carried out - Phasing out scenario with respect to handing over activities and to work out 'path to sustainability' not worked out in detail - DEO and schools mainly declare to take up the challenge to consolidate War Child's contributions - Herein large emphasis on responsibilities of the parents (stimulate children to go to school, contributions in cash and kind to schools, participation in school operations) <p>CBCP:</p> <ul style="list-style-type: none"> - In phasing out more reliance on CPC's; during Conn@ct.Now period CPC's grew visibly stronger and with them women's unions, clan leaders and LC1 Councils - Children's rights and leadership roles better taken care of thanks to child empowerment <p>General and QEIP/CBCP:</p> <ul style="list-style-type: none"> - Timely and adequate reporting

4.2.4. Capability Changes War Child Uganda Pader/Abim Offices

As was concluded in the previous paragraph *Main conclusions on capability changes War Child Uganda Pader/Abim Offices*, there is improvement at core capability level of core capability 5, and at aspects level within the core capabilities 1 and 2. The improvements within the core capabilities 1 and 2 were all important to facilitate the management of QEIP and CBCP activities, especially when the downscaling and merging of offices started; these improvements at aspect level of the two core capabilities of focus within the contribution analysis, made quality implementation, while firmly building on developed education and child protection strategies, still possible: overall targets for 2013 were reached (see below).

Herein were the other core capabilities, not under analysis in the results chain, supportive. Core capability To achieve coherence has shown improvement at capability level through strong strategies, combined with practical translations in implementation guidelines and M&E instructions. War Child's high level of this core capability was also based on clear vision/mission statements & internal structures, as well as and realized synergies. On aspect level of the core capability To deliver on development objectives (i.e. measuring efficiency) further working out is needed, but this did not exercise much influence on sound output realization (except for the 1st half of 2013).

Before starting scaling down, during the second half of 2013, War Child Uganda Pader/Abim Offices could build on the outputs achieved in 2012. This combined with the peak effort on the Pader/Abim offices' capacity development in 2012 and the first half of 2013, made it possible to overtake delays in implementation in QEIP and CBCP by the end of 2013. Monitored outputs were mainly in line with targets set for QEIP and CBCP, with an exception for school children reached by QEIP (18,250 instead of targeted 21,000).⁸²

4.2.5. Outputs War Child Uganda Pader/Abim Offices

The outputs, as shown in Table 7, were duly reported in detailed annual reports/reviews that War Child has made up, with the help of renewed monitoring tools i.e. Indicator Progress Cards (IPC), and M&E formats. Outputs are reported (in focus groups, interviews and reports) in terms of number of QEIP schools, school clubs, school management committees, parent teacher associations, number of beneficiaries reached, number of contracts settled with service providers, number of QEIP and CBCP related trainings were provided, and the number of communities reached with the CBPC approach. This was all done for the districts of Pader and Abim.

The interview with the District Education Office Pader District (DEO) clarified the following issues.

Several organizations implement similar programs in primary schools; out of 107 schools in Pader district, War Child worked in 6 schools in 2011-2012 and in 6 in 2013-2014. The last 2 years DEO and War Child worked well together; it cooperated with the DEO to draw up joint plans, and in the drawing up of school work plans. QEIP was successful to reach the parents and to facilitate dialogue with them, especially on their responsibilities in the school.

Parents were sensitized on the importance of education for their children, to participate in school activities, and to buy educational materials; this resulted in parents' contributions to PTA's. DEO will encourage parents to continue making work plans and budgets, to which they will contribute. However: do the parents have the needed cash for their school contribution? In case not, they can provide labor for constructing latrines and doing repairs for schools. For orphans and child headed families, DEO sensitized schools to exempt these children from paying school contributions. Girl child programs are going on, as teachers have been trained to give guidance and counseling.

QEIP focused on training Parent Teachers Associations (PTA's); all schools have been sensitized (also by radio programs that reach more schools than the 12 supported by War Child) under QEIP to have PTA's; the PTA concept existed before War Child started its programs ; their implementation was often hindered by the lack of parent contributions. QEIP also stimulated establishing School Management Committees (SMC's), and guided them as these bodies consist of elected members that change every two years. Within QEIP was dealt with child protection related issues: QEIP supported child rights clubs at school

⁸² WCH Uganda (2014). Cumulative Program Outputs 2011-2013. Kampala: War Child Holland Uganda (WCH Uganda), p. 2. However: for QEIP 1,610 caregivers trained, instead of targeted 765; 42 child-led clubs established instead of 32 targeted; 540 para professionals trained instead of 510 targeted; /For CBCP training to CBPC approach given to 6,522 instead of 650 targeted; in 36 communities CBPC approach introduced instead of 30 targeted; more service agreements settled than targeted 4; only number of responded of child protection cases was lower than targeted: 4,578 instead of 5,000. WCH Uganda (2014). Cumulative Program Outputs 2011-2013. Kampala: War Child Holland Uganda (WCH Uganda), p. 3-9.

level, and in-school child parliaments (empowers children to speak out about their rights). Collection of PTA funds started per 2011; DEO monitors closely the PTA funds in order to avoid misuse. PTA funds are also used to top up teachers' salaries and in some schools to buy lunch for the teachers.

DEO states that Universal Primary Education (UPE) enrolment is on an upward trend, but the number of teachers has not increased accordingly; some of them have been removed from the payroll, because there 'ghost teachers'. DEO states that children's performance is declining, because there has recently been no effective teaching, as teachers have been striking over salaries countrywide. The effect was worse in rural schools, where the PTA top up is low, compared to urban schools where parents contribute more. DEO indicated that a school of 1,500 students currently has 24 teachers, but should have 60 teachers in accordance with government ceilings. As a result, classes are very large, averaging to 100 pupils. More teachers cannot be recruited, which makes schools in large need for more PTA members (3-4 PTA members out of 10 teachers). DEO states that parents needed to understand their responsibilities within the context of Universal Primary Education (UPE) programs.

Since War Child is phasing out, there is need for sustainability measures e.g.: dialogue with parents to continue supporting programs; also dialogue with teachers and school authorities needed to continue the programs; the district intends to replace the role of War Child; DEO refers to 'road to sustainability' after War Child has terminated its involvement; parents are central in this 'road'.

The interview with the District Education Office (DEO) Abim District clarified the following issues. DEO is responsible for 34 governmental schools and 12 community schools (46 schools in total), of which War Child supported 33 schools. DEO confirmed importance of War Child interventions and the cooperation extended in the schools. In this support hardware and software were equally important. Hardware support concerned renovating DEO office and provision of laptops. War Child supported acquisition of hardware for schools and DEO with improving facilities and provision of desks, improvements of facilities in 3 schools, and helped to install lightening arrestors, as required by government. Improvement of sanitation and wash facilities in schools was also realized.

Software support concerned War Child trainings of Sub-county Education Committees (SECs) and department staff. Software support on enrolment contributed to address school performance, increased enrolment, retention and completion; i.e. War Child provided Capacity building, training teachers and School Management Committees (SMCs) and Parent Teacher Associations (PTA's), and facilitated monthly and quarterly sector working meetings with all partners working in education. Through this, DEO coordinates work of SEC's, and participates in joint planning meetings (SEC's plan and monitor education activities and oversee the work of SMCs, report back to DEO through Sub-county chiefs). Where WFP has stopped supporting schools, PTA contributions have taken over the provision of school meals.

DEO Abim mobilized partners in education i.e. War Child, UNICEF, ADRAA, and others in December 2012; this was part of the strategy for the go back to school campaign: this resulted in 26,000 children going to school in December 2012 and 27,000 children in December 2013 out of a total of 40,000 children of school going age. In this, Edutrack software of UNICEF was used; this is now piloted in 32 districts countrywide, and Abim is one of them. War Child contributed to the monitoring of improved school performance, co-assesses school results and reports back to DEO on observed challenges in schools. Dropout rates decreased, as was shown in War Child supported monitoring and tracking. For tracking DEO did massive children registration at household level; SECs were helping with monitoring.

Within child protection War Child contributed to file defilement and early child marriages cases in collaboration with the police; in 2013 9 cases in 1 primary school were addresses and perpetrators arrested; this deterred other early child marriages.

As War Child phases out, DEO is urging Sub-counties to continue supporting the established structures. Where parents make a substantial contributions, part of these are used for topping up teachers' salaries, resulting in higher teacher motivation and improved performance. DEO designs strategies for sustainability and does lobbying with other partners to cover the gaps (a/o UNICEF, World Vision, Mukupadi) herein are Sub counties encouraged to support the activities; creation of child clubs in schools part of sustainability strategy: these clubs (in 2013 5 were created) with trained patrons will continue

Visits to Rachkoko Primary School (Abim District) and Biwang Primary School (Pader District) confirmed the followed QEIP approach and related activities. Infrastructural and furniture support provided by War

Child. Dropout of pupils addressed, but issue is not yet solved; Parents' contribution to PTA's should be raised (now UGX 3,000 - 4,000) to UGX 10,000 per year;

Parts of CBCP approach were only touched upon in Rachkoko Primary School and there confirmed. Introduction of Teachers DEAL approach and Teachers Deal group established in 2014; Teachers deal approach emphasises teachers' responsibilities, Code of Conduct, and Children's rights. War Child provided support to organising meetings; teachers learned how to cope with emotions when dealing with difficult children; War Child contributed to the establishment of school clubs in 2013 in which children's rights and responsibilities, child and adult relations are addressed.

In the visit to Lira Palwa Sub-County Office – PADER District the focus was on CBCP; the information provided confirmed the outputs indicated under CBCP.

4.2.5.1. CBCP

The Chairperson of the Sub County Education Committee stated that War Child reorganized the Sub-county Child Protection Committee (CPC). When this was done, their members were made aware that membership was voluntary work. Because of that, some members left; now there are out of 36 mobilized members only 28 are active by 2012. Still problematic is the mobilization of committee members during the planting season. The CPC is active in sensitizing communities on child protection issues (child neglect, child labor, early marriage, and post-trauma interventions); the chairperson stated that the level of corporal punishment and early marriages reduced through War Child's support. Still some parents are hard to be convinced against early child marriage.

In the meeting with the Community Based Child Protection Committees, Sub-County Education Committees and Sub County representatives Abim on QEIP as well as CBCP issues was reported.

4.2.5.2. QEIP

War Child support started in 2013 in Abim District. Within this support trainings of PTA's and SMC's on roles and responsibilities parents and teachers, and school management (PTAs existed before, but lacked appropriate knowledge to address then existing poor school performance with no first grade passes). Simultaneously War Child trained Sub County Education Committee (SEC) of Abim Town Council; now quarterly review meetings of SEC members take place. War Child contributed to the retention of children in schools through the 'go back to school campaign', and sensitized parents to send girl children to school, contrary to existing cultural norms. War Child contributed to the formulation of school work plans. Herein was school dropout a serious issue; War Child contributed to the organization of the Annual African Child Day and to the establishment of a child parliament, which contributed to improved English language.

War Child facilitated the installation of solar system and lightening conductors in some schools thus increasing study opportunities for students. Most schools didn't have furniture (i.e. office chairs and desks), War Child supported in the provision of furniture for the Primary 1-4 classes. When in 2014 WFP did not provide school food anymore, parents contributed to food provision; they also paid UGX 1,500/- per pupil for examinations; in addition War Child availed schools with practice exams. War Child stimulated more active participation of parents in the schools i.e. in building and repairing teacher houses.

4.2.5.3. CBCP

War Child supported community leaders through mobilization meetings to address insecurity in the community; defilement cases were contributing to the dropout of pupils. Local authorities and War Child cooperated court cases against suspects of defilement (prompt and direct intervention response); as a result defilement cases appeared to have reduced. War Child provides counseling services for 'hard to manage' children; in addition to this War Child mobilized SEC to advocate parents to send thief children to school. Communities have learned from Radio talk shows geared to sensitize the public on education and child protection issues. With War Child support women were mobilized to form drama and savings groups.

All stakeholders present in the meeting are aware of the War Child phasing out scenario; they express their remorse about the upcoming situation. In view of departure of War Child, Sub-county should actively pursue the mobilization of parents to contribute more to schools, by increasing their participation in school affairs and their contributions in cash and in kind.

Information gathered in the field visits shows larger attention for QEIP than for CBCP. Hence the confirmation of outputs described in the results chain is stronger for QEIP than for CBCP. War Child reporting on outputs is done in a detailed way; this reporting is not contradicted by field information and observations.

4.2.6. Immediate (direct) benefits

Confirmation on estimated *Immediate (direct) benefits* stated in the results chain was given by DEO's Pader and Abim, combined with War Child activity reports⁸³ and interviews with War Child staff during the field visits. Beneficiaries and Sub-county/Parish leaders provided qualitative information on reported data.

4.2.7. Medium term (direct) benefits

In the indication of *medium term (direct) benefits* War Child's phasing out per 2016 stood central. DEO's, consulted QEIP schools, and CBCP structures indicated that they would take up the challenge and to use learnings and structures established with War Child's support. Worries were expressed about the availability of funds to pursue these activities at the same level, as parents have limited means to contribute. It is also not yet known whether other organizations would be willing and prepared to take up the challenge for implementing activities like QEIP or CBCP. Hence about *Medium term (direct) benefits* no conclusive statements can be made.

4.3. **Discussion**

4.3.1. Followed CFA-SPO approach related to the findings

Attainment of detailed reported immediate benefits were confirmed in accordance with observations and interviews done during the field visits to Pader and Abim districts. The results chain was further related to provided written activity reporting and specific outcome reporting by War Child. At the level of the overall War Child Uganda program, War Child Holland was central in the decision to phase out from Uganda per 2016. War Child Uganda Kampala Office was thereafter strongly focused on putting down the phase out scenario with concrete consequences for the field organization (i.e. ongoing program responsibilities, offices, human resources, logistics).

Before the design and final approval of this scenario mid-2014, the War Child Kampala Office was strongly oriented on capacitating the Pader Office to meet the requirements stemming from the Conn@ct.Now program. Especially in the second of 2013 this capacitating, emphasizing the Core capabilities To act & commit, To Adapt & self-renew and To deliver on development objectives, yielded results in terms of successfully meeting set output targets (see paragraphs Main conclusions on capability changes War Child Pader/Abim Office).

The realized capacity changes the Pader/Abim offices proved however not only to serve output realization in 2013, but later also the implementation of the phasing out scenario of War Child in North Uganda. The accelerated implementation of the Conn@ct.Now program in 2013 created its own learnings, besides what the capacitating activities themselves earlier did. Apart from that, did the phasing out scenario out of War Child from Uganda create much clarity; drastic decisions were taken swiftly by the new management in War Child Uganda. The new situation created openness for shorter management lines in the War Child Uganda organization (i.e. shifting the country office from Kampala to Lira), and above that for new opportunities for synergies.

As the CFA and linked SPO belong to the same War Child Holland organization, strategy development and fundraising are not an own responsibility of War Child Uganda Pader/Abim/Lira offices: from Uganda inputs of possible options for strategizing and fundraising may be given to War Child Holland, but principle decisions are always taken at that (CFA) level with no independent role for the SPO. This circumstance is not common in the MFS2 setup, where in each case the CFA and linked SPO have their own distinct responsibilities, stemming from their vision/mission and related strategies/ activities. For this reason was the decision taken to phase out from Uganda imperative for War Child Uganda, whatever the country office's and SPO's arguments and also its merits in program implementation may have been.

Given the phase out, only conclusions can be drawn about the attainment of *Immediate (direct) benefits* and these are formulated in the results chain specifically for QEIP and CBCP. Regarding the *Medium term (direct) benefits* much will depend in the first place on the parents of the children at stake by their

⁸³ WCH Uganda (2014). Cumulative Program Outputs 2011-2013. Kampala: War Child Holland Uganda (WCH Uganda).

willingness to increase their material and immaterial contributions to schools and child protection structures. Secondly the preparedness of local authorities and community groups to take up the challenge to the 'road to sustainability' are also key matters for these benefits. And thirdly the possibilities to catch the interest of (inter) national organizations that are prepared to work in the realization of QEIP and CBCP objectives along War Child's methodologies is determining for realising Medium term (direct) benefits is essential as well, after War Child's leaving Uganda. A post-exit assessment after minimally 3 years could record of what *Medium term (direct) benefits* are realized.

4.3.2. Recommendations

War Child Holland has decided to phase out its program from Uganda by 2016 with a clear consciousness of its ongoing commitments until then and its strategy to share its approaches/ methodologies in the areas of education and child protection with (inter) national organizations that remain active in Uganda. For the Conn@ct.Now program recommendations for program implementation can only be given, having this perspective in mind: regarding direct implementation issues in the area of capacity development with respect to program implementation, this will be **superfluous**, as far as the Uganda activities are concerned. But for War Child Holland in general, it is important for to learn from the experiences of the comprehensive programs, as were implemented in Uganda, for taking investments on future programs. The following is recommended:

- To carry out a post-exit evaluation to assess after minimally 3 years what Immediate (Direct) benefits have resulted in Medium term (direct) benefits in the original program areas, where War Child Uganda was active. Herein should be accentuated what role parents' contributions have played, whether local authorities and community groups succeeded in their journey on the 'road to sustainability', and to what extend (inter) national organizations could make their contributions by using War Child methodologies.
- To assess what capacity requirements had to be fulfilled at the 3 indicated levels in kind and in cash (i.e. what approaches to capacity development were effective and efficient at the same time), while also taking into account the findings of this report.

4.3.3. Remarks on evaluation approach

The evaluation of War Child Uganda Pader/Abim's capacity development itself, especially with respect to the organization's planning, implementation and monitoring could be done with much care, thanks to the detailed and quality documentation that the organization has made available, in addition to the information provided by War Child Holland's head office. Further should be noted that War Child Uganda's Monitoring & Evaluation is in good shape, which certainly facilitated the capacity development endline study, in addition to the information provided in workshops and interviews. The chosen qualitative approach to assess the capacity development of SPO's, as described in Chapter 4, appeared to work well, but was complicated by the special CFA-SPO relation. The use of capability scoring requires a careful approach: scores can serve a comparison between baseline and endline outcomes, but this comparison needs to be thoroughly triangulated through interviews, focus group discussions, or joint analysis and verification workshops with stakeholders. In the current evaluation setup contribution analysis was an integral part of the evaluation, with in its core the results chain analysis. Research time permitted a partial confirmation of causalities postulated; the qualification of effectiveness of interventions can be set as firmly plausible and to a certain extend functional⁸⁴.

4.4. Conclusion

In this chapter conclusions are drawn with respect to the 3 evaluation questions of the MFS2 Evaluation Study Capacity Development of Southern Partner Organizations - Uganda, e.g.:

- What are the changes in partner organizations' capacity during the 2012–2014 period?
- To what degree are the changes identified in partner capacity attributable to development interventions undertaken by the MFS II consortia (i.e. measuring effectiveness)?
- What factors explain the findings drawn from the questions above?

⁸⁴ See Table 25.

4.4.1. Changes in War Child Uganda Pader/Aim Offices' capacity during the 2012 – 2014 period

Overall War Child Uganda Pader/Aim Offices' organization per June 2013 has shown clear improvements as compared to June 2012. At core capability level and aspects level there were improvements: core capabilities 1, 2 and 3 have shown improvements at aspect level, and core capability 5 at core capability level. Over the period July 2013 – June 2014, with the start of War Child's phasing out scenario War Child Uganda Pader/Abim/Lira offices (as one SPO) could build on earlier made capacity development efforts and new synergies: the new SPO succeeded to continue delivering clear outputs within *Outcome areas: Quality Education Improvement Program (QEIP) and Community Based Child Protection Program (CBCP)*. It could plausibly explain the contribution of its outputs to the outcomes within this area.

4.4.2. War Child Holland's influence on identified changes

War Child Holland's support through MFS2 concerned essentially the program Conn@ct.Now. As War Child Holland / War Child Uganda Kampala Office (as one CFA) and the Pader/Abim/Lira offices (as one SPO) belong to the same organization, strategy development, program implementation, M&E, and capacity development are very much intertwined. Even more important is that in this situation the SPO does not have an independent own responsibility for its own course. The cooperation between the CFA and SPO is therefore more direct than in the CFA – SPO relationship that exists as usual within MFS2. This circumstance has made swift decisions on needed capacity development efforts end 2012/start 2013 possible, as also on War Child's phasing out from Uganda and again needed adapted capacity development efforts from June 2013 onwards. This swiftness certainly benefitted the continuation of the implementation of Conn@ct.Now under changed conditions. In both periods War Child's focus on the core capabilities To act & commit, To adapt & self-renew, and To deliver on development objectives was firmly maintained.

4.4.3. Explaining factors to identified changes

The fact that CFA and SPO belong to the same organization with common objectives, strategies, and approaches worked out well and replicated in different countries where War Child works, has been very influential in bringing about the identified changes. On top of that was the modality of self-implementation modality of War Child in Uganda very much facilitating bringing about identified changes. The phasing out from a large program as is currently run in Uganda is new and as such not a replication of departures from other countries. This means a new learning challenge for the organization as a whole on strategy level (what should be the real focus of the organization; i.e. the question already posed in the organization's recalibration), as well as on organization at organizational level (how to phase out decently?).

4.4.4. Assessment project design

Previous observations result in an assessment of the project design. War Child Holland's contribution was defined as support to the *Conn@ct.Now program* that became per 2013 prominent in the total of all activities in Uganda. War Child Holland's and War Child Uganda Kampala Office's support to the capacity development of 'its SPO' (Pader and later Pader/Abim/Lira offices) was from 2012 increasingly geared to enhancing the capacity of the SPO in function of its project implementation. From the second half of 2013 this support continued with a completely changed perspective for the future of the Uganda program: then all was put in the light of the upcoming phasing out from Uganda per 2106, and the implementation of already committed programs (with Conn@ct.Now as the largest) together.

It is therefore difficult to characterize all capacity development activities during the period June 2012 – June 2014 from one angle. The capacity development efforts up to mid-2013 can be portrayed as well designed, as they were made mainly in service of the implementation of the Conn@ct.Now program. The capacity development activities efforts thereafter were also well designed (with the phasing out scenario as basis), but these were undertaken under completely different assumptions and circumstances.

Table 34 gives assessment scores on 3 statements: The project was well designed, The project was implemented as designed, and The project reached all its objectives.

Table 34: Evaluation table

Statements	Scores
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	6 ⁸⁵

5. References

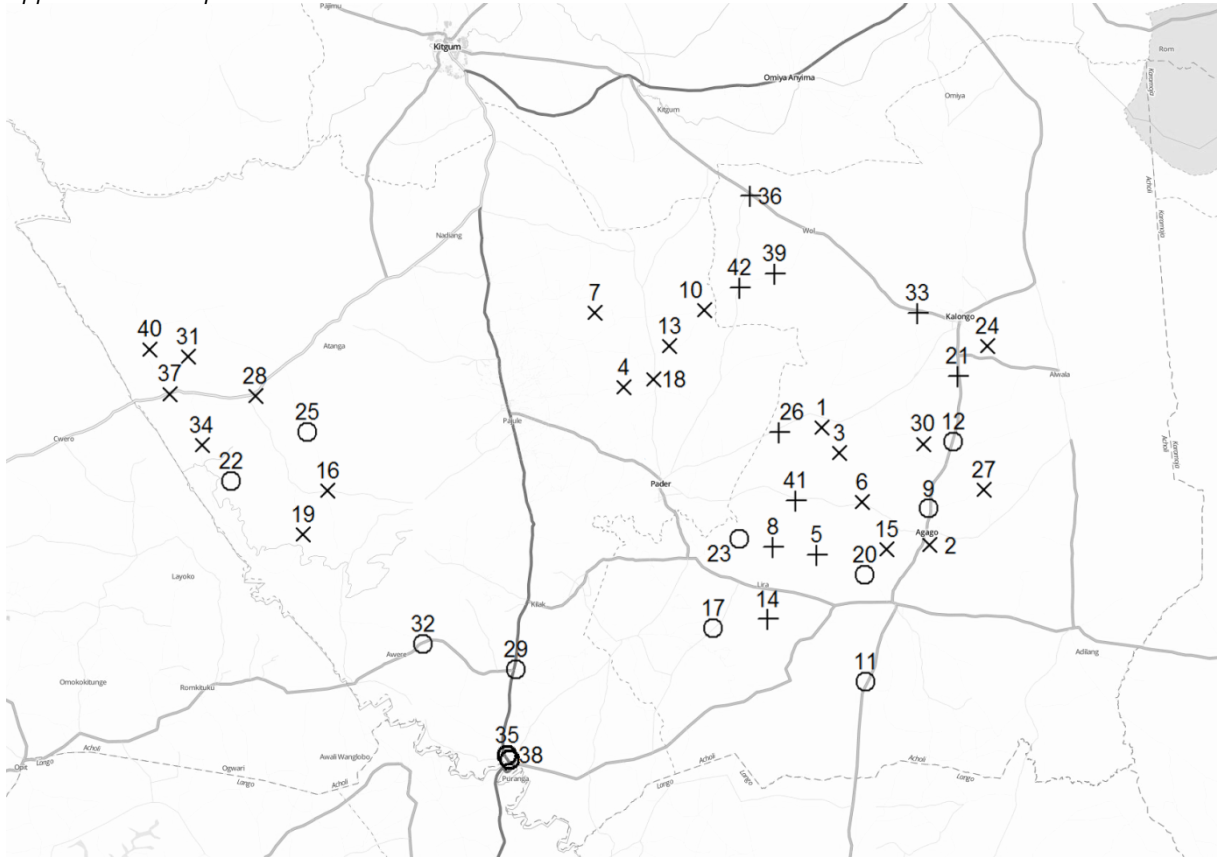
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⁸⁵ *The Conn@ct.Now program* only finishes per December 2015; War Child is waiting for the findings of the Research into Community Based Child Protection with Makerere University.

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6. Appendix

Appendix 1: Sampled schools



O Treatment + Control 1 X Control 2

- | | |
|--------------------|--------------------------------|
| 1. Aywee Gara Gara | 22. Lacor |
| 2. Ajali Anyena | 23. Lacek |
| 3. Langolangola | 24. Kabala Aleda |
| 4. Lanyatono | 25. Wilakado |
| 5. Agweng | 26. Acuru |
| 6. Lapirin | 27. Widwol |
| 7. Awal | 28. Lawiyeadul |
| 8. Obolokome | 29. Rackoko |
| 9. Ngora | 30. Ladigo |
| 10. Angakotoke | 31. Akelikongo |
| 11. Opyelo | 32. Lagile |
| 12. Olung | 33. Apil |
| 13. Kibong | 34. Aruu falls |
| 14. Wimunu pecek | 35. Puranga |
| 15. Pampara | 36. Okwadoko |
| 16. Lapak | 37. Jupa |
| 17. Biwang | 38. Pope John Paul II Memorial |
| 18. Ogago | 39. Ogole |
| 19. Opatte | 40. Aswa Army Bridge |
| 20. Barotiba | 41. Alwee |
| 21. Kabala | 42. Otingowiye |

Appendix 2: Instruments – pupil information (pupil questionnaire)

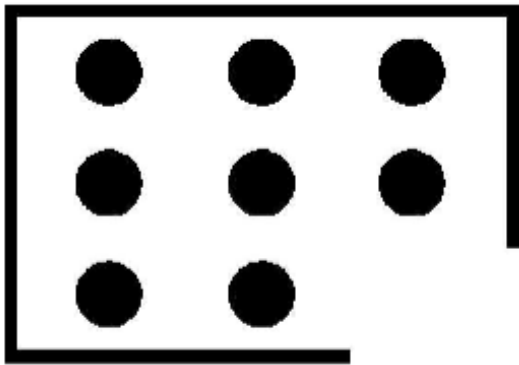
NO.	QUESTION	ANSWER	CODING CATEGORIES	SKIP
101	How old were you at your last birthday?	____ years		
102	IS THE PUPIL A BOY OR A GIRL?	____	1. Boy 2. Girl	
103	Did you go to a nursery or pre-school before P1?	____	1. Yes 2. No	
104	What class are you in this year?	p ____		
105	What class were you in last year?	p ____		
106	What class were you in the year before?	p ____		
107	This year, were you absent from school for more than one week continuously?	____	1. Yes 2. No	→ 108 → 109
108	How many times?	____		
109	Do you have the school reading textbook?	____	1. Yes 2. No	
110	Apart from your schoolwork, are there other books, newspapers or other things to read in your house?	____	1. Yes 2. No	→ 111 → 113
111	What is there to read in your house? <i>[Multiple responses are allowed]</i>			
112	What language(s) are these books or other materials in? <i>[Multiple responses are allowed]</i>			
113	What language does your teacher usually speak in class?	____	1. Luo 2. English 3. Other, specify: _____	
114	Was your teacher giving you lessons in the morning?	____	1. Yes 2. No 9. Child was not at school	→ 115 → 116 → 116
115	How many lessons did (s)he give in the morning?	____	IF THE CHILD DOES NOT REMEMBER ENTER 9	
116	Was (s)he giving you lessons in the afternoon?	____	1. Yes 2. No 9. Child was not at school	→ 117 → 118 → 118
117	How many lessons did she give in the afternoon?	____	IF THE CHILD DOES NOT REMEMBER ENTER 9	
118	IS THE SCHOOL SUPPORTED BY WAR CHILD?	____	1. Yes 2. No	→ 119 → 2.
119	IS THE CHILD INVOLVED IN WAR CHILD'S IDEAL? <i>[Make sure the kid knows what you mean!]</i>	____	1. Yes 2. No	

Appendix 3: Instruments – IQ (pupil questionnaire)

- Tell the child that now you are going to solve some puzzles together
- Find a comfortable seating for both you and the child
- Take out the first laminated matrix and the possible answers
- Tell the child that at the end of this activity (s)he will receive at least one candy or even more
- Ask the kid which of the six answer pieces (s)he thinks should be added (1: C) and praise them for their choice if correct, otherwise give the following feedback:
- “Are you sure... I think this one would fit better”, show how the right piece fits the matrix but do not explain why it does, end with “you see, let’s try another one”
- If the child answers correctly, report a 1 on the record sheet (a simple vertical bar like this |). If the answer is incorrect report the chosen answer in CAPITAL LETTERS (e.g.: ABCDEF)
- The record sheet might therefore look something like this:
“... | F E | A | | | B | B B B ...”
- At the end write down the number of correct answers in the box, in our example the child answered 6 times correctly
- Notice that after 3 consecutive wrong answers you MUST stop the test
- This is to prevent the child from getting frustrated and to limit the number of right answers “by chance”.
- The test therefore will not necessarily be comprised of 19 questions, but of the number of questions the kid answers before making 3 consecutive mistakes
- At the end of the test, jubilate about the completion of the test and say that in a moment (s)he will get a candy

	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519
Matrix	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
Correct	C	E	B	F	A	F	B	D	F	A	C	E	B	A	E	D	D	B	D
Answer																			

520	Total Correct Answers:	_ _
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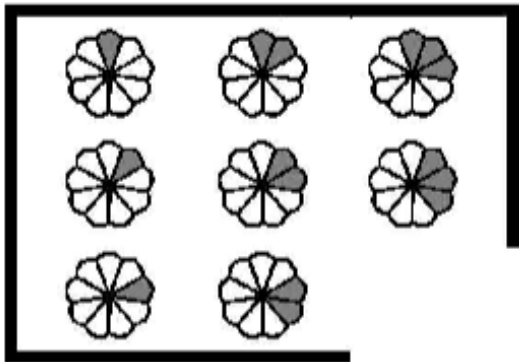
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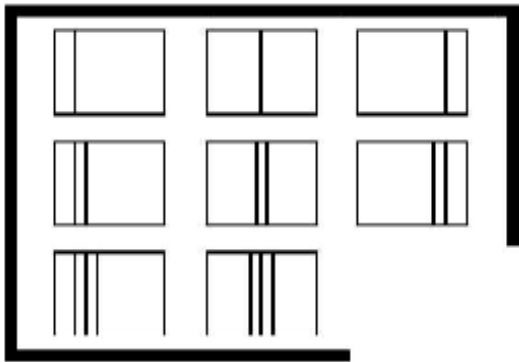
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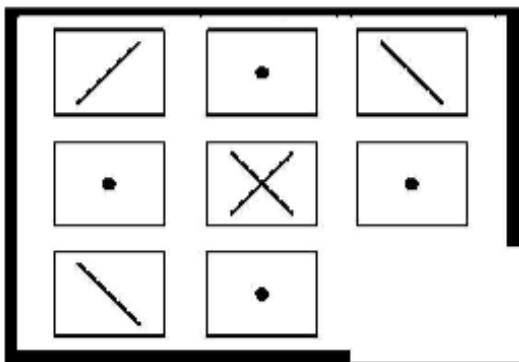
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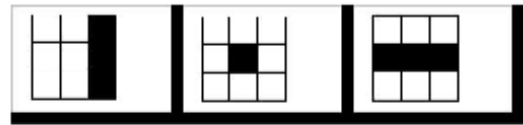
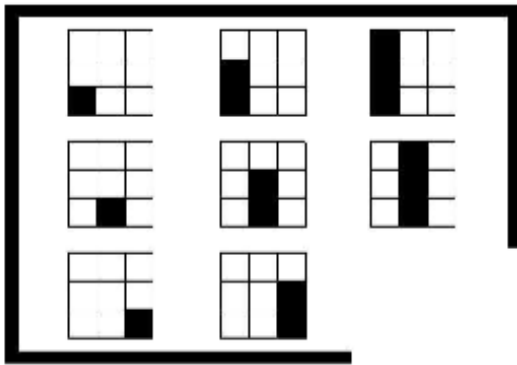
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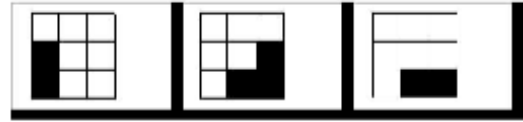
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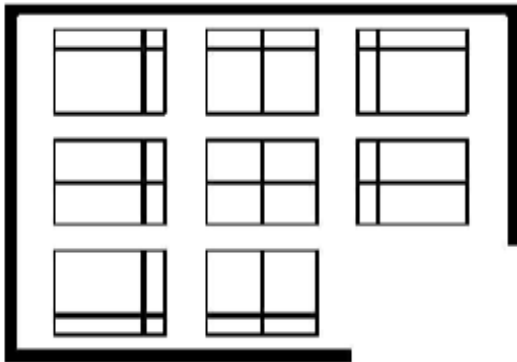
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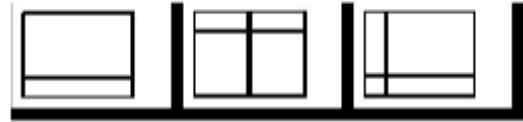
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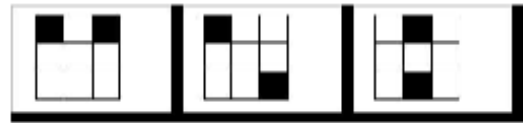
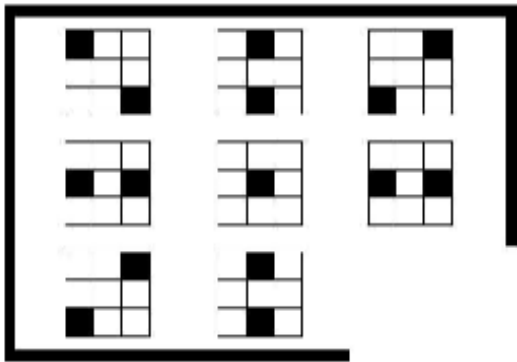
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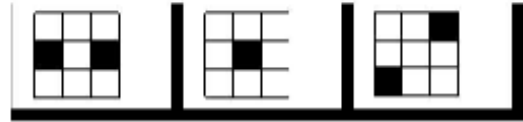
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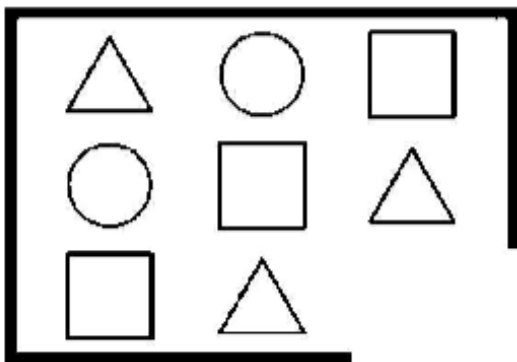
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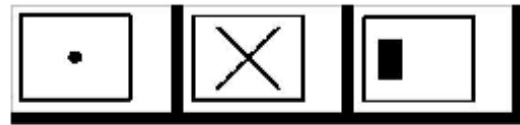
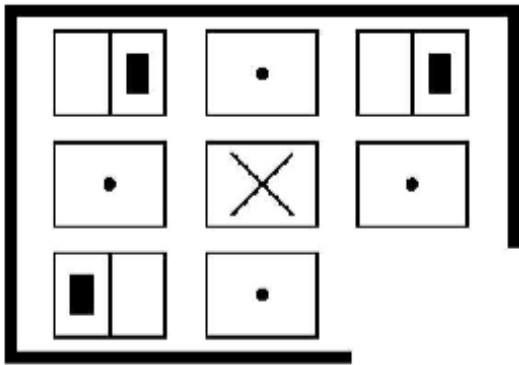
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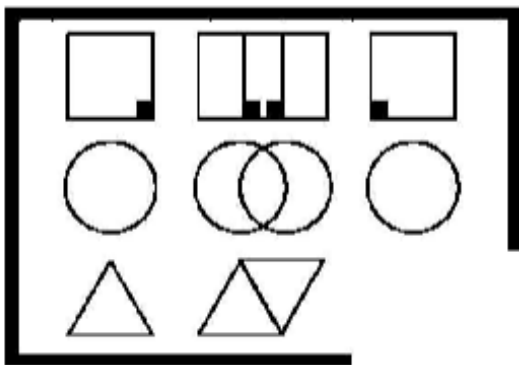
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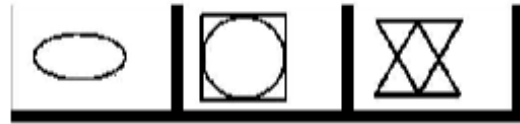
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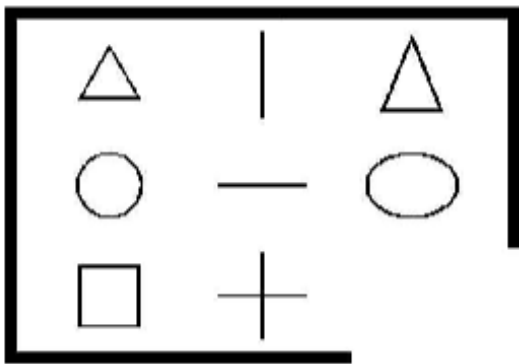
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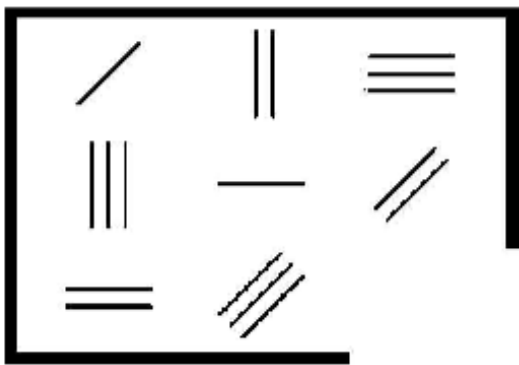
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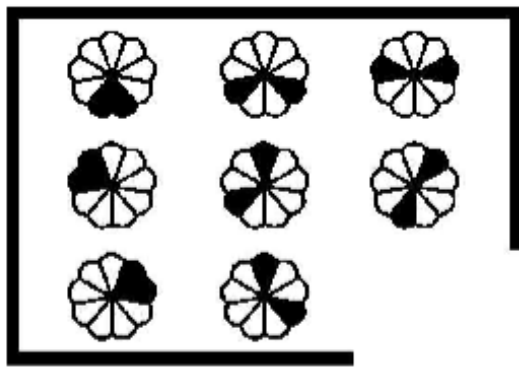
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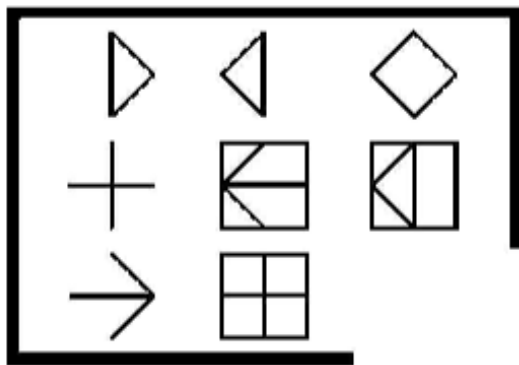
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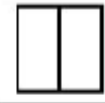
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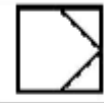
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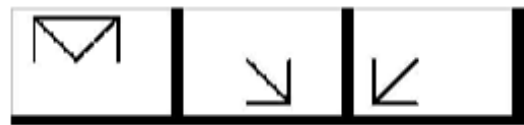
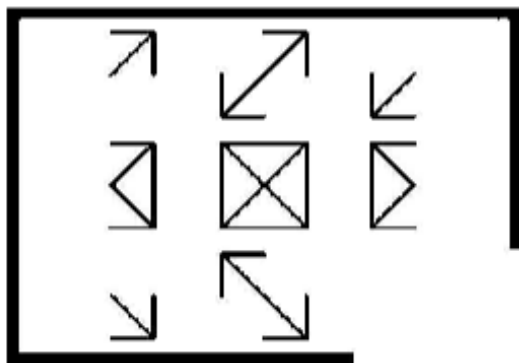
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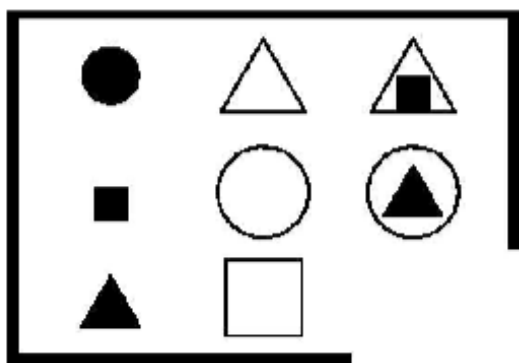
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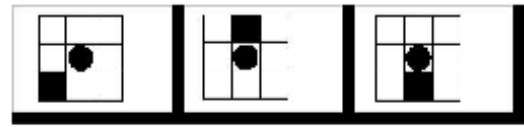
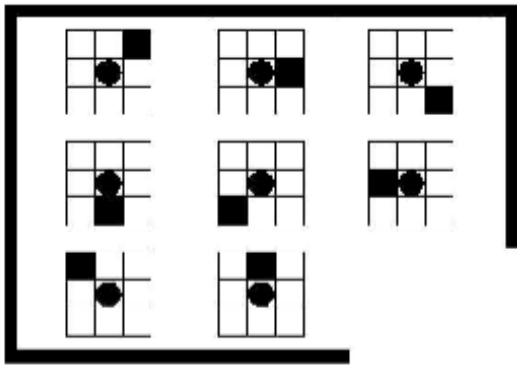
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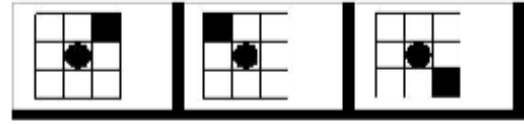
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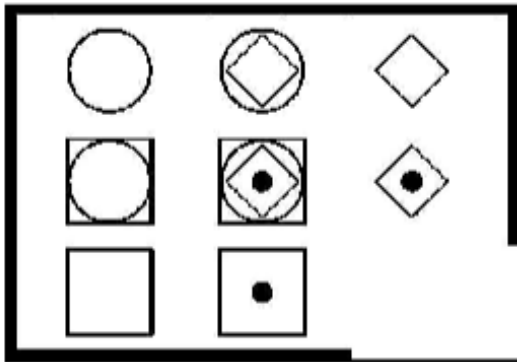
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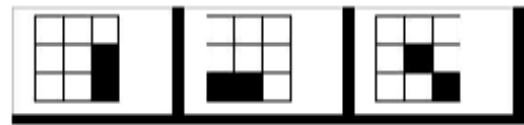
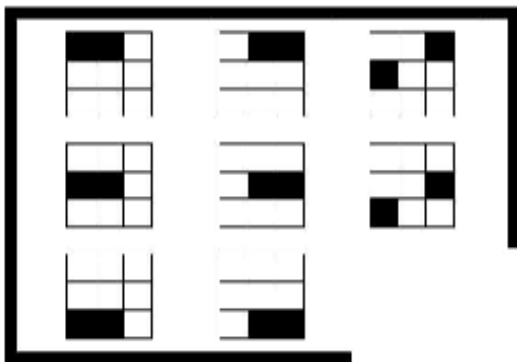
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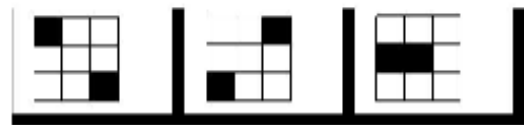
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Appendix 4: Instruments – Wellbeing an personality traits 1 (pupil questionnaire)

NO.	QUESTION	ANSWER	CODING CATEGORIES
701	Ka lapwony openyo lapeny, iromo gamo atir? <i>When the teacher asks questions, are you able to answer correctly?</i>	□ □	1. Yes { 1. Always/almost always 2. Often 3. Sometimes 2. No { 1. Never/almost never 2. Rarely 3. Sometimes
702	Itye ki tam mabeco mapol? <i>Do you have lots of good ideas?</i>	□ □	
703	Ibedo maber ki lunyodo ni? <i>Do you get on well with your parents?</i>	□ □	
704	Imako lurem oyoto? <i>Do you easily make friends?</i>	□ □	
705	Imaro me rwate ki dano mukene? <i>Do you like to meet with other people?</i>	□ □	
706	Ituku matek ki luremi? <i>Do you play a lot with friends?</i>	□ □	
707	Iwinyo itye ki kero ki gupu madwong? <i>Do you feel strong and full of energy?</i>	□ □	
708	Iniang jami oyoto? <i>Do you understand things quickly?</i>	□ □	
709	Imaro lok ki dano mukene? <i>Do you like to talk with others?</i>	□ □	
710	Iworo cik ki ber bedo? <i>Do you respect the rules and the order?</i>	□ □	
711	Ka dano ma ikwano kede ikilaci acel tye ki peko imine kony? <i>If a classmate has some difficulty, do you help him/her?</i>	□ □	

Appendix 5: Instruments – Wellbeing an personality traits 2 (pupil questionnaire)

NO.	QUESTION	ANSWER	CODING CATEGORIES
901	Itye ki gen ni itwero gengo aburu ki maki? <i>Do you believe that you can stop yourself from catching a flu?</i>	□	1. Yes { 1. Always/almost always 2. Often 3. Sometimes 2. No { 1. Never/almost never 2. Rarely 3. Sometimes
902	Cwinyi winyo ni ka jami maber time,gi time pi tic matek? <i>Do you feel that when good things happen they happen because of hard work?</i>	□	
903	Ileyo jami ni ki dano mukene? <i>Do you share your things with other people?</i>	□ □	
904	Cwinyi winyo ni ka jami ocake maber kudiko,nino eno ni bedo maber kadi itim ngo? <i>Do you feel that if things start out well in the morning that it's going to be a good day no matter what you do?</i>	□	
905	Iketo cwinyi ijami weng ma itimo? <i>Are you very engaged in the things you do?</i>	□ □	
906	Ka itye gang, pe ituku ma pud pe ityeko tic ma lapwony omini? <i>Do you play only after you finished your homework?</i>	□ □	
907	Iwinyo agonya ka itye gang? <i>Do you feel fine at home?</i>	□ □	
908	Icaa mukene iwinyo ilwor? <i>Do you feel scared at times?</i>	□ □	
909	Iwaco gin ma in itamo? <i>Do you say what you think?</i>	□ □	
910	Ikeco oyot? <i>Do you easily lose your calm?</i>	□ □	

Appendix 6: Instruments – Wellbeing an personality traits 3 (pupil questionnaire)

NO.	QUESTION	ANSWER	CODING CATEGORIES
1101	In idike ku? <i>Are you impatient?</i>	□ □	1. Yes { 1. Always/almost always 2. Often 3. Sometimes 2. No { 1. Never/almost never 2. Rarely 3. Sometimes
1102	Caa mukene cwinyi cwer? <i>Do you I feel sad at times?</i>	□ □	
1103	Komi myel pi jami ma konye peke? <i>Do you get nervous for silly things?</i>	□ □	
1104	Ka ngati mo otimi rac, inongo tek me time kica? <i>If someone commits an injustice to you, do you forgive them?</i>	□ □	
1105	Imaro gwoko jami ni me gang kwan iyore me lamal? <i>Do you like to keep all your school things in great order?</i>	□ □	
1106	Ikeco oyot? <i>Do you easily get offended?</i>	□ □	
1107	Cwinyi yom dok iwinyo maber? <i>Are you happy and lively?</i>	□ □	
1108	Ka lapwony opwonyo gino mo, iniang oyot? <i>When the teacher explains something, do you understand immediately?</i>	□ □	
1109	Ibedo ki abar wic onyo yi mwode? <i>Do you have headaches or tummy-aches?</i>	□ □	

Appendix 7: Instruments – Wellbeing an personality traits 4 (pupil questionnaire)

NO.	QUESTION	ANSWER	CODING CATEGORIES
1301	Ibedo maber ki ada ki dano mukene? <i>Do you behave correctly and honestly with others?</i>	□ □	1. Yes { 1. Always/almost always 2. Often 3. Sometimes 2. No { 1. Never/almost never 2. Rarely 3. Sometimes
1302	Ka itye ikilaci, iketo cwinyi ijami ducu ma itimo? <i>During class-time, are you concentrated on the things you do?</i>	□ □	
1303	Itye ki awaka ikomi? <i>Do you feel proud of yourself?</i>	□ □	
1304	Igeno ni ka jami marac obitime, time kadi itim ngo me genko ne? <i>Do you believe that when bad things are going to happen, they are going to happen no matter what you try to do to stop them?</i>	□	
1305	Imer maber ki luremi? <i>Do you get along well with my friends?</i>	□ □	
1306	Itiyo matek ki yom cwinyi? <i>Do you work hard and with pleasure?</i>	□ □	
1307	Itero ni ingeyo jami mapol? <i>Do you consider that you know many things?</i>	□ □	
1308	Lutino mukene gi mari? <i>Do other kids like you?</i>	□ □	

Appendix 8: Instruments – Wellbeing an personality traits 5 (pupil questionnaire)

NO.	QUESTION	ANSWER	CODING CATEGORIES
1601	In imako gin ma ki pwonyo igang kwan oyoto? <i>Do you easily learn what you study at school?</i>	□ □	1. Yes { 1. Always/almost always 2. Often 3. Sometimes 2. No { 1. Never/almost never 2. Rarely 3. Sometimes
1602	Yi yom ikomi keni-keni? <i>Do you feel pleased with yourself?</i>	□ □	
1603	Lunyodo ni gengi me timo jami mukene? <i>Do your parents stop you from doing certain things?</i>	□ □	
1604	In iromo timo cura? <i>Are you able to solve mathematical problems?</i>	□ □	
1605	Igeno ni ka itute matek igang kwan ibinongo tic mabe i anyim? <i>Do you believe that if you study hard at school, you will be rewarded by a better job in the future?</i>	□	
1606	Caa mukene inongo bedo tek? <i>Do you feel bored at times?</i>	□ □	
1607	Itamo ni bedo maryek ber loyo lagum kom? <i>Do you think it's better to be clever than to be lucky?</i>	□	

Appendix 9: Instruments – Wellbeing an personality traits 6 (pupil questionnaire)

NO.	QUESTION	ANSWER	CODING CATEGORIES
1801	Itye ki gen ikom dano mukene? <i>Do you trust in others?</i>	□ □ □	1. Yes { 1. Always/almost always 2. Often 3. Sometimes 2. No { 1. Never/almost never 2. Rarely 3. Sometimes
1802	In imaro lok ore? <i>Do you like to joke?</i>	□ □ □	
1803	Iyee ni dano mukene oti ki gaa ma megi? <i>Do you let other people use your things?</i>	□ □ □	
1804	Itimo jami ma cwinyi pe opye? <i>Do you do things with agitation?</i>	□ □ □	
1805	Komi bedo lit? <i>Do you fall ill?</i>	□ □ □	
1806	Imaro tuku ki nyero matek? <i>Do you have fun and laugh a lot?</i>	□ □ □	

Appendix 10: Instruments – Reading and comprehension (pupil questionnaire)

- "Here is a short story. I want you to read it aloud, quickly but carefully. When you have finished, I will ask you some questions about what you have read. Do you understand what you are to do? When I say "begin," read the story as best as you can. I will keep quiet & listen to you, unless you need help. Ready? Begin."
- Start the timer when the child reads the first word. Stay quiet, unless the child hesitates for 5 seconds, in which case provide the word, point to the next word and say "Please go on."
- At 60 seconds, say "Stop." And remove the passage from in front of the child. Mark the final word read with a bracket (]).
- Early stop rule: If the child reads no words correctly on the first line, say "Thank you!", discontinue this exercise, check the box at the bottom of the page and go on to the next exercise.

MY NAME IS OKELLO. I LIVE ON A FARM WITH MY MOTHER, FATHER, AND BROTHER OCEN. 16

EVERY YEAR, THE LAND GETS VERY DRY BEFORE THE RAINS COME. 27

WE WATCH THE SKY AND WAIT. 33

ONE AFTERNOON AS I SAT OUTSIDE, I SAW DARK CLOUDS. THEN SOMETHING HIT MY HEAD, LIGHTLY AT FIRST AND THEN HARDER. 54

I JUMPED UP AND RAN TOWARDS THE HOUSE. THE RAINS HAD COME AT LAST. 68

1401	WORDS READ (COUNT ALL WORDS READ WITHIN THE 60 SECONDS)	<input type="text"/>
1402	EARLY STOP RULE: (CHECK THE BOX IF EXERCISE STOPPED DUE TO NO CORRECT ANSWERS IN THE FIRST LINE):	<input type="checkbox"/>

- When 60 seconds are up or if the child finishes reading the passage in less than 60 seconds, REMOVE the passage from in front of the child.
- Slowly read out the passage to the child again, then ask the questions below.
- Give the child at most 15 seconds to answer the question, mark the child's response, and move to the next question

	Now I am going to ask you a few questions about the story you just read. Try to answer the questions as well as you can.		
1403	Where does Okello live? <i>[On a farm; home]</i>	<input type="text"/>	1. Correct 2. Incorrect 3. No response
1404	Why does the land get dry? <i>[The rains haven't come; there is a drought; there is a dry season; God is not sending the rain]</i>	<input type="text"/>	
1405	Why do Okello and his family watch the sky? <i>[Hoping the rains come; waiting for the rain]</i>	<input type="text"/>	
1406	What hit Okello on the head? <i>[rain; water; drops]</i>	<input type="text"/>	
1407	How do you think Okello felt when the rains came? <i>[Excited, thankful, happy, any reasonable answer]</i>	<input type="text"/>	

Appendix 11: Instruments – Mathematics (pupil questionnaire)

- Hand a paper and a pencil to the child and get ready to read out the first question
- Tell him you are going to try out some Math, but remind him/her they should not worry because this is not a test
- Give more or less 15 seconds for each answer, after it has been written down or understood. It is not compulsory to use the pen and paper
- After two wrong or non-responded answers stop the exercise

		ANSWER		
1501	2 + 6 = [8]		└─┘	1. Correct 2. Incorrect 3. No response
1502	13 + 11 = [24]		└─┘	
1503	3 x 4 = [12]		└─┘	
1504	8 x 12 = [96]		└─┘	
1505	9 ÷ 3 = [3]		└─┘	
1506	14 ÷ 7 = [2]		└─┘	
1507	5 + 5 * 5 ÷ 5 = [10]		└─┘	

Appendix 12: Instruments – Pupil and caregiver information (caregiver questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP		
001	PROBE: IS THE RESPONDENT THE PERSON WHO TAKES THE MOST CARE OF _____, THE CHILD YOU HAVE WORKED WITH TODAY?	<input type="checkbox"/>	1. Yes 2. No	→ 002 → FIND CORRECT PERSON		
002	PROBE: WHAT IS THE RESPONDENT'S RELATIONSHIP TO THE CHILD?	<input type="checkbox"/>	1. Parent 2. Grandparent 3. Uncle/aunt 4. Sibling 5. Other relative 6. Not related			
003	WAS THIS CAREGIVER'S CHILD INTERVIEWED FOR THE BASELINE?	<input type="checkbox"/>	1. Yes 2. No			
004	WAS THE CAREGIVER HIM/HERSELF INTERVIEWED FOR THE BASELINE?	<input type="checkbox"/>	1. Yes 2. No			
005	<p>Hello. My name is _____ and I am working with Makerere University. Together with Wageningen University from the Netherlands, we are conducting a survey about school quality and parenthood issues. It will help us evaluate the performance of some of the development projects in Uganda financed by the Dutch government. We would very much appreciate your participation in this survey. The survey will not take long to complete.</p> <p>During the interview, we will also ask you to make several choices. At the end, we will randomly select one of these choices, and based on your answer to that choice, you will receive some money in the form of MTN airtime from us as a sign of gratitude.</p> <p>Participation in this survey is voluntary, and if we should come to any question you don't want to answer, just let me know and I will go to the next question; or you can stop the interview at any time. However, we hope that you will participate in this survey since your views are important.</p> <p>At this time, do you want to ask me anything about the survey? May I begin the interview now?</p> <p>Signature of interviewer: _____ Date: _____</p>					
006	DOES THE RESPONDENT AGREE TO BE INTERVIEWED?	<input type="checkbox"/>	1. Yes 2. No	→ 007 → END		
007	RECORD THE TIME	<table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td style="width: 20px; text-align: center;">H H</td> <td style="width: 20px; text-align: center;">M M</td> </tr> </table>	H H	M M		
H H	M M					

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP		
101	PROBE: IS THE RESPONDENT BLOOD RELATED TO _____?	<input type="checkbox"/>	1. Yes 2. No			
102	In what month and year was the child born?	<table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td style="width: 20px; text-align: center;">M M</td> <td style="width: 20px; text-align: center;">Y Y Y Y</td> </tr> </table>	M M	Y Y Y Y	RECORD THE DATE. IF THE RESPONDENT DOESN'T KNOW, ENTER 99 / 9999	
M M	Y Y Y Y					
103	Are both biological parents of the child alive? IN CASE THE CAREGIVER DOES NOT KNOW WHETHER A PARENT IS ALIVE OR NOT, RECORD THAT PARENT AS DECEASED.	<input type="checkbox"/>	1. Both alive 2. Only father alive 3. Only mother alive 4. Both deceased			

Appendix 13: Instruments – Household information (caregiver questionnaire)

NO	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
201	IS THE RESPONDENT (CAREGIVER) MALE OR FEMALE?	<input type="checkbox"/>	1. Male 2. Female	
202	In what month and year were you born?	MM YYYY	RECORD THE DATE. IF THE RESPONDENT DOESN'T KNOW, ENTER 99 / 9999	
203	How old were you at your last birthday? COMPARE WITH 202 IF CONSISTENT. PROBE UNTIL CONSISTENT.	<input type="checkbox"/> years	ENTER AGE IN COMPLETED YEARS.	
204	Are you married? PROBE FOR THE RESPONDENT'S MARITAL STATUS	<input type="checkbox"/>	1. Single 2. Engaged 3. Married 4. Divorced 5. Separated 6. Widowed	
205	Have you ever attended school?	<input type="checkbox"/>	1. Yes 2. No	→ 206 → 209
206	What is the highest level of school you attended?	<input type="checkbox"/>	1. Primary 2. Lower secondary (O) 3. Upper secondary (A) 4. Tertiary / University	
207	What is the highest class you completed at that level?	<input type="checkbox"/>	RECORD CLASS	
208	How often do you read a newspaper?	<input type="checkbox"/>	1. Almost every day 2. At least once a week 3. Less than once a week 4. Not at all	
209	How often do you listen to the news on radio or on television?	<input type="checkbox"/>	1. Almost every day 2. At least once a week 3. Less than once a week 4. Not at all	
210	What tribe do you belong to?	<input type="checkbox"/>	1. Muganda 2. Muteso 3. Musoga 4. Munyankole 5. Munyarwanda 6. Mukiga 7. Lango 8. Mugisu 9. Acholi 10. Lugbara 11. Munyoro 12. Mutoro 13. Karamojong 14. Other, specify: _____	
211	What is your religion?	<input type="checkbox"/>	1. Christian 2. Muslim 3. Traditional 4. Other, specify: _____	
212	How many people live in this household, including yourself and the child?	<input type="checkbox"/>	RECORD TOTAL NUMBER OF HOUSEHOLD MEMBERS	
213	How many rooms in your homestead are used by your household?	<input type="checkbox"/>	RECORD TOTAL NUMBER OF ROOMS, INCLUDING LIVINGROOM	
214	What is the main material of the roof of your main house?	<input type="checkbox"/>	1. Thatch 2. Iron 3. Roof tiles 4. Other, specify: _____	
215	What is the main material of the walls of your main house?	<input type="checkbox"/>	1. Mud 2. Mud block / unburned bricks 3. Burned bricks 4. Other, specify: _____	
216	What is the main material of the floor of your main house?	<input type="checkbox"/>	1. Mud / earth / dung 2. Cement 3. Tiles 4. Other, specify: _____	
217	Do you or anyone in your household own any of the following? a. phone? b. radio? c. television? d. generator? e. bicycle? f. motorbike? g. car?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Yes 2. No	

Appendix 14: Instruments – School information 1 (caregiver questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
401	Do you pay school fees for [NAME]?	<input type="checkbox"/>	1. Yes 2. No	→ 402 → 403
402	How much did you pay for [NAME's] school fees for this term?	_____ USh.	RECORD THE AMOUNT	
403	Sometimes people give food or other things to teachers to make sure that they teach well. Do you sometimes do that?	<input type="checkbox"/>	1. All the time 3. Rarely 5. Don't know 2. Often 4. Never	
404	I will now read to you some statements. For each one, please tell me if you agree or disagree with it. a. The harder a pupil works at school, the better life (s)he will have in the future b. Achieving a high level of education is the only way to for our children to have a better future c. My child is receiving education of good quality at our primary school d. The teachers at our primary school are good e. It is OK for a child not to go to school when there is a lot of work on the farm	 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Agree completely 2. Agree just a bit 3. Disagree just a bit 4. Disagree completely	
405	Do you know what is a School Management Committee (SMC)?	<input type="checkbox"/>	1. Yes 2. No	→ 406 → 413
406	Is there one in your school?	<input type="checkbox"/>	1. Yes 2. No	→ 407 → 413
407	Are you a member of the SMC?	<input type="checkbox"/>	1. Yes 2. No	→ 408 → 410
408	How many times did you go to an SMC meeting last school term?	_____	RECORD THE NUMBER OF ATTENDED MEETINGS	
409	What do you do as a member of the SMC?			
410	How useful is the SMC in your opinion?	<input type="checkbox"/>	1. Very useful 3. Somewhat useless 2. Somewhat useful 4. Very useless	
411	Can you think of a time the SMC did something good for the school, the pupils or your family? Please briefly describe what happened and when.			
412	Can you think of a time the SMC did something bad for the school, the pupils or your family? Please briefly describe what happened and when.			

Appendix 15: Instruments – School information 2 (caregiver questionnaire)

413	Do you know what is a Parent-Teacher Association (PTA)?	<input type="checkbox"/>	1. Yes 2. No	→ 414 → 5.
414	Is there one in your school?	<input type="checkbox"/>	1. Yes 2. No	→ 415 → 5.
415	Are you a member of the PTA?	<input type="checkbox"/>	1. Yes 2. No	→ 416 → 418
416	How many times did you go to a PTA meeting last school term?	<input type="text"/>	RECORD THE NUMBER OF ATTENDED MEETINGS	
417	What do you do as a member of the PTA?			
418	How useful is the PTA in your opinion?	<input type="checkbox"/>	1. Very useful 3. Somewhat useless 2. Somewhat useful 4. Very useless	
419	Can you think of a time the PTA did something good for the school, the pupils or your family? Please briefly describe what happened and when.			
420	Can you think of a time the PTA did something bad for the school, the pupils or your family? Please briefly describe what happened and when.			

Appendix 16: Instruments – Wellbeing an personality traits 1 (caregiver questionnaire)

NO.	QUESTION	ANSWER	CODING CATEGORIES	NO.	QUESTION	ANSWER	CODING CATEGORIES	
601	Itero cawa ka tamo jami? <i>Do you spend time reflecting on things?</i>	□ □	1. Yes { 1. Always/almost always 2. Often 3. Sometimes	611	Ileyo jami ni ki jo mukene? <i>Do you share your things with other people?</i>	□ □	1. Yes { 1. Always/almost always 2. Often 3. Sometimes	
602	Imaro ywayo tam pa lwak ikomi? <i>Do you like drawing attention to yourself?</i>	□ □		612	Inongo ni ka jami ocake maber odiko, obi bedo nino maber akadi pe itim gin mo keken? <i>Do you feel that if things start out well in the morning that it's going to be a good day no matter what you do?</i>	□		
603	Imaro rwate ki jo mukene? <i>Do you like to meet with other people?</i>	□ □		613	Iketo komi I jami ame itimo ducu? <i>Do you engage yourself in the things you do?</i>	□ □		
604	Inongo ni itek doki itye ki gupu? <i>Do you feel strong and full of energy?</i>	□ □		614	Imaro timo jami malube ki pulan? <i>Do you like to do things according to a plan?</i>	□ □		
605	Iniang jami oyot-oyot? <i>Do you understand things quickly?</i>	□ □		615	Iwaco ngo ma itamo? <i>Do you say what you think?</i>	□ □		
606	Imaro lok ki jo mukene? <i>Do you like to talk with others?</i>	□ □		616	Irwenyo mwolo ni oyot-oyot? <i>Do you easily lose your calm?</i>	□ □		
607	Iworo cik ki ber bedo? <i>Do you respect the rules and the order?</i>	□ □		617	In pe igale? <i>Are you impatient?</i>	□ □		2. No { 1. Never/almost never 2. Rarely 3. Sometimes
608	Iketo cwinyi ka paro peki pa jo mukene? <i>Are you interested in other people's problems?</i>	□ □		618	Iyi wang oyot-oyot? <i>Do you get upset easily?</i>	□ □		
609	Iye ni iromo juku komi ki nongo two aburu? <i>Do you believe that you can stop yourself from catching a cold?</i>	□		619	Komi myel pi jami ma konye pe? <i>Do you get nervous for silly things?</i>	□ □		
610	Inongo ni ka jami mabeco obitime, nongo time pi tic matek? <i>Do you feel that when good things happen they happen because of hard work?</i>	□		620	Ka ngati mo otimo gin marac ikomi, inongo tek me time kica? <i>If someone commits an injustice to you, do you find it hard to forgive?</i>	□ □		

Appendix 17: Instruments – Wellbeing an personality traits 2 (caregiver questionnaire)

NO.	QUESTION	ANSWER	CODING CATEGORIES	NO.	QUESTION	ANSWER	CODING CATEGORIES
801	Imaro ber beda ki yo ame opore? <i>Do you love order and regularity?</i>	<input type="checkbox"/> <input type="checkbox"/>	1. Yes { 1. Always/almost always 2. Often 3. Sometimes 2. No { 1. Never/almost never 2. Rarely 3. Sometimes	811	Imaro tamo yo manyen me timo jami? <i>Do you love to think up new ways of doing things?</i>	<input type="checkbox"/> <input type="checkbox"/>	1. Yes { 1. Always/almost always 2. Often 3. Sometimes 2. No { 1. Never/almost never 2. Rarely 3. Sometimes
802	Yi wang atata? <i>Do you easily get offended?</i>	<input type="checkbox"/> <input type="checkbox"/>		812	Iwinyo ni iyi yom ki komi? <i>Do you feel pleased with yourself?</i>	<input type="checkbox"/> <input type="checkbox"/>	
803	Yi yom dok kwo ni yot? <i>Are you happy and lively?</i>	<input type="checkbox"/> <input type="checkbox"/>		813	Iketo cwinyi I gin a niango yo ne tek? <i>Are you interested in abstract ideas?</i>	<input type="checkbox"/> <input type="checkbox"/>	
804	Ka ngat mo otiti gin mo, iniang oyot-oyot? <i>When somebody explains something, do you understand immediately?</i>	<input type="checkbox"/> <input type="checkbox"/>		814	Ka itiyu matek, itamo ni lutino ni obi nongo kwo maber iyi anyim? <i>Do you believe that if you work hard, your children will be rewarded by a better life in the future?</i>	<input type="checkbox"/>	
805	Ibedo maber dok iloko lok ada ki jo mukene? <i>Do you behave correctly and honestly with others</i>	<input type="checkbox"/> <input type="checkbox"/>		815	Itamo ni ber me beda maryek ni kato bedo lagum kom? <i>Do you think it's better to be clever than to be lucky?</i>	<input type="checkbox"/>	
806	Ikare me tic, iketo tami katimo jami? <i>During work, are you concentrated on the things you do?</i>	<input type="checkbox"/> <input type="checkbox"/>		816	Igeno jo mukene? <i>Do you have trust in others?</i>	<input type="checkbox"/> <input type="checkbox"/>	
807	Ibedo ki awaka ikomi? <i>Do you feel proud of yourself?</i>	<input type="checkbox"/> <input type="checkbox"/>		817	Imaro loko lok ore? <i>Do you like to joke?</i>	<input type="checkbox"/> <input type="checkbox"/>	
808	Inongo ni ka jami maraco obitime, time akadi item timo gin mo me juku ne? <i>Do you believe that when bad things are going to happen, they are going to happen no matter what you try to do to stop them?</i>	<input type="checkbox"/>		818	Iweko jo mukene tiyo ki jami ni? <i>Do you let other people use your things?</i>	<input type="checkbox"/> <input type="checkbox"/>	
809	Itiyu matek ki yom cwiny? <i>Do you work hard and with pleasure?</i>	<input type="checkbox"/> <input type="checkbox"/>		819	Itimo jami ki myel kom? <i>Do you do things with agitation?</i>	<input type="checkbox"/> <input type="checkbox"/>	
810	Itero ni ingeyo jami ma pol? <i>Are you knowledgeable about many things?</i>	<input type="checkbox"/> <input type="checkbox"/>		820	Macok coki ibedo ki lit kom? <i>Do you tend to fall ill?</i>	<input type="checkbox"/> <input type="checkbox"/>	

Appendix 18: Instruments – Trauma (caregiver questionnaire)

- “I will now ask you about some problems people sometimes face”

- “Please tell me how much you have been bothered by each of those problems in the last month”

NO.	QUESTION	ANSWER	CODING CATEGORIES
1001	Ipoyo, ya itimo gin mo onyo ineno cale ma kwako gin ma rac otime ikare mo ma okato anged ma obedo ka nwone ki yeli? <i>Repeated, disturbing memories, thoughts, or images of a stressful experience from the past?</i>	<input type="checkbox"/>	1. Not at all 2. A little bit 3. Very much
1002	Ipoyo lek marac ki tam matek ma mako jami ma otime I kare ma okato anged ma obedo ka nwone ki yeli? <i>Repeated, disturbing dreams of a stressful experience from the past?</i>	<input type="checkbox"/>	
1003	Ipoyo bedo calo, onyo winyo ni gin ma rac ma otime ikare ma okato anged tye ka time dok odoco (calo dok tye ka time) <i>Suddenly acting or feeling as if a stressful experience were happening again (as if you were reliving it)?</i>	<input type="checkbox"/>	
1004	Iwinyo marac ka gin mo doki oweki ipoyo gin ma otime I kare okato anged? <i>Feeling very upset when something reminded you of a stressful experience from the past?</i>	<input type="checkbox"/>	
1005	Gin mo time ikomi, (lapore poto cwiny, nongo yweyo tek, bino pa kwok) ka gin mo dok oweko ipoyo jami ma otime ikare ma okato anged? <i>Having physical reactions (e.g., heart pounding, trouble breathing, or sweating) when something reminded you of a stressful experience from the past?</i>	<input type="checkbox"/>	
1006	Iweko tamo, onyo lok i kom gigi mogo pien poyo wi ikom jami ma raco ma okato anged? <i>Avoid thinking about or talking about a stressful experience from the past or avoid having feelings related to it?</i>	<input type="checkbox"/>	
1007	Iweko tic onyo weko gigi mogo pien poyo wi ki i jami ma okato anged? <i>Avoid activities or situations because they remind you of a stressful experience from the past?</i>	<input type="checkbox"/>	
1008	Ibedo ki peko pi poyo jami ma pir gi tego ma otime ma rac ikare ma okato anged? <i>Trouble remembering important parts of a stressful experience from the past?</i>	<input type="checkbox"/>	
1009	Irwenyo miti ikom jami ma nongo imaro timo? <i>Loss of interest in things that you used to enjoy?</i>	<input type="checkbox"/>	
1010	Iwinyo ni itye kama bor onyo ipoke ki ikom jo mukene? <i>Feeling distant or cut off from other people?</i>	<input type="checkbox"/>	
1011	Inongo ni komi too tidu onyo pe itwero bedo kede cwiny me mara i kom jo macok kedi? <i>Feeling emotionally numb or being unable to have loving feelings for those close to you?</i>	<input type="checkbox"/>	
1012	Iwinyo calo ni anyimi bi gik atura? <i>Feeling as if your future will somehow be cut short?</i>	<input type="checkbox"/>	
1013	Itye ki peko me cako nino onyo bedo ame inino woko? <i>Trouble falling or staying asleep?</i>	<input type="checkbox"/>	
1014	Iwinyo ni kitye ka yeli ki ikeco oyoto? <i>Feeling irritable or having angry outbursts?</i>	<input type="checkbox"/>	
1015	Inongo ni tek me keto cwinyi ka timo jami? <i>Having difficulty concentrating?</i>	<input type="checkbox"/>	
1016	Ibedo ma cwinyi poto onyo komi myel? <i>Being “super alert” or watchful on guard?</i>	<input type="checkbox"/>	
1017	Ibedo ame komi popoa onyo cunyi pe opye? <i>Feeling jumpy or easily startled?</i>	<input type="checkbox"/>	

Appendix 19: Instruments – War exposure (caregiver questionnaire)

- “ The next few questions are going to be about war. They are the last questions I will ask you. If they disturb you or you don’t want to answer, please say so, I will move to the next question.”

NO.	QUESTION	ANSWER	CODING CATEGORIES
1101	Onyo ngato moo ma gang wu oceto ilweny eni? <i>Did any of your close family members go to fight in the war?</i>	<input type="checkbox"/>	1. Yes 2. No 3. Don't want to answer
1102	Onyo ibedo ma cok ki ka ma gwenyo mac otime iye? <i>Did you experience shooting at a very close distance?</i>	<input type="checkbox"/>	
1103	Tika ki-dio wun me tenyo caro nyo tawun-wu? <i>Were you forced to leave your village or town?</i>	<input type="checkbox"/>	
1104	Tika ki ryemo wun ki gang wu? <i>Were you expelled from your home?</i>	<input type="checkbox"/>	
1105	Tika I bedo ki kare mo ma onongo iti ki tam ni gi twero neki woko? <i>Were you ever in a situation where you thought you would be killed?</i>	<input type="checkbox"/>	
1106	Onyo ineno dano moo ma gu nongo awano ma coki? <i>Did you see people who had been recently injured?</i>	<input type="checkbox"/>	
1107	Tika ngatmo macok ki-gang wu onongo awano I kare me lweny? <i>Was any one of your close family members injured during the war?</i>	<input type="checkbox"/>	
1108	Tika kin gang wu opoke pi lok pa lweny en-ni? <i>Were you separated from your close family members because of the war?</i>	<input type="checkbox"/>	
1109	Onyo ngat mo ki gang wu otoo ikare me lweny? <i>Was any one of your close family members killed during the war?</i>	<input type="checkbox"/>	
1110	Tika dano ma-ti ki jemi lweny gudonyo gang wu tektek? <i>Did armed men ever forcibly enter your home?</i>	<input type="checkbox"/>	
1111	Tika ineno kom dano ma gi neko? <i>Did you see a dead body?</i>	<input type="checkbox"/>	
1112	Tika kec oneki ma nongo itamo ni dong ibi-too woko? <i>Were you ever so hungry you thought you would die?</i>	<input type="checkbox"/>	
1113	Tika ineno ngato mo ma gi tye ka neko ne? <i>Did you see someone being killed?</i>	<input type="checkbox"/>	
1114	Tika ineno ngat mo ma onongo kitye ka wunu? <i>Did you see someone being tortured?</i>	<input type="checkbox"/>	
1115	Tika ngato mo omi bura me neki ikare me lweny? <i>Did anyone directly threaten to kill you during the war?</i>	<input type="checkbox"/>	
1116	Tika ki maki ikare me lweny? <i>Were you ever held in detention during the war?</i>	<input type="checkbox"/>	
1117	Onyo imio kony me tingu dano ma onongo awano onyo dano mo-otoo? <i>Did you help to carry wounded or dead people?</i>	<input type="checkbox"/>	
1118	Onyo ineno dano-mapol ma ki neko lumuku? <i>Did you see many people being killed at once?</i>	<input type="checkbox"/>	
1119	Tika inongo awano i kare me lweny? <i>Were you injured during the war?</i>	<input type="checkbox"/>	
1120	Tika kitiyo kedi calo kwot i kare me lweny? <i>Were you ever used as a human shield during the war?</i>	<input type="checkbox"/>	
1121	Tika ineno ngato mo ma ki butu kwede tektek onyo ki nywaro ki miti me butu ikare me lweny? <i>Did you see someone being raped or sexually abused during the war?</i>	<input type="checkbox"/>	
1122	Tika irwenyo jemi ni onyo jemi ni obale pi lweny? <i>Did you experience loss or destruction of property because of the war?</i>	<input type="checkbox"/>	
1123	Gwok ngato mo ki gang wu ki neko ikare me lweny? <i>Was any one of your close family members killed during the war?</i>	<input type="checkbox"/>	

Appendix 20: Explanatory and confounding variables

treat	= 1 if supported by WCH, 0 otherwise
FU	= 1 if follow-up data from 2014, 0 if data from 2012
treatFU	= treat × FU
Female child	= 1 if the pupil is female, 0 otherwise
Age child	= age of pupil in completed years
IQ	= age-adjusted intelligence quotient of pupil as compared to our sample
P2, P3, ..., P7	= 1 if pupil is enrolled in the respective grade, 0 otherwise
Female caregiver	= 1 if caregiver is female, 0 otherwise
Literacy caregiver	= 0 if caregiver never reads a newspaper, 1 otherwise
Wealth caregiver	= asset index on a scale of 0 to 1 constructed by factor analysis
HH size	= number of people living in the household, including pupil and caregiver
Parent	= 1 if the caregiver is the child's biological parent, 0 otherwise
War exposure caregiver	= index of caregiver's exposure to conflict on a scale of 0 to 1 constructed from a 23-item set of yes/no questions ⁸⁶
Trauma caregiver	= index of caregiver's traumatization on a scale of 0 to 1 constructed by factor analysis of a 17-item set of 3-point Likert-type questions ⁸⁷

⁸⁶ Adapted from Macksoud (1992) following Bellows and Miguel (2009) after several lab and field tests to ensure cultural and contextual validity.

⁸⁷ Adapted from the PTSD Checklist (Weathers et al., 1993) after several lab and field tests to ensure cultural and contextual validity.

Appendix 21: Sub-sample balance for long-term effect DID estimation – Outcome indicators

	Treatment	Control	Difference
Textbook	0.611 (0.490)	0.508 (0.502)	0.103 (0.083)
Absent	0.259 (0.440)	0.242 (0.430)	0.018 (0.057)
Reading	0.301 (0.335)	0.297 (0.368)	0.004 (0.055)
Writing	0.521 (0.318)	0.482 (0.302)	0.039 (0.046)
Observations	108	120	

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard deviations / clustered standard errors in parentheses

Appendix 22: Sub-sample balance for long-term effect DID estimation – Confounding variables

	Treatment	Control	Difference
Female caregiver	0.426 (0.497)	0.467 (0.501)	-0.041 (0.103)
Age caregiver	43.3 (13.2)	42.5 (10.7)	0.8 (1.5)
Literacy caregiver	0.361 (0.483)	0.292 (0.456)	0.069 (0.058)
Wealth caregiver	0.235 (0.157)	0.188 (0.146)	0.047** (0.020)
HH size	8.33 (3.54)	8.05 (2.66)	0.28 (0.51)
Female child	0.537 (0.501)	0.458 (0.500)	0.079 (0.048)
Age child	11.46 (2.54)	11.53 (2.56)	-0.06 (0.30)
IQ child	99.9 (14.9)	99.3 (12.8)	0.6 (2.3)
P2 pupil	0.370 (0.485)	0.350 (0.479)	0.020 (0.029)
P4 pupil	0.370 (0.485)	0.350 (0.479)	0.020 (0.031)
P6 pupil	0.260 (0.440)	0.300 (0.460)	-0.040 (0.059)
Observations	108	120	

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard deviations / clustered standard errors in parentheses

Appendix 23: Long-term effect estimations (DID)

	Textbook	Absent	Reading	Math
treat	0.354 (0.249)	0.083 (0.200)	0.074 (0.075)	0.070 (0.052)
treatEL	-0.198 (0.277)	0.018 (0.241)	-0.057 (0.071)	-0.014 (0.059)
EL	-0.041 (0.218)	-0.208 (0.180)	-0.064 (0.046)	-0.065 (0.051)
Female child	-0.366 ^{***} (0.122)	0.222 [*] (0.116)	-0.033 (0.028)	-0.054 [*] (0.030)
IQ			0.003 (0.002)	0.002 ^{**} (0.001)
Wealth caregiver	0.274 (0.397)	-0.680 (0.521)	-0.143 (0.105)	-0.040 (0.102)
Literacy caregiver	-0.185 (0.126)	0.155 (0.203)	-0.004 (0.043)	0.044 (0.036)
HH size	0.005 (0.024)	-0.014 (0.027)		
Class dummies	yes	yes	yes	yes
Constant	-0.265 (0.268)	-0.653 ^{**} (0.310)	-0.596 ^{***} (0.175)	0.020 (0.092)
N	531	531	509	510

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered at the school level in parentheses

Appendix 24: Short- and medium-term effects estimations – Self-esteem

	BSD	DID
treat	-0.018 (0.013)	-0.020 (0.014)
treatEL		0.019 (0.012)
EL		0.014 (0.017)
Age child	0.003 (0.003)	0.010*** (0.003)
Female child	-0.000 (0.011)	-0.022** (0.009)
IQ	0.002*** (0.000)	0.002*** (0.000)
Wealth caregiver	0.028 (0.041)	-0.030 (0.026)
Parent	-0.015 (0.010)	-0.014 (0.010)
Intel. caregiver	0.006 (0.049)	-0.012 (0.043)
Consc. caregiver	0.110*** (0.031)	-0.008 (0.027)
Extra. caregiver	0.077 (0.056)	0.052* (0.031)
Agree. caregiver	-0.023 (0.039)	0.002 (0.041)
Emo. st. caregiver	-0.007 (0.038)	0.009 (0.018)
Esteem caregiver	0.197*** (0.035)	0.191*** (0.034)
Locus caregiver	-0.115* (0.062)	-0.102* (0.056)
War exposure caregiver	0.046 (0.040)	0.035 (0.031)
Trauma caregiver	0.007 (0.045)	-0.011 (0.026)
Constant	0.223*** (0.070)	0.333*** (0.092)
N	486	1091

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses

Appendix 25: Short- and medium-term effects estimations – Emotional wellbeing

	BSD	DID
treat	-0.017 (0.020)	-0.017 (0.018)
treatEL		0.037 (0.034)
EL		0.010 (0.020)
Age child	0.007** (0.004)	0.010*** (0.003)
Female child	0.009 (0.020)	0.039*** (0.011)
IQ	0.002*** (0.001)	0.001** (0.000)
Wealth caregiver	0.058* (0.032)	0.057** (0.028)
Parent	0.009 (0.028)	-0.004 (0.018)
Intel. caregiver	-0.001 (0.073)	0.017 (0.029)
Consc. caregiver	-0.063 (0.071)	-0.046 (0.048)
Extra. caregiver	0.056 (0.088)	0.033 (0.065)
Agree. caregiver	0.079 (0.069)	-0.018 (0.041)
Emo. st. caregiver	-0.121** (0.054)	-0.106*** (0.036)
Esteem caregiver	-0.047 (0.046)	0.025 (0.033)
Locus caregiver	0.092 (0.075)	0.101*** (0.033)
War exposure caregiver	0.035 (0.055)	0.043 (0.040)
Trauma caregiver	0.008 (0.042)	0.051** (0.020)
Constant	0.057 (0.161)	0.052 (0.096)
N	485	1090

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses

Appendix 26: Short- and medium-term effects estimations – Physical wellbeing

	BSD	DID
treat	0.019 (0.024)	0.019 (0.025)
treatEL		0.023 (0.032)
EL		-0.000 (0.015)
Age child	-0.000 (0.004)	0.004 (0.003)
Female child	0.027* (0.015)	0.054*** (0.013)
IQ	-0.001** (0.001)	-0.000 (0.000)
Wealth caregiver	-0.058 (0.053)	-0.052 (0.033)
Parent	0.015 (0.024)	-0.003 (0.015)
Intel. caregiver	-0.104** (0.049)	-0.093** (0.037)
Consc. caregiver	0.039 (0.094)	0.082* (0.043)
Extra. caregiver	-0.049 (0.069)	-0.071 (0.047)
Agree. caregiver	0.156** (0.078)	0.061 (0.042)
Emo. st. caregiver	-0.141*** (0.043)	-0.137*** (0.025)
Esteem caregiver	-0.030 (0.056)	0.062 (0.058)
Locus caregiver	0.098 (0.062)	0.023 (0.038)
War exposure caregiver	0.186*** (0.026)	0.086*** (0.021)
Trauma caregiver	0.055 (0.036)	0.067*** (0.023)
Constant	0.309* (0.170)	0.259** (0.109)
N	485	1090

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses

Appendix 27: Short- and medium-term effects estimations – Family relations

	BSD	DID
treat	-0.012 (0.014)	-0.009 (0.015)
treatEL		0.018 (0.023)
EL		-0.013 (0.023)
Age child	-0.007** (0.003)	-0.010*** (0.002)
Female child	0.011 (0.012)	-0.001 (0.011)
IQ	0.001 (0.000)	0.001*** (0.000)
Wealth caregiver	-0.005 (0.067)	-0.048 (0.047)
Parent	0.035* (0.018)	0.009 (0.013)
Intel. caregiver	-0.028 (0.056)	-0.012 (0.018)
Consc. caregiver	0.058* (0.033)	0.163*** (0.032)
Extra. caregiver	0.006 (0.051)	0.010 (0.035)
Agree. caregiver	0.002 (0.086)	-0.030 (0.043)
Emo. st. caregiver	0.008 (0.042)	0.024 (0.022)
Esteem caregiver	0.082* (0.047)	-0.026 (0.029)
Locus caregiver	-0.049 (0.052)	-0.060* (0.036)
War exposure caregiver	-0.069 (0.047)	-0.092*** (0.035)
Trauma caregiver	0.003 (0.025)	-0.024 (0.023)
Constant	0.832*** (0.109)	0.942*** (0.081)
N	486	1090

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses

Appendix 28: Short- and medium-term effects estimations – Peer relations

	BSD	DID
treat	0.008 (0.019)	0.008 (0.017)
treatEL		-0.032 (0.025)
EL		0.037 ^{***} (0.013)
Age child	0.001 (0.003)	0.001 (0.003)
Female child	0.004 (0.012)	-0.008 (0.010)
IQ	0.001 ^{***} (0.000)	0.001 ^{***} (0.000)
Wealth caregiver	-0.106 ^{**} (0.051)	-0.100 ^{***} (0.036)
Parent	0.019 (0.018)	0.023 [*] (0.012)
Intel. caregiver	0.115 ^{**} (0.052)	0.024 (0.040)
Consc. caregiver	0.137 ^{***} (0.048)	0.139 ^{***} (0.034)
Extra. caregiver	0.035 (0.053)	0.068 ^{***} (0.025)
Agree. caregiver	0.007 (0.045)	0.049 (0.052)
Emo. st. caregiver	0.016 (0.031)	0.035 (0.030)
Esteem caregiver	-0.051 (0.047)	-0.056 (0.037)
Locus caregiver	0.043 (0.068)	0.064 (0.051)
War exposure caregiver	-0.044 (0.047)	-0.076 ^{***} (0.026)
Trauma caregiver	0.039 (0.034)	0.017 (0.017)
Constant	0.492 ^{***} (0.089)	0.579 ^{***} (0.062)
N	486	1091

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses

Appendix 29: Short- and medium-term effect estimations - Intellect

	BSD	DID
treat	-0.025* (0.015)	-0.024 (0.015)
treatEL		0.020 (0.025)
EL		0.008 (0.015)
Age child	0.002 (0.003)	0.000 (0.003)
Female child	-0.002 (0.013)	-0.018 (0.012)
IQ	0.002*** (0.001)	0.002*** (0.000)
Wealth caregiver	0.029 (0.045)	-0.090** (0.039)
Parent	0.012 (0.015)	-0.002 (0.011)
Intel. caregiver	0.103** (0.040)	0.084** (0.034)
Consc. caregiver	0.064 (0.061)	-0.010 (0.036)
Extra. caregiver	-0.042* (0.025)	0.020 (0.029)
Agree. caregiver	0.024 (0.044)	0.002 (0.038)
Emo. st. caregiver	-0.047 (0.036)	-0.023 (0.027)
Esteem caregiver	0.104** (0.041)	0.071*** (0.027)
Locus caregiver	-0.028 (0.047)	-0.029 (0.034)
War exposure caregiver	0.086* (0.045)	0.063** (0.028)
Trauma caregiver	0.028 (0.027)	0.041** (0.018)
Constant	0.169 (0.112)	0.400*** (0.059)
N	484	1089

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses

Appendix 30: Short- and medium-term effects estimations – Conscientiousness

	BSD	DID
treat	0.004 (0.018)	0.008 (0.019)
treatEL		-0.031 (0.020)
EL		0.062*** (0.017)
Age child	0.009** (0.004)	0.010*** (0.003)
Female child	-0.004 (0.016)	0.006 (0.019)
IQ	0.001 (0.001)	0.002*** (0.000)
Wealth caregiver	-0.104* (0.058)	-0.098*** (0.037)
Parent	-0.013 (0.013)	-0.026* (0.015)
Intel. caregiver	0.000 (0.053)	-0.031 (0.045)
Consc. caregiver	0.193* (0.110)	0.294*** (0.076)
Extra. caregiver	0.047 (0.051)	0.004 (0.019)
Agree. caregiver	0.074 (0.060)	0.061 (0.082)
Emo. st. caregiver	0.022 (0.050)	0.007 (0.043)
Esteem caregiver	0.005 (0.043)	-0.025 (0.036)
Locus caregiver	-0.028 (0.057)	-0.003 (0.030)
War exposure caregiver	-0.053 (0.048)	-0.016 (0.053)
Trauma caregiver	0.149*** (0.046)	0.068** (0.031)
Constant	0.333*** (0.088)	0.287*** (0.063)
N	482	1087

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses

Appendix 31: Short- and medium-term effects estimations – Extraversion

	BSD	DID
treat	-0.009 (0.015)	-0.011 (0.015)
treatEL		0.014 (0.022)
EL		0.002 (0.016)
Age child	0.000 (0.003)	0.000 (0.002)
Female child	-0.007 (0.018)	-0.005 (0.012)
IQ	0.002*** (0.001)	0.001*** (0.000)
Wealth caregiver	-0.117*** (0.040)	-0.161*** (0.031)
Parent	0.040** (0.017)	0.017 (0.012)
Intel. caregiver	-0.027 (0.031)	-0.026 (0.034)
Consc. caregiver	0.050 (0.044)	-0.008 (0.031)
Extra. caregiver	0.047 (0.041)	0.083*** (0.027)
Agree. caregiver	0.023 (0.037)	0.079*** (0.031)
Emo. st. caregiver	-0.046 (0.033)	-0.037** (0.017)
Esteem caregiver	0.056 (0.036)	0.039** (0.018)
Locus caregiver	0.099** (0.047)	0.019 (0.030)
War exposure caregiver	0.058* (0.032)	0.003 (0.024)
Trauma caregiver	0.018 (0.041)	0.004 (0.017)
Constant	0.338*** (0.099)	0.510*** (0.062)
N	485	1090

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses

Appendix 32: Short- and medium-term effects estimations – Agreeableness

	BSD	DID
treat	0.013 (0.018)	0.015 (0.018)
treatEL		-0.019 (0.029)
EL		0.024* (0.014)
Age child	0.006* (0.003)	0.007*** (0.002)
Female child	-0.014 (0.017)	0.006 (0.012)
IQ	0.001 (0.001)	0.000* (0.000)
Wealth caregiver	-0.012 (0.033)	-0.044 (0.033)
Parent	0.017 (0.012)	0.002 (0.007)
Intel. caregiver	-0.043 (0.050)	-0.032 (0.026)
Consc. caregiver	-0.014 (0.057)	0.016 (0.036)
Extra. caregiver	0.067* (0.037)	0.074** (0.029)
Agree. caregiver	0.183*** (0.045)	0.115** (0.048)
Emo. st. caregiver	-0.033 (0.026)	-0.033*** (0.012)
Esteem caregiver	-0.015 (0.037)	-0.021 (0.028)
Locus caregiver	0.064 (0.053)	-0.004 (0.035)
War exposure caregiver	0.037 (0.054)	0.029 (0.026)
Trauma caregiver	0.102*** (0.031)	0.056*** (0.020)
Constant	0.373*** (0.087)	0.480*** (0.039)
N	484	1089

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses

Appendix 33: Short- and medium-term effects estimations – Emotional stability

	BSD	DID
treat	0.009 (0.010)	0.010 (0.010)
treatEL		-0.025 (0.016)
EL		0.003 (0.011)
Age child	0.001 (0.002)	-0.003 (0.002)
Female child	-0.012 (0.019)	-0.019 (0.014)
IQ	0.000 (0.001)	0.000 (0.000)
Wealth caregiver	0.010 (0.030)	-0.017 (0.024)
Parent	0.035** (0.016)	0.019 (0.016)
Intel. caregiver	-0.100* (0.051)	-0.058 (0.042)
Consc. caregiver	0.057 (0.069)	0.016 (0.047)
Extra. caregiver	-0.112** (0.046)	-0.033 (0.026)
Agree. caregiver	-0.001 (0.075)	0.054 (0.058)
Emo. st. caregiver	0.239*** (0.041)	0.192*** (0.029)
Esteem caregiver	0.053* (0.032)	-0.002 (0.028)
Locus caregiver	-0.156** (0.066)	-0.110*** (0.031)
War exposure caregiver	-0.091** (0.046)	-0.032 (0.042)
Trauma caregiver	-0.005 (0.034)	-0.053* (0.029)
Constant	0.586*** (0.123)	0.604*** (0.083)
N	485	1090

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses

Appendix 34: Short- and medium-term effects estimations – Locus of control

	BSD	DID
treat	0.025 (0.022)	0.024 (0.021)
treatEL		-0.028* (0.016)
EL		-0.019 (0.013)
Age child	0.005* (0.003)	-0.002 (0.002)
Female child	0.008 (0.008)	0.003 (0.007)
IQ	0.001** (0.000)	0.000 (0.000)
Wealth caregiver	0.002 (0.041)	-0.012 (0.039)
Parent	-0.006 (0.016)	-0.015 (0.009)
Intel. caregiver	-0.166*** (0.046)	-0.104*** (0.027)
Consc. caregiver	-0.110 (0.068)	-0.017 (0.041)
Extra. caregiver	0.128*** (0.035)	0.073*** (0.020)
Agree. caregiver	0.023 (0.043)	0.023 (0.027)
Emo. st. caregiver	-0.033 (0.038)	-0.008 (0.030)
Esteem caregiver	0.090*** (0.035)	0.041* (0.025)
Locus caregiver	0.341*** (0.048)	0.210*** (0.043)
War exposure caregiver	-0.060 (0.047)	-0.029 (0.033)
Trauma caregiver	-0.000 (0.044)	-0.006 (0.025)
Constant	0.619*** (0.062)	0.784*** (0.056)
N	484	1089

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard errors clustered by age in parentheses

Appendix 35: Financial efficiency

Quality Education Improvement Project

	DIRECT COSTS				INDIRECT COSTS (24%)				COORDINATION COSTS (30%)				TOTAL COSTS			
	2012	2013	2014 (until Aug)	Total	2012	2013	2014 (until Aug)	Total	2012	2013	2014 (until Aug)	Total	2012	2013	2014 (until Aug)	Total
QEIP																
Abim	36,639	44,771	#####	97,369	8,793	10,745	3,830	23,369	2,638	3,223	1,149	7,011	48,071	58,739	20,939	127,748
Lira	53,261	43,532	#####	110,111	12,783	10,448	3,196	26,427	3,835	3,134	959	7,928	69,878	57,114	17,474	144,466
Pader	18,856	22,793	3,251	44,899	4,525	5,470	780	10,776	1,358	1,641	234	3,233	24,739	29,904	4,265	58,908
	108,756	111,095	#####	252,379	26,101	26,663	7,807	60,571	7,830	7,999	2,342	18,171	142,688	145,757	42,677	331,122

TVET Project

	DIRECT COSTS				INDIRECT COSTS (24%)				COORDINATION COSTS (30%)				TOTAL COSTS			
	2012	2013	2014 (until Aug)	Total	2012	2013	2014 (until Aug)	Total	2012	2013	2014 (until Aug)	Total	2012	2013	2014 (until Aug)	Total
Abim	9,467	31,395	0	40,862	2,272	7,535	-	9,807	682	2,260	-	2,942	12,421	41,190	-	53,611
Lira	7,782		0	7,782	1,868	-	-	1,868	560	-	-	560	10,211	-	-	10,211
Pader	13,769	5,830	0	19,599	3,305	1,399	-	4,704	991	420	-	1,411	18,065	7,649	-	25,714
	31,019	37,224	-	68,243	7,444	8,934	-	16,378	2,233	2,680	-	4,914	40,697	48,838	-	89,535

Technical paper FOKAPAWA/ZOA

1. Introduction

This technical report about the Forum for Kalongo Parish Women Association (FOKAPAWA) is one of the studies within the framework of the Joint MFSII evaluation at country level – Uganda. In particular, the report serves to give input to the overall joint evaluation report on MFSII funding to the Millennium Development Goals, Capacity Development, and Civil Society Strengthening.

The outline of the technical report is as follows. First, Chapter 2 gives a description of the context, in which FOKAPAWA operates, highlighting the main relevant (international) political, economic, cultural and social issues with which the organization has to deal in pursuance of its objectives.

Chapter 3 gives a project description and the profile of FOKAPAWA e.g. its mission, vision, and strategic objectives. After chapter 3, the report is split up in to two parts. Part A deals with the contribution of FOKAPAWA to the millennium development goals, while part B explores the capacity development of FOKAPAWA. Both parts have the same remaining structure. The data collection and analytical approach section gives attention to the methodological choice made. This study aims at giving plausible explications on the effectiveness of ZOA's support to FOKAPAWA, based on regression, descriptive and theoretical evidence. These explanations are given to FOKAPAWA's capacity development and realized MDG outcomes. We end each part with a Discussion and Conclusion concerning the evaluation questions.

1.1. *Brief summary of the analyses and the findings*

1.1.1. Millennium Development Goals

The project had some positive impact on only 2 out of the 12 measured education outcome indicators, and no or even negative impact on the remaining 10. We did our utmost to be able to attribute any detected impact to the project and to rule out the effects of other factors on the results by controlling for a wide range of potential confounding factors. Some of these factors do indeed seem to significantly affect the outcome indicators.

1.1.2. Capacity Development

In the study approach qualitative and quantitative research methods are combined. The approach is centered on the comparison between triangulated baseline data (2012) and triangulated follow-up (endline) data (2014). For this background documents, Focus groups/group interviews, workshops, and organizational self-assessments in 2012 and 2014, resulting in 2 sets of capability scores. Endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, were qualified in terms of 'improved', 'stable', or 'worsened'.

The qualifications and their reasons were peer reviewed in a workshop.

Changes of the core capabilities 3 and 4 showed improvement since 2012, which is not completely in line with ZOA's focus per core capability since then. Core capability 1 was the most focused by ZOA, but the change was the strongest in core capability 3. ZOA's second focus on the core capabilities 2, 3, and 5 did the best pay off in core capability 3; for core capabilities 2 and 5 no change was observed.

There is a risk that if FOKAPAWA cannot succeed safeguarding sufficient funding timely, and that the organization may be forced to reduce its size below its critical mass. This may imply a loss of important regional expertise and networks, that are needed to attend the needs of the organization's target groups.

ZOA's approach can thus only be maintained, provided that there is a clear understanding with local authorities and other donors about the importance of FOKAPAWA's approach and operations.

The way ZOA supports FOKAPAWA has developed over time, demonstrated an increased focus on capacity development. FOKAPAWA's organizational capacity appears strengthened, but the pace of this strengthening can be higher. In the current setup with other development partners, ZOA is recommended to continue its involvement in FOKAPAWA, and additionally recommended to seek how it

can complement to the capacity efforts development of other development partners (government, other donors, other CSOs).

In the assessment of the project design the statements The project was well designed , The project was implemented as designed, and The project reached all its objectives were not rated, because of lacking financial data, which are needed to assess the relative importance of MFS2 funding that may influence FOKAPAWA's capacity development. ZOA's interventions cannot be seen as a separate project; better is it to refer to programmatic interventions, which fall since 2013 under ZOA's support to education at the one hand and to ZOA's capacity development support at the other hand..

2. Context

Around 30% of the Ugandan population lives below the poverty level, especially in rural areas. The situation is worse in northern Uganda, where an estimated 95% of the population currently lives in absolute poverty and statistics have shown Gulu to now have the second highest poverty rate in northern Uganda, with local income 30% below the national average.

During several years of brutal violence in northern Uganda, 1.8 million people were forcibly displaced into camps for Internally Displaced Persons (IDPs) and thousands of children were abducted to serve as child soldiers. In 2006 a ceasefire was negotiated between the Lord's Resistance Army (LRA) and the Government of Uganda and today the north is relatively calm. Nevertheless, the growing gap between rich and poor, disputes over land, and an increase in unemployment among youth threaten the peace process. Tens of thousands of IDPs have only recently made the journey home – either to their original villages or to transit areas nearby.

The Lord's Resistance Army (LRA) is not exercising military operations and terror in Northern Uganda since 2006 anymore, as the government of Uganda and the LRA signed a Cessation of Hostilities Agreement. Regained stability in this part of the country has allowed about three quarters of the 1.8 million people who had been forced into camps to return to their homes and to start the process of rebuilding their lives. In 2007 the Peace, Recovery and Development Plan for Northern Uganda (PRDP) within the context of peace in Acholiland was established.

Through the PRDP the national government and the donor community engaged themselves in setting a framework for the recovery and development of the region of North Central Uganda. PRDP is funded out of Uganda's central government budget as well as other sources. PRDP projects include the Northern Uganda Social Action Fund, and the Northern Uganda Agricultural Livelihoods Recovery Program. Donors also provide funding through local and international NGOs working on specific issues.

After-war recovery required focused attention to re-establishing communities that were seriously disrupted during the war. The physical result of the war in terms of agriculture production and land access is particularly harmful to the Acholi, as the majority heavily depend on subsistence farming; this posed a serious threat to the economic stability of the communities. On top of that many family members have committed atrocities against others e.g. killing, maiming, stigmatization, abduction, burning of houses and are all threats to the social stability of communities. The war in northern Uganda has eroded the hitherto Acholi social set of customs and traditions. Some rituals might not have been performed for a long time in particular areas, because wartime insecurity and the resultant extreme poverty made this impossible. The conflict has inevitably changed the form of cultural identity among the Acholi, who are now shaped not only by tradition, but also by the Christian and Muslim faiths, as well as by 'modernity'.

The war caused the deaths of many men, and women lost access to the land gained through their husbands, as the consequence of the Acholi patrilineal land system. Without the husband as owner, the clan (clan chiefs) or family took over the ownership of this land and owned it communally without granting the women rights over land. For this reason land conflicts emerged and meant a constant threat to stability in Acholiland as neighbors, families and clans dispute, sometime in a violent way, over land and ownership. Local governments appeared to be unwilling or not able to help women to regain access to the land.

Linked to this, domestic violence has become a serious social issue as well. The Acholi culture denies woman to participate in many activities including leadership, the right to own land, rights over children and that land belongs to the clan and owned communally. Women can be thrown out of family land level

at any time and the cultural system will not protect them. This has hindered women taking initiatives, since most of the activities that would may empower women are related to agriculture. Secondly women are bread winners providing all basic household needs, which in some cases expose them to contract HIV/AIDS.

Women are central in the economic activities, because of their major contribution to agriculture. In terms of labor, women contribute considerably to planting, weeding, harvesting, and mostly to the preparation and processing of agricultural produce. Their strategic contribution to local subsistence economies appears however not to match with their access and control over production resources (ownership of land, capital and access to technologies) ; their male counterparts often violate their human rights and make little contributions to household activities

The war has also had an enormous impact on the demographic and skills base of the region. A large percentage of the population are currently under 18, with limited or no education and skills. Traditional subsistence farming is unfamiliar to many young people, who have grown up in the Internally Displaced Persons camps during the war. This may aggravate the risk of future armed conflicts as young people are unable to secure an income and become an easy target for recruitment into armed rebellion. The lack of skilled labor poses a significant risk that local people will not fully benefit from the opportunities that become available during economic recovery, in turn reinforcing the economic marginalization of Northern Uganda.

Besides the government, civil society plays an own role in the peace and reconciliation efforts from 2006 onwards through the medium of communication, institutions and social networks outside the state and the economy. The Civil Society Organizations for Peace in Northern Uganda (CSOPNU) operates herein as an umbrella organization. Longer-term livelihoods interventions have now emerged, with national and international NGOs with an emphasis on access to markets and micro finance in their programs/projects. Mostly these interventions are combined with an orientation on improvement of basic education facilities, and on trauma processing.

Whilst the primary net enrolment rate in Uganda is high, drop-out rates are also high and the quality of education is poor, as reflected in the low levels of completion and literacy and numeracy achievement rates. The government declared Universal Primary Education in 1997 while Universal Secondary Education was declared in 2006. However schools have insufficient or non-existent learning and teaching resources and absentee rates for teachers are high. The linkage between school and the immediate community is minimal, with most parents having no interest in their children's education. A low literacy rate among parents and lack of learning support from them result in high dropout rates. In addition, many girls drop out of school when they reach puberty to get married and there is also evidence that sexual harassment and abuse cause girls to drop out of school.

Within the Alliance Dutch Consortium for Rehabilitation ZOA Uganda supports the Kalongo Parish Women Associations (FOKAPAWA). FOKAPAWA focuses its activities on women an youth, which have suffered heavily from the war situation (rapes, forced mobilization as combatants). In this the organization is engaged in issues around land property rights, trauma related problems, domestic violence, peace building, and livelihoods development.

3. Project description

3.1.1. Profile Southern Partner Organization (SPO)

Forum for Kalongo Parish Women Association (FOKAPAWA) is a registered community based organization that was founded in 1998 by a group of four people. FOKAPAWA was founded on a humanitarian ground to elevate the condition of women who have suffered so much as a result of the prolonged war in Acholi sub-region. FOKAPAWA is located in Kalongo Town council and operates in 9 sub counties (Wol, Lukole, Parabongo, Omot, Paimol, Lapono, Adilang, Omiya Pacwa and Kalongo Town council) of Agago District.

FOKAPAWA's mission concerns the support to "women and youths to know their rights and be able to work towards a better livelihood by getting involved in Income Generating activities (IGAs) and peace building activities in Agago and Pader Districts."¹

¹ FOKAPAWA (2012). Strategic Plan 2012-2014. Kalongo: Forum for Kalongo Parish Women Associations (FOKAPAWA), p. 7.

FOKAPAWA's current mission resulted from various experiences since its foundation. The organization has shown over time to be capable implementing various programs/projects funded by different donor organizations. In all these projects FOKAPAWA could offer a firm connection with women and youth groups in the Agago and Pader Districts. Initially in 1998 with support under FAO's Telefood program that provided women with seed and tools, two mother gardens for cassavas seed multiplication (100 acres) were planted. Later FOKAPAWA succeeded establishing women groups in different sub counties: the organization started with 54 women groups through World Food Program (WFP) agricultural tools and food for work program mainly in Parabongo and Wol sub-counties. Actually the organization has over 220 Women groups in the seven (9) sub-counties of Wol, Paimol, Lapono, Parabongo, Lukole, Adilang, omiya Pacwa and Kalongo Town council. In the process of establishment of the groups and expanding its operations, FOKAPAWA got support from Uganda Red Cross Society, French Embassy, and National Environment Management Authority (NEMA).

With the help of Italian Co-operation, FOKAPAWA implemented a Child Protection Program in the seven (7) sub-counties for one year only, at present FOKAPAWA is involved in Women Empowerment for Peace (WEP) project for 3 years in the sub counties of Lapono and Paimol with support from CARE Austria and CARE International in Uganda.

From 2009 to date, to date FOKAPAWA entered into partnership with CARE International in Uganda in the implementation of ROCO KWO Program (Transforming Lives) in the sub counties of Wol, Adilang and later in Paimol and Lapono respectively. FOKAPAWA got funding from Care International to implement the project 'Harnessing Opportunities to Protect and End violence' (HOPE) over the period 2011-2013, and operated in the sub counties of Omot, Lukole and Wol in Agago District. The same counts five-year program 'Roco Kwo' (2009-2013) also funded by CARE International, with support from the Norwegian Development Agency and the Austrian Development Cooperation through CARE Norway and Austria.

The organization focuses in its Strategic Plan 2012-2014 on 6 strategic goals and related strategies for the fulfilment of its mission i.e.:

- Women and youth enjoying their rights through the promotion of equal justice and rights for all
- Increase of household incomes through improved agriculture and savings by women and children
- Reduction of stigma among post-war survivors through facilitating psychosocial support to them
- Reduction of gender-based violence by community mobilization for changing related behavior
- Enjoyment of peace by women and youth through their active involvement in peace building
- Improved education by increased enrolment, retention, and completion of primary schools; by community awareness on education by parents promoting girls' education with special attention to environmental conservation.

To implement these strategies FOAPAWA facilitates a broad range of activities:

- (Skills) trainings, radio talk shows drama groups, counselling, men's groups, sports events, sensitization campaigns
- Meetings with local councilors, religious leaders, opinion leaders, cultural leaders and women councilors
- Material support (i.e. seeds, ox ploughs, storage)
- Linking with local markets and exchange visits
- Mobilization savings and credits associations, peace committees and HIV/AIDS clubs
- Mobilization of Parents Teachers Associations (PTA's) and School Management Committees (SMC's), PTA and SMC reviews²

The Strategic Plan 2012-2014 formulates also a set of program outcomes that should be realized per 2014; in 6 of 9 outcomes quantitative targets are set. This regards the following outcomes:

- 95% of Local authorities will have been trained and known rights on land and property and be able to help others to participate and have the ownership.
- 350 men actively involved in campaigning

² FOKAPAWA (2012). Strategic Plan 2012-2014. Kalongo: Forum for Kalongo Parish Women Associations (FOKAPAWA), p. 7-10.

- 70 FOKAPAWA women groups will have been used to multiply seeds of rice, sunflower, and fruit growing and bee-keeping for their members at household levels.
- At least 85% of the Community structures will have received training and actively engaged in mobilizing the community against Sexual Gender Based Violence (SGBV).
- Women, men and youth in the areas of FOKAPAWA operation will have realized the importance of psychosocial support and are making use of it.
- Women and youth are actively involved in Peace building activities at Community level and with neighbors.
- Stakeholder are actively participating for the promotion of better education for all more emphasis on girl child education
- 90% of Girls are able to be enrolled, retained and complete primary education.
- 170 PTA's and 204 SMCs trained on their roles and responsibilities and the implementation of priority action plan and management action plan.³

Per 2013 the organization employed a total of 10 qualified staff (1 program Coordinator, 1 Accountant, and 7 program staff and 1 office assistant inclusive at office and 50 community volunteers that are based in sub-counties of operation. But early 2014 FOKAPAWA employs less personnel; 7 in total: 1 Program coordinator, 4 program staff, 1 office assistant, 1 accountant, and 50 volunteers in the sub-counties, but now less intensively involved in FOKAPAWA's activities, due to the closure of the Harnessing Opportunities to Protect and End violence Project (HOPE) project.

Currently ZOA, Trocaire, and Accord (through Open Society Initiative) are now donors that sustain FOKAPAWA's salaries. Care International in Uganda funded during the period 2011-2013 the implementation of the HOPE project; no new project came in its place.

With funding support from ZOA Refugee Care Uganda Program, FOKAPAWA implements the project Name "Be in School Stay in School" in 2 Sub counties (Lukole and Parabongo), Agago District (2-12-2103). The project envisages support to School Management Committees (SMC's) and Parent Teacher Associations (PTA's) in 17 primary schools in these sub-counties. In addition teachers are trained to meet national educational standards and is the establishment of school clubs stimulated. In all these activities the central issue of school dropouts is addressed. ZOA did not provide clear budget and expenditure data on the project.

FOKAPAWA continued to secure funding from other development partners Trocaire, UNwomen, Uganda women Network (UWONET).

FOKAPAWA works with Pader NGO Forum, Agago NGO Forum and Agago District local Government and all other partners mentioned above.

The Strategic Plan 2012-2014 does not give any information about FOKAPAWA's projected yearly budgets or the size of contributions different donor organizations do contribute. Also year plans and related budgets have not been revealed. It is therefore not possible to the relative importance of capacity development within the total budget.⁴

3.1.2. Support Co-funding Organization (CFA) to SPO

ZOA has supported FOKAPAWA over the period 2011-2014 with funding program costs and a series of capacity development activities (for its education program "Be in School Stay in School" (see previous paragraph) and the implementation of its Capacity Development Plan 2014-2015⁵). operations.

Within the ZOA Capacity Development Plan 2014-2015 specific staff trainings were provided and planned for 2014-2015 on Governance structure (for Board of Directors), financial / administrative management (for staff), Fundraising and networking (managements and responsible staff) and M&E, reporting and learning (for management , responsible staff, and ZOA Kampala Bureau staff), and Team building (for staff). In addition ZOA carried out a support visits for improving FOKAPAWA's financial administration.

³ FOKAPAWA (2011). Strategic Plan 2012-2014. Kalongo: Forum for Kalongo Parish Women Associations (FOKAPAWA), p. 10-11.

⁴ FOKAPAWA as well its CFA ZOA Uganda and ZOA Netherlands have been approached to get these data frequently in the course of October-November 2014, but no avail.

⁵ ZOA (2013). Capacity Development Plan for Partner FOKAPAWA 2014-2015. Apeldoorn, ZOA.

Table 1 gives the amounts disbursed by ZOA over the period 2011-2014 for the mentioned activities; no specification was given what part of these disbursements regarded capacity development.

Table 1: ZOA disbursements to FOKAPAWA 2011-2014⁶

Year	Disbursed amounts (€)
2011	10,050
2012	13,627
2013	11,487
2014	6,006
Total	41,170

Mixed expenditures for education and capacity development

Most of these disbursements were linked to the capacity development of FOKAPAWA. For 2011 and 2012 these were not specified; it concerned coaching visits and on the job trainings. For 2013 trainings on log frame development and reporting, on DCR monitoring protocol,⁷ and on planning and budgeting were carried out. Further assistance was extended in the development FOKAPAWA's monitoring and evaluation tools.⁸

In the baseline report Core Capability 1 (To Act and commit) was the most targeted, followed by Core Capability To Adapt and Self Renew, and To Deliver on Development Objectives. Table 2 shows ZOA's orientation towards FOKAPAWA's capacity development during the baseline study.⁹

Table 2: ZOA's targeting core capabilities FOKAPAWA - Baseline report measurement

1. Act and commit Training in and assistance to proposal writing resulting in successful proposal	4
2. Adapt and self-renew Joint M&E with ZOA; gap analysis with focus on effectiveness and efficiency	3
3. Deliver on development objectives Funding 2 project officers and frequent coaching by ZOA	3
4. Relate to external stakeholders FOKAPAWA established networks its self; some support ZOA	2
5. Achieve coherence ZOA supported completion manuals on Human resources, Finances, and Procurement; also Assets register put up	3

(1-5: 1 - not targeted, 5 - intensively targeted)

The focus on the core capabilities 1, 2, and 3 was intensified/maintained over the period June 2012 - June 2014. In the Capacity Development Plan 2014-2015 Core Capability 1 gets attention by trainings geared to Governance structure, financial / administrative management, Fundraising and networking, and team building most attention, followed by attention to Core Capability 2 by trainings on M&E, and reporting and learning, and trainings on reporting, and on DCR monitoring protocol.¹⁰

Table 3 displays ZOA's focus on FOKAPAWA's capacity development at the time of the endline, in which described changes in orientation are rated.

Table 3: ZOA's targeting core capabilities FOKAPAWA - Endline report measurement

1. Act and commit Training in and assistance to governance structure, financial /administrative management, log frame development and fundraising and team building	5
2. Adapt and self-renew Trainings on M&E, reporting and learning, and DRC monitoring protocol	4
3. Deliver on development objectives Frequent coaching by ZOA	3
4. Relate to external stakeholders Some support to networking, but FOKAPAWA established networks its self	2
5. Achieve coherence No further specific support	1

(1-5: 1 - not targeted, 5 - intensively targeted)

⁶ Financial data provided by ZOA Uganda Kampala Office.

⁷ Monitoring protocol designed for and used by the Dutch Consortium for Rehabilitation (DCR), of which ZOA is a member

⁸ ZOA (2014). Annual Review 2013 on FOKAPAWA. Apeldoorn: ZOA.

⁹ Bulte, E., J. Klomp, J. Duchoslav, E. Kamphuis, and B. Lof (2013). Joint MFS-II Evaluation Uganda: Baseline Report, p. 384-386.

¹⁰ ZOA (2013). Capacity Development Plan for Partner FOKAPAWA 2014-2015. Apeldoorn, ZOA.

Regarding FOKAPAWA's active work on developing its capacities was concluded in the baseline June 2012) that the 'organization is active in developing its capabilities within the ramifications of its donors. In the organization's own budget funds allotted for staff workshops and staff trainings modest; most funds are spent for program implementation.'¹¹ This circumstance essentially did not change, which induced ZOA to focus more on the organization's capacity development, besides its programmatic support in the area of education.

3.1.3. Key features project

ZOA's support to FOKAPAWA with MFS2 funds covers one strategic goal that the organization covers i.e. education. The other strategic goals regard equal rights, agricultural practices and savings, psycho social problems, gender based violence, and peace building. ZOA and FOKAPAWA consider however all strategic goals as a whole, which implies that the strategic goals outside education get attention in the project "Be in School Stay in School". ZOA moved in 2012 'from hardware-focused to training/software-focused skills; the capacity building of Parent Teacher Associations and School Management Committees'¹² In 2011 already 74 members of Parent Teacher Associations were trained already in making action plans¹³, but in 2013 the intention was to reach more 240 members of SMC's and PTA's trained on literacy and numeracy¹⁴; FOKAPAWA became in this project the main implementer.

In this entire range of activities that ZOA supports FOKAPAWA, capacity development has a clear place, because ZOA experienced that in the working with FOKAPAWA as partner for its educational program, additional capacity development support was needed. ZOA Uganda has developed the earlier mentioned capacity development plan covering the period 2014-2015. Input to this plan was ZOA's monitoring of FOKAPAWA capacity development using the 5C framework;¹⁵ ZOA's first 5C assessment was made in December 2013 as baseline; in December 2014 and December 2015 follow-up assessments are foreseen¹⁶. ZOA's capacity development focus in 2014 for FOKAPAWA regarded: Project reporting, Monitoring and evaluation, Project implementation, and Financial management.¹⁷

4. Millennium Development Goals

4.1. Data collection

The main objective of the project is to reactivate the primary education system in the post-conflict setting of Northern Uganda. The project is implemented in part directly by ZOA, and in part by two local partner organizations – FOKAPAWA and Kwal Ryeko. By providing capacity training to Parent-Teacher Associations (PTAs) and School Management Committees (SMCs) as well as material support to schools, the project aims at increasing community involvement in and better efficiency of the provision of primary education services. The increased community involvement should lead to better accessibility of primary education, while efficiency increases should improve its quality and ultimately the academic performance of the pupils.

ZOA and its partners implemented the project in 42 schools in Pader and Agago districts. In 18 of them, the project started in 2012 and was already running by the time our baseline data was collected. The project was still continuing in 2014. All these schools are included in our sample as Group 1. In another 12 schools, the project was also already running in 2012, but was to be phased out before the follow-up in 2014. 5 of these schools are in our sample as Group 2. In the remaining 12 schools, the project began in 2013, i.e. after the baseline data collection, and was still continuing in 2014. All 12 are included in our sample as Group 3.

Given the noticeable presence of various NGOs in Northern Uganda, it is difficult to find a group of control schools about which it could be plausibly maintained that it is not (or has not recently been) part of a similar educational project by another NGO. We therefore use schools supported by an NGO with a different focus as a control group. There are 12 in Pader and Agago districts, 5 of which overlap with the

¹¹ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. 387

¹² ZOA (2013). ZOA Annual Report 2012. Apeldoorn: ZOA, p. 82.

¹³ ZOA (2012). ZOA Annual Report 2011. Apeldoorn: ZOA, p. 90.

¹⁴ ZOA (2014). ZOA Annual Report 2013. Apeldoorn: ZOA, p. 78.

¹⁵ 5 Core Capabilities framework

¹⁶ ZOA designed an internal 5C assessment tool that was used doing the baseline; Scores to the 5 core capabilities are assigned on the basis of 30 standardized questions.

¹⁷ ZOA (2014). ZOA Annual Review 2013. Apeldoorn: ZOA.

ZOA-supported schools (1 with Group 1, 2 with each Group 2 and 3). All 12 schools are included in our sample as Group 4.¹⁸ In each school, we interviewed a sample of pupils, their primary caregivers, and their teachers.

We held a baseline survey in the Autumn of 2012. We drew a random sample of 12 pupils stratified by class (4 from each P2, P4 and P6 classes) in each school to be interviewed. In cases where one of the grades was not available (due to exams etc., 6 pupils from each of the two remaining classes were selected). The primary caregiver of each of the sampled pupils and the teachers of P2, P4 and P6 were also interviewed where available.

In the Summer of 2014, we conducted a follow-up survey using the almost same sample technique. That is, in each school, we selected all the pupils interviewed during the baseline and still enrolled at the school. We then randomly selected more pupils so as to interview at least 4 from each baseline cohort that should still be enrolled (4 from each P2, P4 and P6 classes). In the next step, we randomly selected enough P2 pupils to bring the total sample to 16. We increased the number of second-graders as compared to the baseline in order to reduce the relatively high noise in the responses of the youngest children. Finally, again the primary caregiver of each of the sampled pupils and the teachers of P2, P4 and P6 were interviewed where available. Table 4 below shows the composition of our sample.

Table 4: Sample overview

	Group 1		Group 2		Group 3		Group 4	
	2012	2014	2012	2014	2012	2014	2012	2014
Ongoing intervention	Yes	Yes	Yes	No	No	Yes	No	No
Schools	18	18	5	5	12	12	12	12
Pupil-caregiver couples	216	288	60	80	144	192	144	192

In our analysis below, we distinguish two kinds of outcome indicators:

- Short-term outcome indicator, i.e. those which can be affected by the intervention shortly after it has started.
- Long-term outcome indicators, on which the intervention is likely to have any impact only after several years.

Depending on the kind of outcome indicator, we use different subs-samples to estimate the impact of the project:

- To estimate project impact on short-term outcome indicators for which we have data from both 2012 and 2014, we use Group 3 (excluding the 2 schools in which it overlaps with Group 4) as a treatment group, and Group 4 (excluding the 5 schools in which it overlaps with other groups) as a control.
- To estimate project impact on short-term outcome indicators for which we only have data from 2014, we combine Groups 1, 2, 3 into one treatment group (controlling for the different times of project commencement) and a Group 4 (excluding the 5 schools in which it overlaps with other groups) as a control group.
- To estimate project impact on long-term outcome indicators, use combine Groups 1 and 2 into one treatment group, and use Group 3 – where long-term effect could not have taken place yet by the time of our follow-up data collection in 2014 – as a control group.

¹⁸ For a list of the sampled schools, see Appendix 1.

Table 5 and Table 6 report the descriptive statistics of the short and long term indicators used in this paper.¹⁹

Table 5: Short-term outcome indicators – school level

	Treatment		Control		ALL
	2012	2014	2012	2014	
PTA know	0.883 (0.322) 120	0.925 (0.264) 160	0.798 (0.404) 84	0.875 (0.332) 112	0.880 (0.325) 476
PTA useful	0.915 (0.280) 106	0.791 (0.408) 148	0.855 (0.355) 69	0.796 (0.405) 98	0.834 (0.373) 421
SMC know	0.592 (0.494) 120	0.538 (0.500) 160	0.524 (0.502) 84	0.500 (0.502) 112	0.540 (0.499) 476
SMC useful	0.986 (0.119) 71	0.709 (0.457) 86	0.886 (0.321) 44	0.839 (0.371) 56	0.844 (0.363) 257
Furniture		0.639 (0.483) 97		0.600 (0.503) 20	0.632 (0.484) 117
Teaching time		0.683 (0.380) 157		0.617 (0.436) 31	0.672 (0.389) 188

Legend: mean
(std. deviation)
observations

Where

- *PTA know*: Dummy equal to 1 if caregiver know what is a PTA and that there is one in their child's school.
- *PTA useful*: Dummy equal to 1 if caregiver says that the PTA is very useful, 0 otherwise.
- *SMC know*: Dummy equal to 1 if caregiver know what is an SMC and that there is one in their child's school.
- *SMC useful*: Dummy equal to 1 if caregiver says that the SMC is very useful, 0 otherwise.
- *Furniture*: Fraction of pupils in a class who have both a desk and a chair or a bench.
- *Teaching time*: A fraction of class time teachers were teaching.²⁰

¹⁹ See Appendices 2–9 for specific survey instruments.

²⁰ A weighted average of dummies equal to 1 if the pupil's teacher was teaching in the morning/afternoon of the last school day prior to the interview, 0 otherwise. Only mornings are counted for P2 and P3 classes, which usually do not have lessons scheduled in the afternoon.

Table 6: Long-term outcome indicators – pupil level

	Treatment		Control		ALL
	2012	2014	2012	2014	
Textbook	0.547 (0.499) 276	0.457 (0.498) 368	0.507 (0.502) 144	0.427 (0.496) 192	0.484 (0.500) 980
Absent	0.250 (0.434) 276	0.179 (0.384) 368	0.250 (0.435) 144	0.208 (0.407) 192	0.215 (0.411) 980
Reading	0.264 (0.331) 276	0.145 (0.260) 368	0.289 (0.359) 143	0.136 (0.236) 192	0.198 (0.300) 979
Math	0.451 (0.319) 276	0.358 (0.327) 368	0.477 (0.298) 144	0.369 (0.316) 192	0.404 (0.322) 980
Retention		0.684 (0.466) 193		0.684 (0.467) 98	0.684 (0.466) 291
Progress		1.329 (0.652) 149		1.293 (0.590) 116	1.313 (0.625) 265

Legend: mean
(std. deviation)
observations

Where

- *Textbook*: Dummy equal to 1 if the pupil has a reading textbook, 0 otherwise.
- *Absent*: Dummy equal to 1 if the pupil has been absent from school for a continuous week this school year, 0 otherwise.²¹
- *Reading*: The fraction of words from a simple, short (68 words) English text the pupil was able to read within a minute.
- *Math*: Fraction of 7 simple mathematical problems which the pupil was able to solve correctly.
- *Retention*: Dummy equal to 1 if the pupil was enrolled in P2 or P4 in 2012 and was still enrolled in the school in 2014, 0 if the pupil was enrolled in P2 or P4 in 2012 but was not enrolled in the school anymore in 2014.
- *Progress*: Number of grades completed by the pupil between 2012 and 2014.

4.2. Analyses and results

We estimate short-term effects on outcome indicators for which we have data from both 2012 and 2014 using a difference-in-differences (DID) approach as well as difference-in-differences with kernel propensity score matching (DID-PSM). We use a sub-sample of schools comprised of Group 3 (excluding the 2 schools in which it overlaps with Group 4) as a treatment group, and Group 4 (excluding the 5 schools in which it overlaps with other groups) as a control. The project intervention only started in 2013 in Group 3, making the 2012 data collection wave a true baseline. As it is difficult to find sufficiently similar schools that were not receiving (or had not recently received) any NGO support, we use Group 4 as a control. Schools in this group were receiving NGO support throughout the two years of the study, but the focus of this project lied was quite different from ZOA's (dealing mainly with psychosocial wellbeing of the pupils). Indeed, at the time of the baseline data collection, the two groups were largely similar in terms of the short-term outcome indicators as well as the observed confounding factors (see Appendix 2 and 3).

²¹ The baseline and follow-up levels cannot be directly compared since the two surveys were conducted at a different time of the year (November and June respectively). The changes in the levels can nonetheless be compared using a difference-in-differences approach.

Short-term effects on outcome indicators for which we only have cross-sectional data from 2014 are estimated using a between-subject difference (BSD) approach as well as kernel-based propensity score matching (PSM). Since there are no baseline levels to control for in this case, we can combine Groups 1, 2 and 3 into one treatment group, using Group 4 (excluding the 5 overlaps with the remaining groups) as a control. The treatment and control groups were statistically identical in terms of the observed confounding factors at the time of the baseline data collection (see Appendix 13).

To estimate long-term effects, we again employ a DID and a DID-PSM approach in the case of outcome indicators for which we have data from both 2-12 and 2014, and a BSD and a PSM approach in case of indicators for which we only have cross-sectional data. It is not realistic to expect long-term effects to take place within the timeframe of this impact evaluation, which means that we cannot estimate them on the same sub-sample that we used for short-term effect estimation. Group 3 had only been treated for around a year by the time of the follow-up data collection, and using this set-up would therefore lead to an underestimation of any potential effects. The fact that in 2012, Groups 1 and 2 (which were already receiving the treatment for some time) are were statistically indifferent from Group 1 (which had not yet received the treatment) in terms of the observed confounding factors, but especially also in terms of the long-term outcome indicators (see Appendix 5 and 6), strongly supports this assumption. For these reasons, we use Group 3 as a control group, and we combine Groups 1 and 2 into one treatment group.

4.2.1. Research question 1: Provide the results; include sensitivity analyses; succinctly describe the major results.

Table 7: Short-term project effects (DID)

T4: Short-term project effects (DID)

Indicator	DID	DID-PSM
PTA know	-0.013 (0.063)	-0.035 (0.074)
PTA useful	-0.051 (0.073)	-0.017 (0.081)
SMC know	-0.043 (0.095)	-0.013 (0.090)
SMC useful	-0.364*** (0.138)	-0.207** (0.089)

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$
 Probit marginal effects reported for DID, linear probability coefficients reported for DID-PSM.
 Standard errors clustered at the school level in parentheses.

Table 7 summarizes the estimated short-term project effects on outcome indicators for which data are available from both 2012 and 2014. The effects are estimated using DID and DID-PSM approaches. We do not detect any statistically significant effect of the project on the awareness or on the opinion about PTAs. Similarly, we detect no statistically significant effect of the project on the awareness about SMCs. We do, however, detect a significant decline (between 21% and 36%) of caregivers having a positive opinion about the SMC in treated schools as compared to control ones. The decline is entirely caused by changes in the treated schools; the opinion about SMCs remains more or less constant in the control ones (see Appendix 17).

Table 8: Short-term project effects (single difference)

T5: Short-term project effects (Single difference)

Indicator	BSD	PSM
Furniture (incl. FOKAPAWA)	0.050 (0.126)	0.044 (0.134)
Furniture (excl. FOKAPAWA)	0.545*** (0.151)	0.334*** (0.088)
Teaching time	0.141 (0.299)	0.038 (0.099)

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Probit/tobit marginal effects reported for DID, linear probability coefficients reported for DID-PSM.

Standard errors clustered at the school level in parentheses.

In addition, Table 8 reports the estimated short-term project effects on outcome indicators for which only 2014 data are available. The effects are estimated using BSD and PSM approaches. The sub-sample used for these estimations allows us to distinguish between the three implementing agencies (ZOA, FOKAPAWA, and Kwal Ryeko). We only report implementer-specific results when they significantly differ from general project results. We do not detect any statistically significant effects of the project on the furnishing of classrooms in treated schools as compared to control ones. However, differentiating between the implementing agencies reveals that only FOKAPAWA-supported schools see no difference in the furnishing of classrooms as compared to control ones. Schools supported by Kwal Ryeko and by ZOA are between 33% and 45% more likely to provide a bench and a desk for all their pupils than schools in the control group. Finally, we do not detect any significant effects of the project on the fraction of class time that teachers spend teaching.

Table 9: Long-term project effects (DID)

Indicator	DID	DID-PSM
Textbook	-0.012 (0.073)	-0.009 (0.075)
Absent	-0.034 (0.050)	-0.037 (0.059)
Reading	0.025 (0.046)	0.042 (0.033)
Math	0.045 (0.048)	0.044 (0.054)

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Probit/tobit marginal effects reported for DID, linear probability coefficients reported for DID-PSM.

Standard errors clustered at the school level in parentheses.

Let us now turn to the long term results. Table 9 summarizes estimated long-term project effects on outcome indicators for which data are available from both 2012 and 2014. The effects are estimated using DID and DID-PSM approaches. The sub-sample used for these estimations allows us to distinguish between the three implementing agencies (ZOA, FOKAPAWA, and Kwal Ryeko), but none of the implementer-specific results were significantly different from general project results, so we only report the effect of the project as a whole. We can draw a number of conclusions from these results. First, we do not detect and statistically significant project effects on the proportion of pupils who have a reading textbook. Second, we find no statistically significant project effects on long-term absence of pupils. Third, the project has no significant effects on pupils' reading skills. Finally, we do not detect any statistically significant project effects on pupils' mathematical skills.

Table 10: Long-term project effects (single difference)

Indicator	BSD	PSM
Retention	0.006 (0.059)	0.007 (0.059)
Retention (Kwal Ryeko only)	-0.130** (0.054)	-0.205*** (0.069)
Progress ²²	-0.033 (0.090)	-0.017 (0.089)
Progress (ZOA only) ²²	0.198* (0.105)	0.209** (0.104)

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Probit/LPM marginal effects reported for DID, linear probability coefficients reported for DID-PSM. Standard errors clustered at the school level in parentheses.

In Table 10 we show the estimated long-term project effects on outcome indicators for which data from only one cross-section are available. The effects are estimated using BSD and PSM approaches. The subsample used for these estimations allows us to distinguish between the three implementing agencies (ZOA, FOKAPAWA, and Kwal Ryeko). We only report implementer-specific results when they significantly differ from general project results. We do not detect any statistically significant effects of the project on pupil retention. However, differentiating between the implementing agencies reveals that while pupil retention in ZOA- and FOKAPAWA-supported schools does not significantly differ from that in control schools, schools supported by Kwal Ryeko exhibit a 2-year retention rate between 13 and 21 percentage points lower than the rest.

Moreover, we do not detect any significant project effects on pupils' grade progress. However, differentiating between the implementing agencies reveals that while pupils in FOKAPAWA- and Kwal Ryeko-supported schools progress through grades at the same rate as those in control school, pupils in schools supported by ZOA completed on average 0.2 more grades over the 2-year evaluation period than pupils in the control schools. Considering that on average, pupils complete 1.3 grades in 2 years, this is a sizable improvement.

Table 11: Impact overview

Outcome indicator	Project effect	Term
PTA know	0	short
PTA useful	0	short
SMC know	0	short
SMC useful	---	short
Furniture	+	short
Teaching time	0	short
Textbook	0	long
Absent	0	long
Reading	0	long
Math	0	long
Retention	-	long
Progress	+	long

Legend: ++ Conclusively positive effect (all estimations yield a significantly positive result)
+ Likely positive effect (some estimations yield a significantly positive result)
0 No effect detected (no significant results)
- Likely negative effect (some estimations yield a significantly negative result)
--- Conclusively negative effect (all estimations yield a significantly negative result)

It should also be noted that given the relatively wide range of observed outcomes, the few detected effects could be the result of the multiple comparisons problem rather than of the project intervention itself. In other words, some of the statistical significance may simply be a matter of probability, which

²² Since the dependent variable is bounded within the [0,2] interval, the most correct estimation technique would be a tobit regression. However, the magnitude of the coefficients resulting from tobit estimations does not have a direct interpretation. We instead report the results of an OLS regression for the BSD estimation. The OLS results are realistic in that they do not predict values outside of the unit interval, they are very similar to the tobit results in terms of significance levels, and can be interpreted directly.

increases in the number of tested indicator differences.²³ A range of methods of adjusting critical p-values to correct for the multiple comparisons problem exist, from the most conservative Bonferroni correction²⁴ to the less stringent Benjamini-Hochberg procedure.²⁵ The appropriateness of the various available correction method and thus the critical p-values, however, a non-trivial matter and still subject to academic discussions. We therefore prefer to point the issue out rather than make arbitrary choices regarding statistical significance.

The fact that we find no statistically significant project effects on many of the outcome indicators could in theory be due to an insufficient sample size and a consequent low power of our estimations. However, our sample was as large as budget and time considerations as well as project specifics allowed, so increasing the sample size based on ex-ante power analysis would not have been possible. Conducting an retrospective power analysis to compute the minimum detectable effect sizes (and thus to determine whether statistically insignificant results reflect no actual deference between the treatment and control groups or just a low-powered estimation) is a controversial issue,²⁶ often considered fundamentally flawed.²⁷ The main reason is that it is immediately obvious that as the significance level increases, retrospective power decreases. Hence in case there is a significant effect, the power will be high, while the power will by definition be low if there is no significant effect. This implies that if we find a significant effect, a power analysis becomes redundant for apparently the power of the test is big enough. It also implies that if we do not find a significant effect the power is apparently too low to pick up the observed effect size. A similar reasoning holds for the reverse power analyses: if the impact is insignificant apparently the sample is too small to pick up the possible effect. Additional information that can be obtained by conducting the reverse power analyses is minor. Retrospective power analyses, also in the form of reverse power analyses suffer from the "power approach paradox."²⁷ Considering the fundamental critiques of retrospective analyses, we do not report and power calculations or minimum detectable effect sizes.

4.2.2. Research question 2: Did the project reach its objectives? Can the results be attributed to the project? If not, why not? Did other factors play a role?

The project had some positive impact on only 2 out of the 12 measured outcome indicators, and no or even negative impact on the remaining 10. We did our utmost to be able to attribute any detected impact to the project and to rule out the effects of other factors on the results by controlling for a wide range of potential confounding factors (see Appendices Appendix 16, Appendix 18, Appendix 19 and Appendix 21). Some of these factors do indeed seem to significantly affect the outcome indicators, as is summarized in Table 12.

²³ Gerber, Alan S., and Donald P. Green (2012). *Field Experiments: Design, Analysis and Interpretation*. New York: W. W. Norton & Company, p. 300.

²⁴ Dunne, O. J. (1959). "Estimation of the Medians for Dependent Variables," *The Annals of Mathematical Statistics* 30(1): 192-197.

²⁵ Benjamini, Y., and T. Hochberg (1995). "Controlling the False Discovery Rate: a practical and powerful approach to multiple testing," *Journal of the Royal Statistical Society, Series B*, 57(1): 289-300.

²⁶ Thomas, L. (1997). "Retrospective Power Analysis," *Conservation Biology* 11(1): 276-280.

²⁷ Hoenig, J. M. , and D. M. Heisey (2001). "The Abuse of Power: The Pervasive Fallacy of Power Calculations for Data Analysis," *The American Statistician*, 55(1): 19-24.

Table 12: Other factors

Outcome indicator	Female caregiver	Age caregiver	Literacy caregiver	Wealth caregiver	HH size	PTA useful	SMC useful	Female child	IQ
PTA know	0	0	++	++					
PTA useful	0	0	0	0					
SMC know	---	++	++	++					
SMC useful	0	0	0	0					
Furniture			-	++		0	0		
Teaching time			---	++		0	0		
Textbook			0	0	0			0	
Absent			0	---	0			++	
Reading			0	0				---	++
Math			0	0				0	++
Retention			0	0	0			0	0
Progress			0	0	0			++	++
Legend:	++	Conclusively positive effect		(all estimations yield a significantly positive result)					
	+	Likely positive effect		(some estimations yield a significantly positive result)					
	0	No effect detected		(no significant results)					
	-	Likely negative effect		(some estimations yield a significantly negative result)					
	---	Conclusively negative effect		(all estimations yield a significantly negative result)					

However, the results should not be considered entirely conclusive due to the overall set-up of the evaluation process. First, the project was already underway in most of the schools by the time we were tasked with the evaluation. The 2012 data collection wave therefore does not constitute a true baseline in the majority of the schools. This limits the sample on which short-term effects can plausibly be estimated to relatively small group, while long-term effects can only be estimated under strict assumptions. Second, the difficulty in finding a control group which was not (or had not recently been) part of an NGO project²⁸ forced us to use schools with an NGO project supposedly focused on a different aspect of education as a control group. Given the multi-faceted nature of most NGO projects however, we cannot completely rule out the possibility of the control schools being affected by their NGO support in a similar way to the treated schools. Finally, education is an area where the gap between policies and their end results is usually measured in years or decades, but certainly not months. This evaluation, on the other hand, was bounded by a period of less than two years. It is therefore very much possible that the project effects are yet to manifest themselves, despite the our insignificant findings.

4.2.3. Research question 3: How relevant are the results?

On the macro level, the United Nations' Millennium Development Goals (MDGs) seek to "[e]nsure that by 2015, children everywhere, boys and girls alike will be able to complete a full course of primary schooling." Progress towards this goal is typically measured by the three targets: the net enrollment ratio in primary education; the proportion of children who complete the primary school cycle; the literacy rate of 15-24 year olds. In addition, an MDG for gender parity is measured by the ratio of female to male enrollment in the primary and secondary school cycles. The World Bank, among others, has favored the primary completion rate as the indicator that best reflects the MDG education goal that children "complete a full course of primary schooling." By this indicator, the world has made substantial progress. The primary completion rate in low-income countries increased from 66 to 74 percent between 1991 and 2004, with growth in all of the poorer regions: Latin America and the Caribbean (86 to 97 percent); Middle East and North Africa (78 to 88 percent); South Asia (73 to 82 percent); and Sub-Saharan Africa (51 to 62 percent). Yet, according to a number of studies the rapid expansion deteriorates quality to the extent that low retention and high drop-out rates prevent universal completion from being achieved.^{29,30}

More on the national level, educational improvements are one of the key points addressed in the National Development Plan written by the government of Uganda. In more detail, the project contributes to first Increased access and equity of primary education for girls and boys. Second, Improve quality and

²⁸ The NGO saturation of Pader and Agago districts is attested to by the fact that while both ZOA and the NGO active in the control schools claimed to only work in places where no other programs are active, 5 of the schools in our sample were supported by both, without one knowing about the other.

²⁹ Lewin, K. M. (2007). "Improving access, Equity and Transitions in Education: Creating a Research Agenda." Project report. Falmer: Consortium for Research on Educational Access, Transitions and Equity (CREATE).

³⁰ Lewin, K. M. (2008). "Strategies for Sustainable Financing of Secondary Education in Sub-Saharan Africa." World Bank Working Paper No. 136. Washington, D.C.: The World Bank.

relevance of primary education for girls and boys. Third, Improve effectiveness and efficiency of primary education.

The projects complements the strategies followed by the Ugandan government by expanding and improving primary school infrastructural facilities, enhance instructional quality to increase pupils' achievement of literacy, numeracy, and basic life skills, and to Ensure that schools manage instructional programs, staff and other resources and become accountable to their communities.

4.2.4. Research question 4: How efficient was the project?

Appendix 22 reports the financial efficiency of the project. Using an average class room of about 30 pupils the average cost is about int\$2.100 annually which is well above the benchmark given by the synthesis team.³¹ However, it is unclear which components the benchmark includes.

4.3. **Discussion and conclusion**

4.3.1. Related literature

Quality of schooling denotes two concepts. The first refers to the years of schooling – it takes into account the amount that a student learns over time from attending school measured by reading and mathematics test scores. The second is related to the extent to which a school's management, teachers, infrastructure, schedule and other factors improve a student's learning.

A number of studies explored the impact of school supplies and assistance on educational performance. Such a package of assistance include for instance uniforms and textbooks. One hypothesis is that these packages have a strong positive impact on learning. In randomized evaluations, Glewwe et al. find no impact from a program to increase textbooks,³² and no impact from flip charts.³³ Banerjee et al. find no impact from additional teachers in India,³⁴ and Duflo et al. find no effect of decreasing the teacher-pupil ratio Kenya.³⁵

One explanation of these disappointing results is that the positive impact of providing more inputs may partially be offset because of the increase in class size. Alternatively, there is a growing concern that the lack of effect of the additional resources is due to indirect effects through changes in teacher or parent behavior. An infusion of resources or a change in effort from one of the actors can lead to a change in the level of investment of the other actors. Therefore, attention has increasingly turned to beneficiary participation as a means to improve service quality. For instance, in Kenya, civil-servant teachers decreased presence at school when school committee hired an extra-teacher.³⁶

Only a handful of studies use actual measures of teacher content knowledge based on an exit exam³⁷ their overall score on a battery of performance tests,³⁸ their primary level content knowledge³⁹ or their "pedagogical content knowledge" (PCK) using real-life teaching situations.⁴⁰ In each case the teacher's knowledge is a significant predictor of student achievement. There are clear limits in conceptualizing school quality solely in terms of days worked or teacher qualifications. One policy initiative in the developing world that provides a natural arena for analyzing more dynamic influences on quality is the community school. Community schools empower principal agents through the use of parent councils that are responsible for making decisions locally, such as the hiring and firing of teachers. One mechanism appears to be a better use of existing capacity, as community school teachers are less frequently

³¹ Bonner, R., P. K. Das. R. Kalra, B. Leathers, and N. Wakeham (2010). "Delivering Cost Effective Sustainable School Infrastructure." Guidance note. London: Department for International Development (DFID).

³² Glewwe, P., N. Ilias, and M. Kremer (2010). "Teacher Incentives," *American Economic Journal: Applied Economics* 2: 205-227.

³³ Glewwe, P., M. Kremer, S. Moulin, E. Zitzewitz (2004). "Retrospective vs. Prospective Analyses of School Inputs: The Case of Flip Charts in Kenya," *Journal of Development Economics* 74: 251-268.

³⁴ Banerjee, A., J. Suraj, M. Kremer, J. Lanjouw, and P. Lanjouw (2002). *Promoting School Participation in Rural Rajasthan: Results from Some Prospective Trials*. Mimeo.

³⁵ Duflo, E., P. Dupas, and M. Kremer (2012). "School Governance, Teacher Incentives, and Pupil-Teacher Ratios: Experimental Evidence from Kenyan Primary Schools." NBER Working Paper No. 17939.

³⁶ Duflo, E., P. Dupas, and M. Kremer (2012). "School Governance, Teacher Incentives, and Pupil-Teacher Ratios: Experimental Evidence from Kenyan Primary Schools." NBER Working Paper No. 17939.

³⁷ Mullens, J., R. J. Murnane, and J. Willett (1996). "The Contribution of Training and Subject Matter Knowledge to Teaching Effectiveness: A Multilevel Analysis of Longitudinal Evidence from Belize," *Comparative Education Review*, 40(2): 139-157.

³⁸ Santibañez, L. (2006). "Why We Should Care if Teachers Get A's: Teacher Test Scores and Student Achievement in Mexico," *Economics of Education Review*, 25(5): 510-520.

³⁹ Harbison, R., and E. Hanushek (1992). *Educational Performance of the Poor: Lessons from Rural Northeast Brazil*. New York: Oxford University Press.

⁴⁰ Hill, H., B. Rowan, and D. Ball (2005). "Effects of Teachers' Mathematical Knowledge for Teaching on Student Achievement," *American Educational Research Journal*, 42(2): 371-406.

absent.⁴¹ But there is also evidence that efficiency gains in some areas are being offset by capacity limitations in others.

4.3.2 Conclusion and summary

The main objective of the project is to reactivate the primary education system in the post-conflict setting of Northern Uganda. The project is implemented in part directly by ZOA, and in part by two local partner organizations – FOKAPAWA and Kwal Ryeko. By providing capacity training to Parent-Teacher Associations and School Management Committees as well as material support to schools, the project aims at increasing community involvement in and better efficiency of the provision of primary education services. The increased community involvement should lead to better accessibility of primary education, while efficiency increases should improve its quality and ultimately the academic performance of the pupils. The research question underlying this evaluation therefore is: does the project improve the academic performance of the pupils in targeted schools? Key indicators consequently focus on academic performance including reading skills, text comprehension, mathematical skills and government test scores.

The project impact is measured as the change in indicator values between the baseline and the endline. Assuming no attrition, we used difference in differences between a three treatment groups and a control group. Each of the treatment groups is composed of schools supported by one of the implementing organization. We selected the schools using stratified random sampling to reflect the proportion of schools supported by each organization. Within the schools, we also used stratified random sampling to account for pupils of all age groups as well as for their parents and teachers.

Turning to the results, the project had some positive impact on only 2 out of the 12 measured education outcome indicators, and no or even negative impact on the remaining 10. We did our utmost to be able to attribute any detected impact to the project and to rule out the effects of other factors on the results by controlling for a wide range of potential confounding factors. Some of these factors do indeed seem to significantly affect the outcome indicators.

Table 13 gives a summary of the conclusions of this project on a scale of 1 to 10, with 1 being “not at all” and 10 being “completely”.

Table 13: Evaluation table

Question	Score
The project was well designed	5
The project was implemented as designed	7
The project reached all its objectives	2
The observed results are attributable to the project interventions	5
The observed results are relevant to the project beneficiaries	5
The project was implemented efficiently	5

5. Capacity development

5.1. Data collection and analytical approach

For putting up the baseline on capacity development for the SPO FOKAPAWA the evaluation tools are shortly explained. For the field research for the baseline and endline (follow up assessment) studies two special Research Manuals were written.⁴²

5.1.1. Background documents

For both the baseline as the endline initially on strategy, context and activities were studied and verified with concerned SPO (FOKAPAWA) and related CFA (ZOA Uganda, ZOA Netherlands).

⁴¹ Gropello, E. di, and J. Marshall (2005). “Teacher Effort and Schooling Outcomes in Rural Honduras.” In E. Vegas (Ed.), *Incentives to Improve Teaching: Lessons from Latin America*, p. 307-358. Washington, D.C.: The World Bank.

⁴² Kamphuis, E. (2012). “Evaluation Study Capacity Development of Southern Partner Organisations – Baseline – Uganda.” Research Manual. Molenrij/Kampala: ETC International.
Kamphuis, E. (2014). “Evaluation Study Capacity Development of Southern Partner Organisations – Endline – Uganda.” Research Manual. Molenrij/Kampala: ETC International.

5.1.2. Focus groups/group interviews

Focus group interviews were held with FOKAPAWA's management and the important stakeholders for getting data on the organizations development and its working environment. In these interviews attention was given to the organization's *Timeline* until the baseline year 2012, its *Theory of Change*, and the *Results Chain CFA - SPO - Target groups / stakeholders*. *Observation* of the SPO's office and working environment gives additional information about the SPO.

A complementary approach was followed in the fieldwork of the endline study that has taken place during the period May 2014; herein interview formats were used emphasizing *key changes and wished changes* within the SPO, as seen by interviewees from the SPO personnel, from externals and from the supporting CFA.

5.1.3. Organizational self-assessment

In the baseline as well as the endline organizational self-assessments were done with respondents of the SPO; in the endline assessment was aimed at a participation of 30% of the respondents present in the baseline assessment⁴³; for FOKAPAWA this was 37.5%; the endline workshop has taken place on 14 May 2014. The same questionnaire covering 5 Core Capabilities and connected indicators with prompting questions was used, in order to facilitate comparability between the baseline and endline outcomes.

Outcomes of the self-assessment in the baseline were related to all elements of *Focus groups/group interviews* for making up a *Synthesis scoring form* that is the basis for the evaluation of each core capability and its underlying aspects. After processing the *Synthesis scoring form* a debriefing feedback meeting with FOKAPAWA has taken place to discuss determining factors for the given scores. After these debriefing additional *self-reporting* was requested from the respondents; they were asked to issue their remarks/comments on the synthesis scoring form. Final scoring and related explanations were given by the evaluators in a feedback meeting on 28 September 2012 and later peer reviewed.

Outcomes in the endline were related to interview findings (with FOKAPAWA personnel, externals, and ZOA Uganda). Then endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, reflecting changes in core capabilities and their underlying aspects over the period June 2012 - June 2014, were qualified in terms of 'improved', 'stable', or 'worsened'. These qualifications were generated by an Excel tool that was specially developed for this purpose; the tool generated endline scores per core capability and their underlying aspects, based on multiple choice answers on 64 questions; the other 18 questions regarded open requests for additional comments per different aspect/core capability and did not influence the scoring. The tool thus firstly determined endline scores per core capability and their underlying aspects and these scores were then related with the scores of the baseline study for getting the change qualifications⁴⁴. The change qualifications of the core capabilities and their underlying aspects were linked with an inventory of determining factors for these changes. This was done in workshop sessions and interviews; for FOKAPAWA change qualifications, determining factors and open comments provided in the questionnaire were captured in a workshop report and interview reports. The workshop report was reviewed in a special feedback meeting with FOKAPAWA on 27 August 2014; subsequently the workshop reports was peer reviewed, and served as input for the evaluator's final assessment.

5.1.4. Observation forms

Regarding FOKAPAWA a detailed chronology of study/research activities was recorded on Observation forms. In the forms was also space for the researchers to make observations on the research process, the collected data, or the cooperation extended by FOKAPAWA and ZOA as related CFA.

5.1.5. Reasons for choice of mentioned methods

Organizational assessments regard essentially interactive processes between the evaluated organization and the evaluators. Taking a baseline does not only concern the handling of measurement tools, but also the triangulation of collected findings in interviews/focus groups. The followed approach is thus a mixture

⁴³ This proved to be possible in the case of FOKAPAWA, as the key persons in the organization were still in place (see Profile SPO)

⁴⁴ The scores of the baseline study were in 2012 not made up by means of this tool; the final scores were then determined by putting up the Synthesis scores. For consistency sake the original 2012 scores were reviewed with the Excel tool, in order to get a comparison between the baseline and endline scores on the same basis; in a view cases baseline scores had to be adapted; these adaptations were in general marginal. Through the review of the baseline scores with the Excel tool, both baseline and endline scores are given with one decimal.

of two perspectives. Firstly: the application of survey research and feedback, and secondly: the strong attention for people working in organizations that face changes. For that reason data gathering through a questionnaire and self-assessment went hand in hand.

Respecting the two perspectives simultaneously means that research techniques like Difference-in-Differences are not applicable in this assessment framework. Factors influencing organizational development are complex and multidimensional and cannot be captured in the 5C research within the timeframe given.

Organizational assessments combine different measuring and observation methods as mentioned above with assessment based on expertise in the area of organizational development. Difference-in-Differences and Randomized Controlled Trial (randomized assignment) for example can hardly be matched with such combination.

The choice for the mentioned methods has implications for type of evidence the endline study can generate and consequently in what terms effectiveness of interventions can be qualified. Table 14 gives an overview of the 4 possible levels of evidence, the related parameters of evidence / types of research, and hence the qualifications of the effectiveness of interventions.⁴⁵

Table 14: Evidence ladder

Levels of evidence	Parameter of evidence	Types of research	Effectiveness of interventions
4. Causal	As in 1, 2, and 3, but there is now sound and substantial evidence that the outcome is caused by the intervention and/or clear evidence showing which ingredients of the intervention are responsible for the outcome.	<ul style="list-style-type: none"> - Randomized Control Trial - Repeated case studies (N=1 designs) 	Efficacious
3. Indicative	As in 1 and 2, but it has now been demonstrated that the intervention clearly leads to the desired outcomes (e.g. goals are attained, target problems decrease, competencies increase, clients are satisfied).	<ul style="list-style-type: none"> - Quasi-experimental studies - Theory of Change studies - Norm referenced approaches - Benchmark studies - Client satisfaction studies - Goal attainment studies - Quality assurance studies 	Functional
2. Theoretical	As in 1, but the intervention now has a plausible rationale (i.e. a program theory) to explain why it should work with whom	<ul style="list-style-type: none"> - Reviews - Meta-analysis - Expert knowledge studies 	Plausible
1. Descriptive	The essential elements of the intervention (e.g. goals, target group, methods and activities, requirements) have been made explicit	<ul style="list-style-type: none"> - Descriptive studies - Observation studies - Analysis of documents - Conduct of interviews 	Potential

The approach followed in the capacity development component of the MFS2 regarding the Capacity development of Southern partner organizations is mainly related to the evidence level 'theoretical'. So the effectiveness of the interventions can the best be qualified as 'plausible'. The types of research related to the levels of evidence 1 and 2 (Descriptive and Theoretical) corresponds with the described earlier in this chapter.

The use of the 5 Core capabilities conceptual framework made it possible to compare baseline and endline scores of core capabilities and thus to reach to a certain extend the level of evidence 'indicative'. One should however realize that for the determination of the final score and the qualifications of

⁴⁵ This overview is based on the various 'ladders of evidence' that are in use in health research; the overview takes the realities of developmental research into account.

capability changes interviews, workshops, and core group discussions were vital, besides observation studies. Time constraints made it also not possible to carry out a profound Theory of Change study or client satisfaction studies. Hence the capacity development study can the best generate plausible explanations of the effectiveness of researched interventions.

It should be noted here that the plausible explanations could not be supported by data from annual plans/budgets and annual reports/expenditure overviews.

5.2. Results

This chapter gives a descriptive analysis of the findings collected during the follow-up assessment (endline study) following the approach described in the previous chapter. The endline study generated scores per core capability and their underlying aspects that are based on scores per indicator. The comparison between baseline and endline scores are here not given at indicator level, as the scores on aspects underlying the core capabilities give sufficient insight in the major changes per each core capability⁴⁶ and thus on the organization's capacity development over the period June 2012 - June 2014 (i.e. baseline scoring and endline scoring periods). Per each aspect an explanation given on the finally assigned change qualifications, based on the change qualifications given stemming from the questionnaires used in the organizational self-assessment. . If the difference between the baseline and endline scores was between -0.25 and + 0.25, the aspect change was qualified as "stable", if the difference was more than + 0.25, then the qualification was "improved", and if the difference was less than -0.25, the aspect change was qualified as "worsened". The final change qualifications, set by the evaluator, take into account what emerged in the workshops, interviews, focus group meetings and the final feedback meeting with FOKAPAWA. The baseline and endline scores are given with one decimal to make clear how the Change qualifications stemming from the questionnaires were given. After the explanations of the change qualifications per aspect an explanation is given on the overall change qualifications per entire core capability.

⁴⁶ Detailed data at indicator level are captured in the Excel scoring tool and can be made available.

Table 15: Capability to commit

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator ´s change qualification after workshops/interviews
1 Capability to act and commit	3.1	3.1	Stable	Stable
1a Level of effective leadership	3.0	3.0	Stable	Stable
1b Level of realistic strategic planning	3.0	2.9	Stable	Stable
1c Level of translation of strategy into operations	3.6	3.4	Stable	Stable
1d Level of staff capacity and motivation	2.5	2.7	Improved	Stable
1e Level of financial resource security	3.6	3.5	Stable	Stable

1a. Stable: FOKAPAWA has undergone a lot of management restructuring since when its funder passed away in 2011. Since then some board members have been problematic and delayed filling the board to the required quorum; the then present board members provided direct support in coordination of the organization, which caused confusion about the roles of management and also the clarity in financial management⁴⁷. The Board became complete in February 2014; its formalization is awaited. Direct support by board members has strengthened information dissemination within the organization, and made bottom-up planning possible (joint effort of implementers, management and board). The current new management allows more staff participation in decision-making (2014). Conditions for effective leadership are in place, and should now (2014) have effect.

1b. Stable: Two program officers were recruited in 2013. This has improved the communication among staff members, as there are now persons directly to report to, as immediate supervisors/program coordinators. In the course of 2013 staffing became reduced however from 10 qualified staff into 7 at the beginning of 2014; this puts more pressure on those remaining. In addition, due to reduced financial means that 50 community volunteers that were active in the sub-counties of FOKAPAWA's operations, have become less intensively involved per 2014.

1c. Stable: Level of translation of strategy into operations remained stable, because there is better supervision and support, which facilitates identifying / addressing gaps (task oriented management was up to standard). FOKAPAWA is currently working to review all its existing policies. Joint planning, guidance and coaching of staff members are facilitated by the management concept papers for new calls for proposals are announced. There is also flexibility to adjust strategies to meet goals e.g. the CARE funded program was formerly mainly oriented on women, but after discussions with the donor this orientation was made less exclusive. Decisions are made in consultation with stakeholders. There is since the beginning of 2013 a clear practice of sharing project activities among all staff members .

Note: Changes could not be substantiated by presenting annual plan and annual reports; this was also the case during the baseline. Reported improvement is recorded from interviews, workshop, and field visit to Kalongo.

1d. Stable: Level of staff capacity and motivation has remained stable, in spite of higher questionnaire score, since there have been no salary increments; appreciation expressed by the organization on performance regards only immaterial rewards (public praising, open positive feedback); space for salary increments are not there, because organization depends only on limited donor funds. Staff has additionally been motivated by the organization's support to pursue further studies.

1e. Stable: Level of financial resource security can be just as stable, since one project was ended (HOPE project funded by CARE), and no new project was acquired in its place. ZOA offered in 2012 capacity building (training and coaching) for FOKAPAWA Board and program staff on log frame analysis, 'do no harm" approach in proposal development, as well as on advocacy, and proposal development in general. Besides that there was frequent communication between FOKAPAWA and ZOA (2012 onwards). Now new proposals were made for different donors i.e. RTI - Research Triangle Institute (USAID funding). Under FOKAPAWA's program component Peace Building, a project for Social accountability for service delivery Government is in design; under the component Education further activities with PTA's and SMC's are in development. FOKAPAWA has secured more funding from ZOA up to 2015, based on its performance and annual contracts with ZOA. The same budget was given as was put up in the 2014 Annual Plan. Incidental funding was acquired in early 2013⁴⁸; Aside ZOA, Trocaire, and Accord (through Open Society Initiative) now donors that sustain FOKAPAWA's salaries. FOKAPAWA's funding base on the short term is worrisome.

Overall the change of core capability To act and to commit can be qualified ad stable. On aspect level there was improvement in the translation of strategy into operations. The organization has shown a steady performance therewith helped by ZOA's training and coaching, but also by its more solid governance setup. Reduced staff numbers and financial resource insecurity however challenge for the near future this steadiness.

⁴⁷ ZOA considered the accountability of the organization a challenge in 2013. ZOA (2014). ZOA Annual Review 2013. Apeldoorn: ZOA.

⁴⁸ One-time additional funding was obtained from the Village Saving and Loan Association (VSLA), through an exchange gain on the interest on funding provided by the donor to the VSLA along with the contribution from women groups. A generator was purchased for FOKAPAWA by using this fund (September 2013). Additionally VSLA tool kits were developed and these have generated income for the organization. in the course of 2013.

Table 16: Capability to adapt and self-renew

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator´s change qualification after workshops/interviews
2 Capability to adapt and self-renew	3.0	2.9	Stable	Stable
2a Level of effective application of M&E	2.6	2.8	Stable	Stable
2b Level of strategic use of M&E	3.2	2.6	Worsened	Worsened
2c Level of openness to strategic learning	3.3	3.5	Stable	Stable
2d Level of context awareness	2.9	2.9	Improved	Improved

2a. Stable: Level of effective application of M&E was stable in spite of higher questionnaire score, since there is in 2014 no M&E person, as was the case in 2012. One staff member works on the M&E of only one project, and not for all FOKAPAWA's projects. In general, FOKAPAWA's staff include regularly M&E in their work. FOKAPAWA has not been able to establish an independent M&E desk within the organization, due to limited funding. The organization has been tracking service delivery through its program staff, which always participated actively in all stages of the projects cycle: project design, implementation and evaluation a new 3-year Strategic Plan (2012-2014) along with a monitoring tool help in measuring the indicators, outputs, financial management, challenges and achievements. The new strategic plan was timely ready to replace the former plan 2009-2012, but the development of a new strategic plan is now awaited.

2b. Worsened: The position of FOKAPAWA's strategic plan is clear, as this was timely in place. Conditions for quantitative monitoring are partially fulfilled (i.e. counting outcomes in terms of units are defined in Strategic Plan 2012-2014, and monitoring tools are available, but it is not clear how these are used). The development of the Strategic Plan 2012-2014 (2012) was done with the involvement of board of governors, beneficiaries (pupils and parents based on monitoring FOKAWA's project activities (2012), Alignment of the organization's focus with that of the country level objectives on MDG3 regarding the prospects for women development were explicitly taken into account (2012). The level of strategic use of M&E is still limited due absence specialized M&E skills in the organization.

2c. Improved: The level of openness to strategic learning has improved externally through aligning the implementation plan to the District Development Plan (DDP). Internally there was more focus on strategic learning of staff members, by taking part in the organization's strategic planning; in which also other partners/stakeholders participate frequently. This is done in regular Monday morning staff meetings and monthly meetings that emphasize joint planning, feedback, and sharing on success and failures. This last practice was Intensified in 2013.

2d. Stable: Awareness on trends in education (i.e. the value of girls child education, as well as the parents' roles in education promotion, curriculum changes, thematic classes and upper classes) is actively pursued by engaging parents out off the agricultural season (2013). A consortium, in which FOKAPAWA works with the Centre for Women in Governance (CEWIGO), a position paper was developed on gender based violence (2014); the District councilor's approval is awaited before the paper can be used as an ordinance for the Agago District.

Overall the change of core capability To adapt and self-renew is qualified as stable with at aspect level a worsened strategic use of M&E and an improved context awareness. The still lacking specialized M&E skills within the organization will become more worrisome, in view of the reduction of the organization's staff size: the organization's accountability regarding output realization may come under pressure at the detriment of the organization's relation with its donors. The still lacking M&E skills may also further affect the quality of annual reporting and related budget monitoring.

Table 17: Capability to deliver on development objectives

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator´s change qualification after workshops/interviews
3 Capability to deliver on development objectives	2.5	3.1	Improved	Improved
3a Extent to which organization delivers on planned products and services	2.8	3.2	Improved	Improved
3b Extent to which delivered products and services are relevant for target population in terms of the effect they have	3.1	3.3	Improved	Improved
3c Level of work efficiency	2.4	2.8	Improved	Stable

3a. Improved: The organization engages staff in planning and implementation, more than was done before. Timely implementation of planned and designed tasks made appropriate disbursement of funds by the donor possible. Communities' capacity to demand for service delivery was developed, due to FOKAPAWA's more focused strategy on to empower youth and women in communities to their rights and to work on better livelihoods at household level. This all takes place under new project "active participation for women in Peace building" and is in line with FOKAPAWA's vision formulated in the current strategic plan.

3b. Improved: "Partners and beneficiaries have ownership of FOAKAPAWA's projects; they were already involved in the baselines for the designing new projects. Also the organization's General Assembly was expanded: in 2012, it consisted of board of governors and 225 groups in 2 sub-counties in Agago district. In 2014, it is made of 450 groups in 10 sub counties and 3 urban councils: Kalong, Agago and Patong. 10 meetings were held at sub-county level to establish the total numbers of membership, as well as to lobby and mobilize for annually payment from the members (2011). Because of FOKAPAWA's membership of the consortium with the Centre for Women in Governance (CEWIGO), each member knows its role during the project design, implementation and monitoring and evaluation. Under CEWIGO the formation of education committees at sub-county level was realized. This meant a change in strategy: a shift took place from district level to sub-county level, in order to get nearer to primary and secondary schools. Besides that advocacy at the sub-county level on the value of education was. Parents, Local Council (LC) members, and the secretary for education all track school enrolment and follow up with the purpose to improve the quality of primary education, school retention and the enrolment of girls child education (2013). These committees existed before, but were not active, due to others commitments of some FOKAPAWA Board members. The education committees on procurement, human resources, finances and management consist 7 members each. They will now play a role in the implementation of agreed policies (May 2014).

3c. Stable: Level of work efficiency improved due to better working environment (availability stand-by generator, more motor bicycles). Efficiency is seen as a result of better and timely inputs to FOKAPAWA's activities and not measured in terms of cost reduction practices or through input/output ratio's. This makes the qualification improved somewhat problematic, but in this justified due to the essential function a generator has for the continuity of FOKAPAWA's work processes.

Overall the change of core capability To deliver on development objectives is qualified as improved. This improvement mainly stems from its service delivery in accordance to the planning that is relevant for the target audience. A clear notion about efficiency is however not present in the organization.

Table 18: Capability to relate

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator 's change qualification after workshops/interviews
4 Capability to relate	3.3	3.6	Improved	Improved
4a Level of involving external parties in internal policy/strategy development	3.1	3.5	Improved	Improved
4b Level of engagement of organization in networks, alliances and collaborative efforts	4.0	4.0	Stable	Stable
4c Extent to which organization is actively engaging with target groups	3.0	3.5	Improved	Improved
4d Level of effective relationships within the organization	2.9	3.3	Improved	Improved
<p>4a. Improved: Co-working with local structures, like cultural and religious leaders existed since 2009, but was intensified 2012-2013. Level of involving external parties in internal policy/strategy development was maintained e.g. Caritas Gulu is involved for supporting the development of demand driven approaches. Frequent contacts with higher government officials were systematically maintained from 2011 onwards.</p> <p>4b. Stable: FOKAPAWA was actively engaged in alliances, and networks, which resulted FOKAPAWA's central position in Agago District. Uganda women organizations established a community resource center at FOKAPAWA offices (2012). Civil society organizations in the district with support of the UN Women's Program voted FOKAPAWA to coordinate the Civil Society organizations within the district (2012). Civil society organizations in the Agago district with support of UN women voted FOKAPAWA to coordinate other Civil Society organizations in this district (Early 2013); FOKAPAWA was already member of the Uganda women Network (UWONET)(2011). The reduced staff size puts pressure on the quality of fulfilling FOKAPAWA's role in these coordination roles.</p> <p>4c. Improved: Improved coordination with local leaders, beneficiaries and district leaders through linking goals of FOKAPAWA projects with the district development plan. This has improved the ownership by these direct and indirect beneficiaries (since 2012). Over the period June 2012 - June 2014 this practice was consolidated and made more firm.</p> <p>4d. Improved: Level of effective relationships within the organization improved through sharing of plans with all staff members. But decreased staff size puts a higher pressure on the performance of individual staff members; this situation does not reflect a real improvement since 2012, but meant a consolidation of FOKAPAWA's internal relations since 2012 onwards.</p> <p>Overall the change of core capability To relate is qualified as stable improved. The initial overall qualification in the endline however appears too high, given the reduction of staff size of FOKAPAWA. The organization still can take advantage of its known position in the district, but has fewer possibilities to capitalize on this position.</p>				

Table 19: Capability to achieve coherence

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator 's change qualification after workshops/interviews
5 Capability to achieve coherence	3.3	3.4	Stable	Stable
5a Existence of mechanisms for coherence	2.4	3.3	Stable	Stable
5b Level of coherence of various efforts of organization	3.4	3.5	Stable	Stable
<p>5a. Stable: Within FOKAPAWA exist various mechanisms for coherence: Competence-based recruitment procedures (2010), and FOKAPAWA's mandate (vision and mission), organization structure and M&E system are present. FOKAPAWA's constitution was reviewed and reformulated in 2012. After that a review of financial and procurement policies has taken place. For that ZOA facilitated FOKAPAWA in 2012 a consultant to help and review these working documents, which has led to amending organizational policies and related procedures in 2013. Through the existence of the General Assembly (see 3b) FOKAPAWA's coherence is frequently under view, as this Council is meant to represent the organization's target audience. Through the Council's expansion in 2012 is shown that the organization became more embedded in the local setup. The Vision and mission are displayed in office and are known by staff (flier was produced in 2013).</p> <p>5b. Stable: Coherence between the various efforts of the organization did not drastically change; exchanges between different projects went on as before. With the termination of the Care funded Hope Project in 2013 actually less exchanges between projects take place, and consequently less opportunities for synergy were present. All other projects remain aiming at economically empowering women and youths; opportunities for synergies between projects at goal level are still open.</p> <p>Overall the change of core capability To achieve coherence is qualified as improved stable. The mechanisms for coherence were really strengthened overall remained stable, and this gives the organization a good basis. Reduction of number projects under implementation narrows the opportunities for synergies, and with a reduced staff size the organization may lose critical mass. This is already reflected in lacking information about annual planning and reporting</p>				

5.3. Discussion

5.3.1. Followed CFA-SPO approach related to the findings

The overview of the results shows in general that FOKAPAWA has made some steps in its capacity development. Table 20 illustrates this.

Table 20: Capability overview

Core capability	Baseline	Endline	Final change qualification
1 To act and commit	3.1	3.1	Stable
2 To adapt and self-renew	3.0	2.9	Stable
3 To deliver on development objectives	2.8	3.1	Improved
4 To relate	3.3	3.6	Improved
5 To achieve coherence	3.3	3.4	Stable

For core capability 1 some progress was observed. In the baseline report was indicated that ZOA has targeted this capability the most in 2012⁴⁹ (see Chapter 3). The development of this core capability was relatively slow, due to the long time it took to have FOKAPAWA's Board of Directors in place, but before roles of board members vis-à-vis the organization were unclear. There were issues in the area of financial management; ZOA considered in general the organization's accountability a challenge (see Chapter 5 Results under core capability 1).

The change in core capability 3 looks the most pronounced. The expansion of FOKAWAPA's General Assembly from 225 groups in 2 sub-counties in Agago district in 2012, into 450 groups in 10 sub counties and 3 urban councils: Kalong, Agago and Paton in 2014 meant the establishment of a more extended and improved basis for its target groups interface and the goal focus of its operations.

The changes in the core capabilities 2 and 5 that were equally present in ZOA's focus did not occur. That core capability 2 did not show change can mainly be attributed to the organization's lack of budgetary space to mobilize specialized M&E skills for the organization (i.e. assignment of a special staff M&E staff member). This situation worsened recently with the reduction in the program staff from 8 (7 program staff and 1 coordinator) to 5 (4 program staff and 1 coordinator) per 2014. Core capability 5 gives an improvement shows a slight change however., but remained all in all stable. This can be mainly attributed to ZOA's increased emphasis on reviewing and upgrading FOKAPAWA's existing internal rules and regulations.

ZOA did the least emphasize its support to core capability 4. The strong reputation of FOKAPAWA's organization in Agago District was clearly demonstrated by the assignment the organization got to coordinate the UN Women's Program the Civil Society organizations within the district.

ZOA's approach from 2012 onwards became clearer focused on FOKAPAWA's capacity development, besides its cooperation with in the field of education with the organization. This focus is the best illustrated by its increased support in the areas of Project reporting, Monitoring and evaluation, Project implementation and Financial management, finally culminating in the formulation of the ZOA Capacity development plan for partner FOKAPAWA for the time period 2014-2015.

5.3.2. Recommendations

ZOA's choice was to combine its support to FOKAPAWA in one specific program on education with increasing support to FOKAPAWA's capacity development, but the size of ZOA's support is not clear. ZOA's approach may be beneficial for FOKAPAWA, but this depends on the extend FOKAPAWA can sustain its organizational size that is minimally needed to meet the capacity requirements for proper functioning. As the organization is financially depending on the acquisition of project assignments, its actual small size can be considered as critical. ZOA has always stayed away from being involved in core funding support of the organization, as also other development partners did. This circumstance carries the risk that if FOKAPAWA does not succeed safeguarding funding timely, the organization may be forced to size down below its critical mass. This may imply a loss of important regional expertise and networks, that are needed to attend the needs of the organization's target groups.

⁴⁹ Bulte, E., J. Klomp, J. Duchoslav, E. Kamphuis, and B. Lof (2013). Joint MFS-II Evaluation Uganda: Baseline Report, p. 384-386.

ZOA's approach can thus only be maintained, provided that there is a clear understanding with local authorities and other donors about the importance of FOKAPAWA's approach and operations.

The way ZOA supports FOKAPAWA has developed over time, demonstrated an increased focus on capacity development. FOKAPAWA's organizational capacity appears strengthened, but the pace of this strengthening can be higher and more clear. In the current setup with other development partners, ZOA is recommended to continue its involvement in FOKAPAWA, and is additionally recommended to seek how it can complement to capacity development efforts of the other development partners (government, other donors, other CSOs).

5.3.3. Remarks on evaluation approach

The evaluation of FOKAPAWA's capacity development itself, especially concerning the impact of ZOA's support, can benefit from more detailed budget and expenditure data (per focused capacity development activity), better recording of outputs and envisaged outcomes. ZOA's reporting on program/project activity progress is however much more detailed: this follows the Tailor Made Monitoring Protocol (TMP) that is used by the Dutch Consortium for Rehabilitation (DCR).⁵⁰ Year plans and budgets and year report and expenditure overviews were however neither provided by FOKAPAWA, nor by ZOA. This makes the evaluation of resources spent for capacity development in the organization and the effects on output/outcome realization difficult.

The chosen qualitative approach to assess the capacity development of SPO's, as described in Chapter 3, worked well. The use of capability scoring require a careful approach: scores can serve a comparison between baseline and endline outcomes, but this comparison needs to be thoroughly triangulated through interviews, focus group discussions, or joint analysis and verification workshops with stakeholders. In the current evaluation setup triangulation was an integral part of the evaluation, but to honor fully the requirements triangulation require more financial data, as also research time was needed; then the qualification of effectiveness of interventions may be plausible, but not functional.⁵¹

5.4. Conclusion

In this chapter conclusions are drawn with respect to the 3 evaluation questions of the MFS2 Evaluation Study Capacity Development of Southern Partner Organizations - Uganda, e.g.:

- What are the changes in partner organizations' capacity during the 2012–2014 period?
- To what degree are the changes identified in partner capacity attributable to development interventions undertaken by the MFS II consortia (i.e. measuring effectiveness)?
- What factors explain the findings drawn from the questions above?

5.4.1. Changes in FOKAPAWA's capacity during the 2012–2014 period

Overall FOKAPAWA's organization is in June 2014 in a slightly better shape than it was in June 2012. Its abilities related to implementation service delivery and its relation networks improved (Core capabilities 13 and 34), its strategic orientation and related use of monitoring remained the same (Core capability 2), and its relation networks were consolidated and firm, as also its abilities related to implementation and its organizational coherence (Core capabilities 41 and 5).

5.4.2. ZOA's influence on identified changes

Changes in FOKAPAWA's capacity since June 2012 can be attributed to ZOA's interventions thereafter. ZOA's capacity development support became better structured, especially since 2014. ZOA explicitly focused on FOKAPAWA's capacity development, and was provided apart from its program support to education. ZOA's influence on capacity development changes of FOKAPAWA depends on whether FOKAPAWA succeeds in 'staying in business,' as the organization has reached the bottom of its critical mass. ZOA's specific support on capacity development did not concern large amounts, but was increasingly better focused, notably since 2014, when the capacity development plan was formulated. The results of the realization of this plan are not part of this evaluation.

5.4.3. Explaining factors to identified changes

⁵⁰ See 3.1.2 Support Co-funding Organization (CFA) to SPO

⁵¹ See Table 14

ZOA's support to FOKAPAWA could bear fruits, because of the presence of other donor organizations that supported other programs FOKAPAWA is running. This made the establishment of its operating office possible, but at the same time dependent on future decision of all donors involved. The capacity development support made it possible to address effectively organizational challenges, but the accountability of the organization is still a challenge by the end of 2013. With the decrease in staff size from beginning 2014, FOKAPAWA's critical mass may become too small to take full advantage of the capacity development support ZOA offers.

5.4.4. Assessment project design

Previous considerations and observations result in an assessment of the project design. It should be noted here again that ZOA's interventions cannot be seen as a separate project; better is it to refer to programmatic interventions, which fall since 2013 under ZOA's support to education at the one hand and to ZOA's focused capacity development support at the other hand. *The assessment concerns this last type of support.* Earlier in this report is mentioned that financial data are lacking to assess the relative importance of MFS2 funding that may influence FOKAPAWA's capacity development. Table 21 gives assessment scores on 3 statements: The project was well designed, The project was implemented as designed, and The project reached all its objectives. Based on the lack of sufficient data no scores can be given.

Table 21: Evaluation table

Statements	Scores
The project was well designed	N/A
The project was implemented as designed	N/A
The project reached all its objectives	N/A

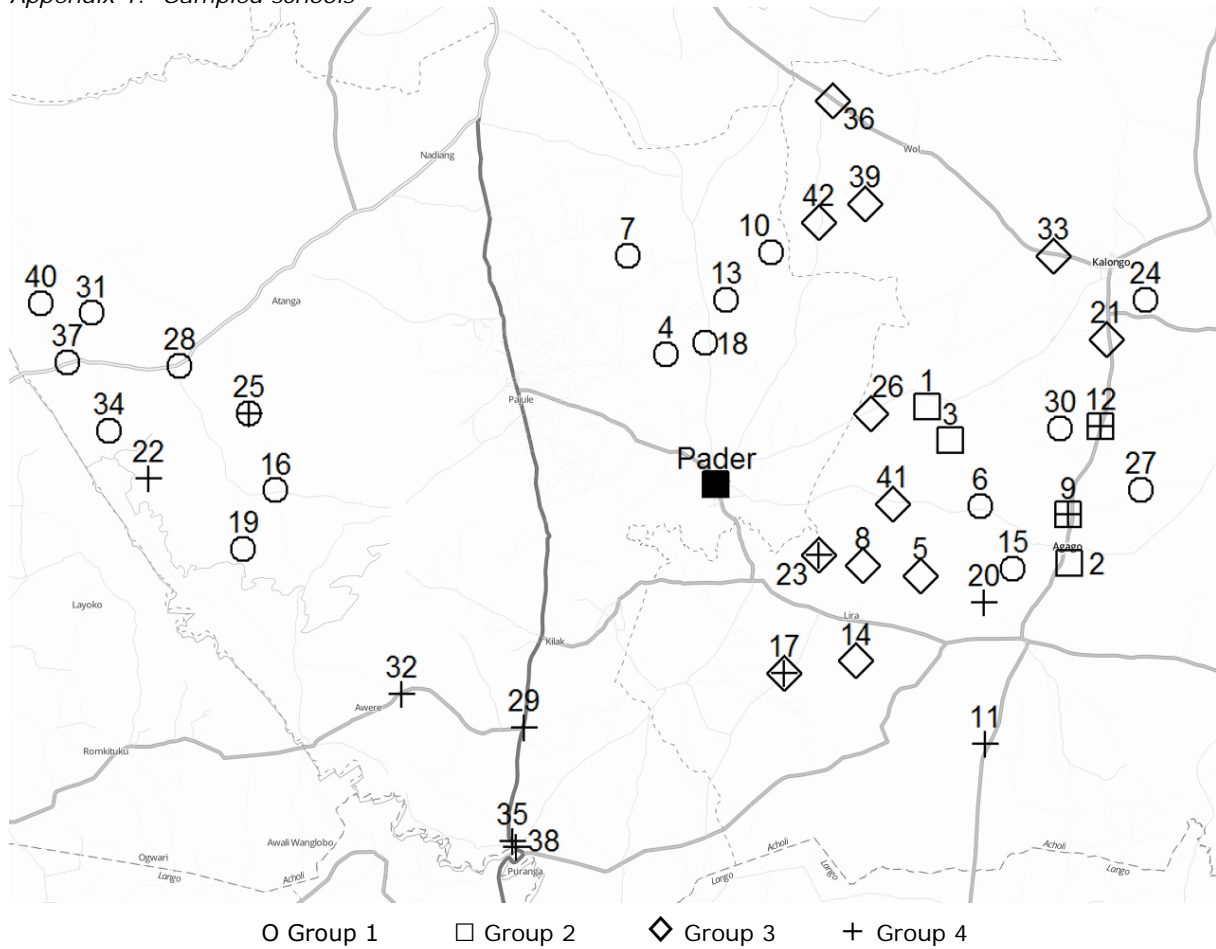
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7. Appendix

Appendix 1: Sampled schools



- | | |
|--------------------|--------------------------------|
| 1. Aywee Gara Gara | 22. Lacor |
| 2. Ajali Anyena | 23. Lacek |
| 3. Langolangola | 24. Kabala Aleda |
| 4. Lanyatono | 25. Wilakado |
| 5. Agweng | 26. Acuru |
| 6. Lapirin | 27. Widwol |
| 7. Awal | 28. Lawiyeadul |
| 8. Obolokome | 29. Rackoko |
| 9. Ngora | 30. Ladigo |
| 10. Angakotoke | 31. Akelikongo |
| 11. Opyelo | 32. Lagile |
| 12. Olung | 33. Apil |
| 13. Kibong | 34. Aruu falls |
| 14. Wimunu pecek | 35. Puranga |
| 15. Pampara | 36. Okwadoko |
| 16. Lapak | 37. Jupa |
| 17. Biwang | 38. Pope John Paul II Memorial |
| 18. Ogago | 39. Ogole |
| 19. Opatte | 40. Aswa Army Bridge |
| 20. Barotiba | 41. Alwee |
| 21. Kabala | 42. Otingowiye |

Appendix 2: Instruments – pupil information (pupil questionnaire)

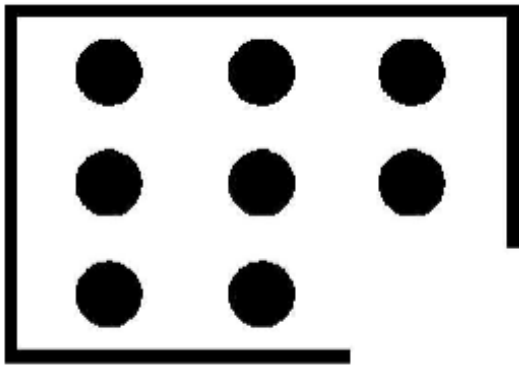
NO.	QUESTION	ANSWER	CODING CATEGORIES	SKIP
101	How old were you at your last birthday?	<input type="text"/> years		
102	IS THE PUPIL A BOY OR A GIRL?	<input type="checkbox"/>	1. Boy 2. Girl	
103	Did you go to a nursery or pre-school before P1?	<input type="checkbox"/>	1. Yes 2. No	
104	What class are you in this year?	p <input type="text"/>		
105	What class were you in last year?	p <input type="text"/>		
106	What class were you in the year before?	p <input type="text"/>		
107	This year, were you absent from school for more than one week continuously?	<input type="checkbox"/>	1. Yes 2. No	→ 108 → 109
108	How many times?	<input type="text"/>		
109	Do you have the school reading textbook?	<input type="checkbox"/>	1. Yes 2. No	
110	Apart from your schoolwork, are there other books, newspapers or other things to read in your house?	<input type="checkbox"/>	1. Yes 2. No	→ 111 → 113
111	What is there to read in your house? <i>[Multiple responses are allowed]</i>			
112	What language(s) are these books or other materials in? <i>[Multiple responses are allowed]</i>			
113	What language does your teacher usually speak in class?	<input type="checkbox"/>	1. Luo 2. English 3. Other, specify: _____	
114	Was your teacher giving you lessons in the morning?	<input type="checkbox"/>	1. Yes 2. No 9. Child was not at school	→ 115 → 116 → 116
115	How many lessons did (s)he give in the morning?	<input type="text"/>	IF THE CHILD DOES NOT REMEMBER ENTER 9	
116	Was (s)he giving you lessons in the afternoon?	<input type="checkbox"/>	1. Yes 2. No 9. Child was not at school	→ 117 → 118 → 118
117	How many lessons did she give in the afternoon?	<input type="text"/>	IF THE CHILD DOES NOT REMEMBER ENTER 9	
118	IS THE SCHOOL SUPPORTED BY WAR CHILD?	<input type="checkbox"/>	1. Yes 2. No	→ 119 → 2.
119	IS THE CHILD INVOLVED IN WAR CHILD'S IDEAL? <i>[Make sure the kid knows what you mean!]</i>	<input type="checkbox"/>	1. Yes 2. No	

Appendix 3: Instruments – IQ (pupil questionnaire)

- Tell the child that now you are going to solve some puzzles together
- Find a comfortable seating for both you and the child
- Take out the first laminated matrix and the possible answers
- Tell the child that at the end of this activity (s)he will receive at least one candy or even more
- Ask the kid which of the six answer pieces (s)he thinks should be added (1: C) and praise them for their choice if correct, otherwise give the following feedback:
- “Are you sure... I think this one would fit better”, show how the right piece fits the matrix but do not explain why it does, end with “you see, let’s try another one”
- If the child answers correctly, report a 1 on the record sheet (a simple vertical bar like this |). If the answer is incorrect report the chosen answer in CAPITAL LETTERS (e.g.: ABCDEF)
- The record sheet might therefore look something like this:
“... | F E | A | | | B | B B B ...”
- At the end write down the number of correct answers in the box, in our example the child answered 6 times correctly
- Notice that after 3 consecutive wrong answers you MUST stop the test
- This is to prevent the child from getting frustrated and to limit the number of right answers “by chance”.
- The test therefore will not necessarily be comprised of 19 questions, but of the number of questions the kid answers before making 3 consecutive mistakes
- At the end of the test, jubilate about the completion of the test and say that in a moment (s)he will get a candy

	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519
Matrix	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
Correct	C	E	B	F	A	F	B	D	F	A	C	E	B	A	E	D	D	B	D
Answer																			

520	Total Correct Answers:	_ _
-----	------------------------	-----



A

B

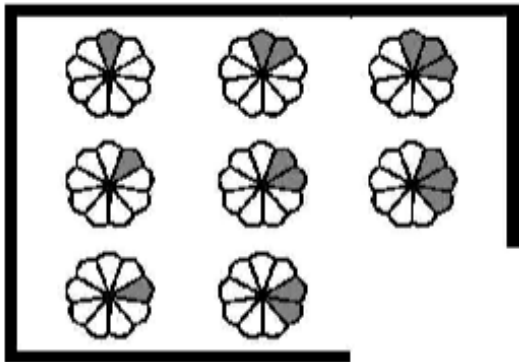
C



D

E

F



A

B

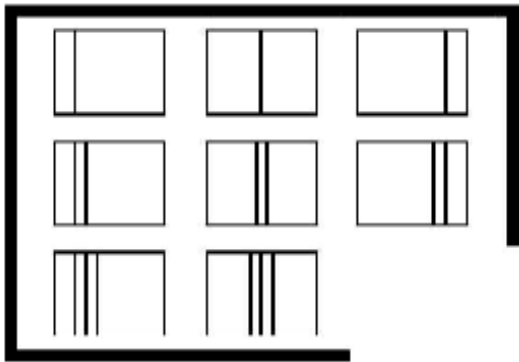
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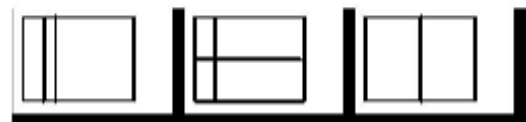
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A

B

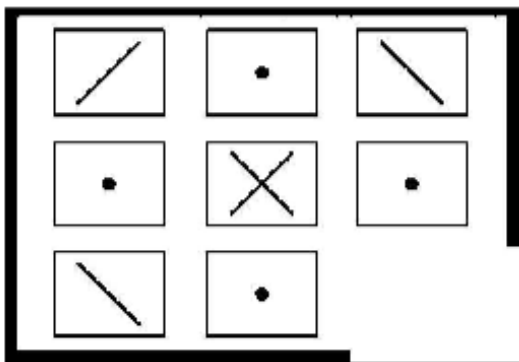
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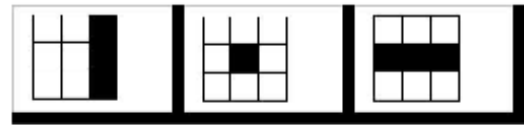
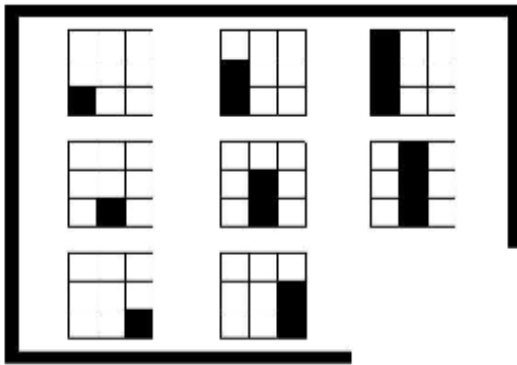
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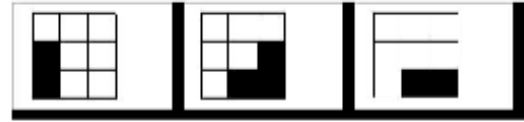
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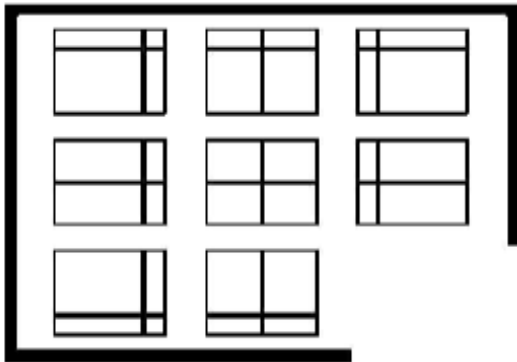
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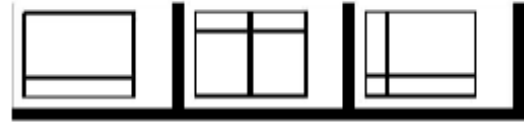
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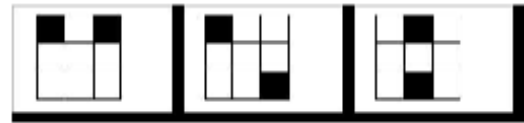
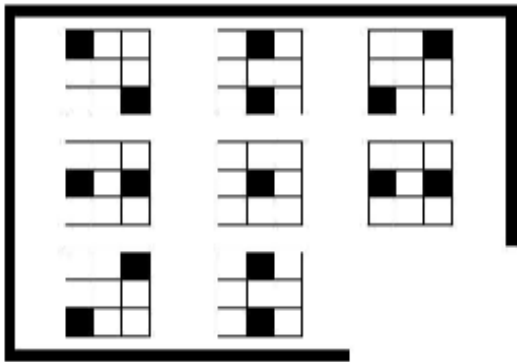
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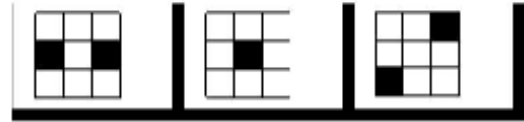
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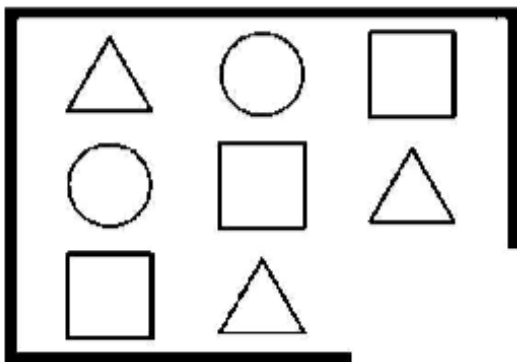
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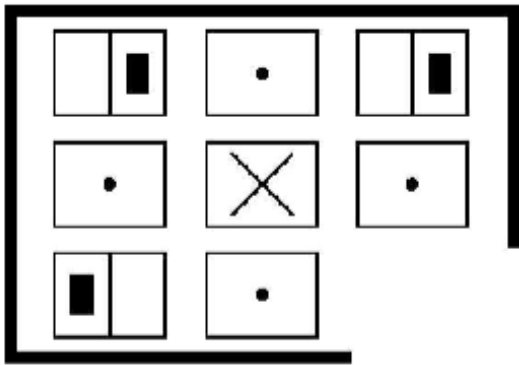
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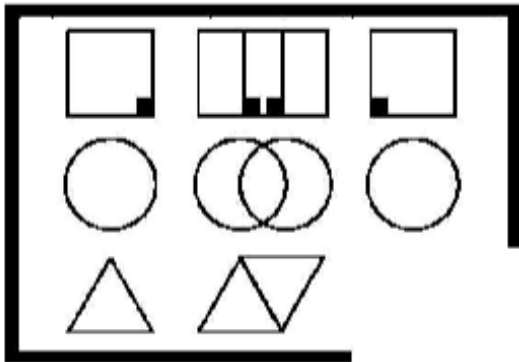
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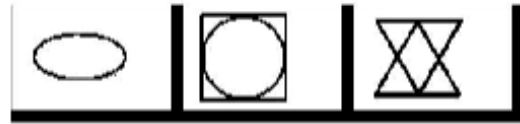
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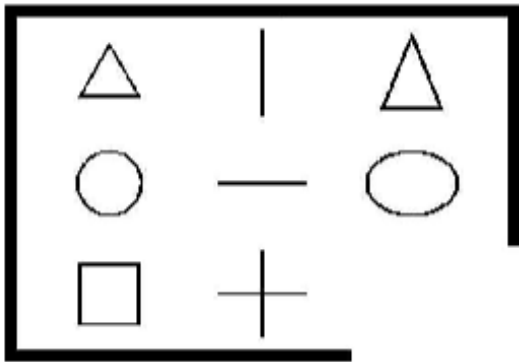
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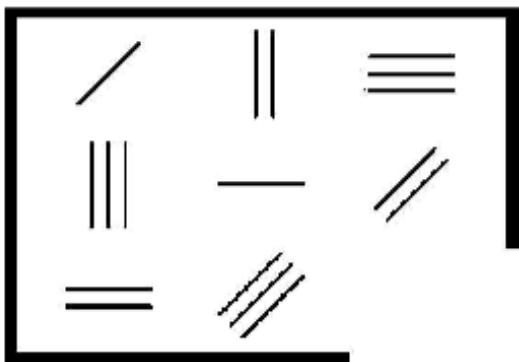
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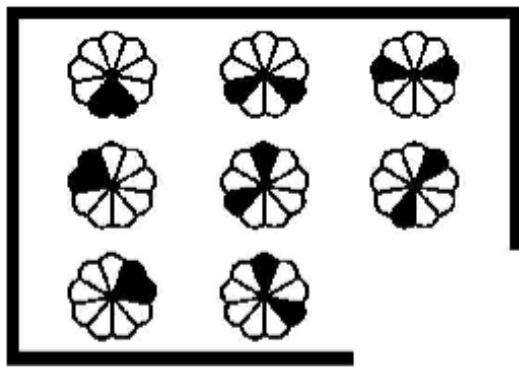
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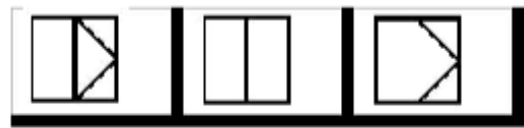
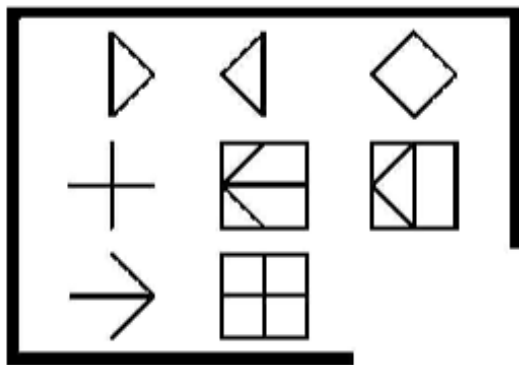
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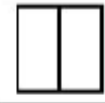
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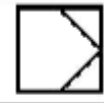
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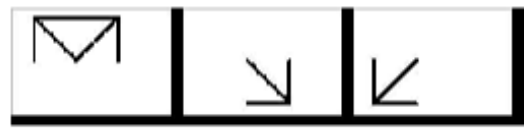
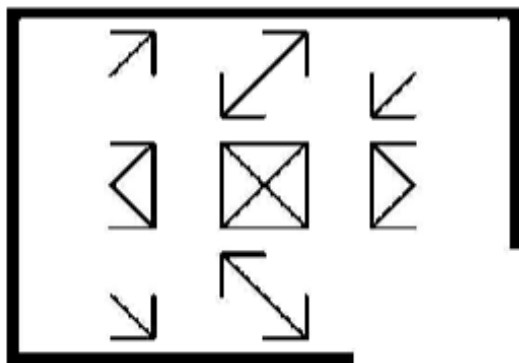
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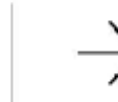
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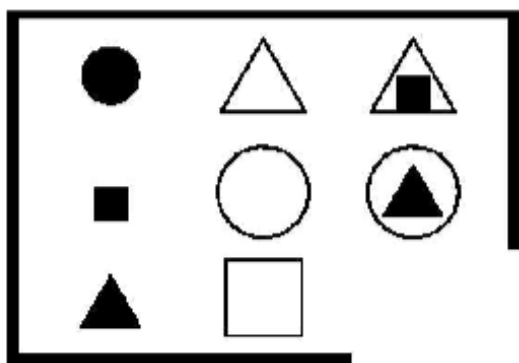
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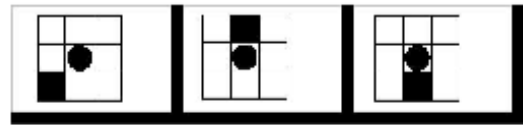
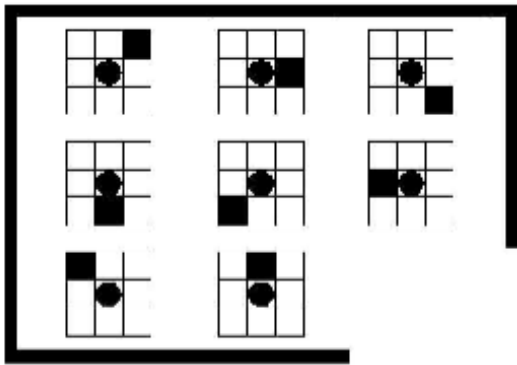
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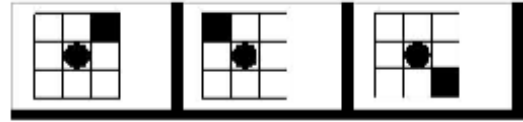
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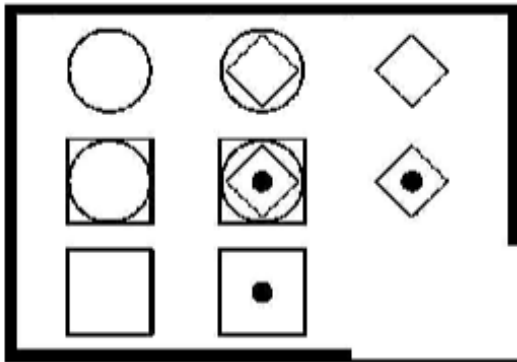
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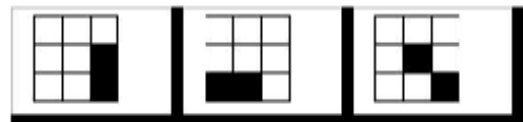
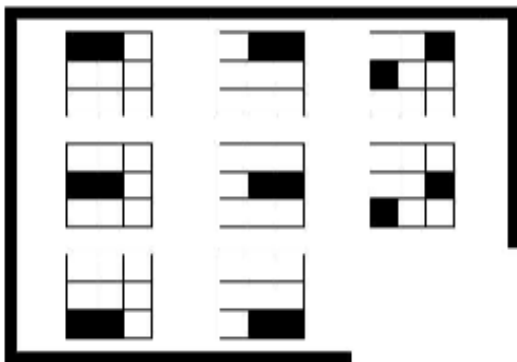
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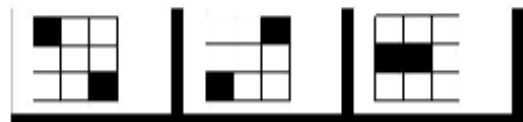
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Appendix 4: Instruments – Reading and comprehension (pupil questionnaire)

- "Here is a short story. I want you to read it aloud, quickly but carefully. When you have finished, I will ask you some questions about what you have read. Do you understand what you are to do? When I say "begin," read the story as best as you can. I will keep quiet & listen to you, unless you need help. Ready? Begin."
- Start the timer when the child reads the first word. Stay quiet, unless the child hesitates for 5 seconds, in which case provide the word, point to the next word and say "Please go on."
- At 60 seconds, say "Stop." And remove the passage from in front of the child. Mark the final word read with a bracket (]).
- Early stop rule: If the child reads no words correctly on the first line, say "Thank you!", discontinue this exercise, check the box at the bottom of the page and go on to the next exercise.

MY NAME IS OKELLO. I LIVE ON A FARM WITH MY MOTHER, FATHER, AND BROTHER OCEN. 16

EVERY YEAR, THE LAND GETS VERY DRY BEFORE THE RAINS COME. 27

WE WATCH THE SKY AND WAIT. 33

ONE AFTERNOON AS I SAT OUTSIDE, I SAW DARK CLOUDS. THEN SOMETHING HIT MY HEAD, LIGHTLY AT FIRST AND THEN HARDER. 54

I JUMPED UP AND RAN TOWARDS THE HOUSE. THE RAINS HAD COME AT LAST. 68

1401	WORDS READ (COUNT ALL WORDS READ WITHIN THE 60 SECONDS)	<input type="text"/>
1402	EARLY STOP RULE: (CHECK THE BOX IF EXERCISE STOPPED DUE TO NO CORRECT ANSWERS IN THE FIRST LINE):	<input type="checkbox"/>

- When 60 seconds are up or if the child finishes reading the passage in less than 60 seconds, REMOVE the passage from in front of the child.
- Slowly read out the passage to the child again, then ask the questions below.
- Give the child at most 15 seconds to answer the question, mark the child's response, and move to the next question

	Now I am going to ask you a few questions about the story you just read. Try to answer the questions as well as you can.		
1403	Where does Okello live? <i>[On a farm; home]</i>	<input type="text"/>	1. Correct 2. Incorrect 3. No response
1404	Why does the land get dry? <i>[The rains haven't come; there is a drought; there is a dry season; God is not sending the rain]</i>	<input type="text"/>	
1405	Why do Okello and his family watch the sky? <i>[Hoping the rains come; waiting for the rain]</i>	<input type="text"/>	
1406	What hit Okello on the head? <i>[rain; water; drops]</i>	<input type="text"/>	
1407	How do you think Okello felt when the rains came? <i>[Excited, thankful, happy, any reasonable answer]</i>	<input type="text"/>	

Appendix 5: Instruments – Mathematics (pupil questionnaire)

- Hand a paper and a pencil to the child and get ready to read out the first question
- Tell him you are going to try out some Math, but remind him/her they should not worry because this is not a test
- Give more or less 15 seconds for each answer, after it has been written down or understood. It is not compulsory to use the pen and paper
- After two wrong or non-responded answers stop the exercise

		ANSWER		
1501	2 + 6 = [8]		□	1. Correct 2. Incorrect 3. No response
1502	13 + 11 = [24]		□	
1503	3 x 4 = [12]		□	
1504	8 x 12 = [96]		□	
1505	9 ÷ 3 = [3]		□	
1506	14 ÷ 7 = [2]		□	
1507	5 + 5 * 5 ÷ 5 = [10]		□	

Appendix 6: Instruments – Pupil and caregiver information (caregiver questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
001	PROBE: IS THE RESPONDENT THE PERSON WHO TAKES THE MOST CARE OF _____, THE CHILD YOU HAVE WORKED WITH TODAY?	<input type="checkbox"/>	1. Yes 2. No	→ 002 → FIND CORRECT PERSON
002	PROBE: WHAT IS THE RESPONDENT'S RELATIONSHIP TO THE CHILD?	<input type="checkbox"/>	1. Parent 2. Grandparent 3. Uncle/aunt 4. Sibling 5. Other relative 6. Not related	
003	WAS THIS CAREGIVER'S CHILD INTERVIEWED FOR THE BASELINE?	<input type="checkbox"/>	1. Yes 2. No	
004	WAS THE CAREGIVER HIM/HERSELF INTERVIEWED FOR THE BASELINE?	<input type="checkbox"/>	1. Yes 2. No	
005	<p>Hello. My name is _____ and I am working with Makerere University. Together with Wageningen University from the Netherlands, we are conducting a survey about school quality and parenthood issues. It will help us evaluate the performance of some of the development projects in Uganda financed by the Dutch government. We would very much appreciate your participation in this survey. The survey will not take long to complete.</p> <p>During the interview, we will also ask you to make several choices. At the end, we will randomly select one of these choices, and based on your answer to that choice, you will receive some money in the form of MTN airtime from us as a sign of gratitude.</p> <p>Participation in this survey is voluntary, and if we should come to any question you don't want to answer, just let me know and I will go to the next question; or you can stop the interview at any time. However, we hope that you will participate in this survey since your views are important.</p> <p>At this time, do you want to ask me anything about the survey? May I begin the interview now?</p> <p>Signature of interviewer: _____ Date: _____</p>			
006	DOES THE RESPONDENT AGREE TO BE INTERVIEWED?	<input type="checkbox"/>	1. Yes 2. No	→ 007 → END
007	RECORD THE TIME	HH MM		

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
101	PROBE: IS THE RESPONDENT BLOOD RELATED TO _____?	<input type="checkbox"/>	1. Yes 2. No	
102	In what month and year was the child born?	MM YYYY	RECORD THE DATE. IF THE RESPONDENT DOESN'T KNOW, ENTER 99 / 9999	
103	Are both biological parents of the child alive? IN CASE THE CAREGIVER DOES NOT KNOW WHETHER A PARENT IS ALIVE OR NOT, RECORD THAT PARENT AS DECEASED.	<input type="checkbox"/>	1. Both alive 2. Only father alive 3. Only mother alive 4. Both deceased	

Appendix 7: Instruments – Household information (caregiver questionnaire)

NO	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
201	IS THE RESPONDENT (CAREGIVER) MALE OR FEMALE?	<input type="checkbox"/>	1. Male 2. Female	
202	In what month and year were you born?	MM YYYY	RECORD THE DATE. IF THE RESPONDENT DOESN'T KNOW, ENTER 99 / 9999	
203	How old were you at your last birthday? COMPARE WITH 202 IF CONSISTENT. PROBE UNTIL CONSISTENT.	<input type="checkbox"/> years	ENTER AGE IN COMPLETED YEARS.	
204	Are you married? PROBE FOR THE RESPONDENT'S MARITAL STATUS	<input type="checkbox"/>	1. Single 2. Engaged 3. Married 4. Divorced 5. Separated 6. Widowed	
205	Have you ever attended school?	<input type="checkbox"/>	1. Yes 2. No	→ 206 → 209
206	What is the highest level of school you attended?	<input type="checkbox"/>	1. Primary 2. Lower secondary (O) 3. Upper secondary (A) 4. Tertiary / University	
207	What is the highest class you completed at that level?	<input type="checkbox"/>	RECORD CLASS	
208	How often do you read a newspaper?	<input type="checkbox"/>	1. Almost every day 2. At least once a week 3. Less than once a week 4. Not at all	
209	How often do you listen to the news on radio or on television?	<input type="checkbox"/>	1. Almost every day 2. At least once a week 3. Less than once a week 4. Not at all	
210	What tribe do you belong to?	<input type="checkbox"/>	1. Muganda 2. Muteso 3. Musoga 4. Munyankole 5. Munyarwanda 6. Mukiga 7. Lango 8. Mugisu 9. Acholi 10. Lugbara 11. Munyoro 12. Mutoro 13. Karamojong 14. Other, specify: _____	
211	What is your religion?	<input type="checkbox"/>	1. Christian 2. Muslim 3. Traditional 4. Other, specify: _____	
212	How many people live in this household, including yourself and the child?	<input type="checkbox"/>	RECORD TOTAL NUMBER OF HOUSEHOLD MEMBERS	
213	How many rooms in your homestead are used by your household?	<input type="checkbox"/>	RECORD TOTAL NUMBER OF ROOMS, INCLUDING LIVINGROOM	
214	What is the main material of the roof of your main house?	<input type="checkbox"/>	1. Thatch 2. Iron 3. Roof tiles 4. Other, specify: _____	
215	What is the main material of the walls of your main house?	<input type="checkbox"/>	1. Mud 2. Mud block / unburned bricks 3. Burned bricks 4. Other, specify: _____	
216	What is the main material of the floor of your main house?	<input type="checkbox"/>	1. Mud / earth / dung 2. Cement 3. Tiles 4. Other, specify: _____	
217	Do you or anyone in your household own any of the following? a. phone? b. radio? c. television? d. generator? e. bicycle? f. motorbike? g. car?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Yes 2. No	

Appendix 8: Instruments – School information 1 (caregiver questionnaire)

NO.	QUESTIONS AND FILTERS	ANSWER	CODING CATEGORIES	SKIP
401	Do you pay school fees for [NAME]?	<input type="checkbox"/>	1. Yes 2. No	→ 402 → 403
402	How much did you pay for [NAME's] school fees for this term?	_____ USh.	RECORD THE AMOUNT	
403	Sometimes people give food or other things to teachers to make sure that they teach well. Do you sometimes do that?	<input type="checkbox"/>	1. All the time 3. Rarely 5. Don't know 2. Often 4. Never	
404	I will now read to you some statements. For each one, please tell me if you agree or disagree with it. a. The harder a pupil works at school, the better life (s)he will have in the future b. Achieving a high level of education is the only way to for our children to have a better future c. My child is receiving education of good quality at our primary school d. The teachers at our primary school are good e. It is OK for a child not to go to school when there is a lot of work on the farm	 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1. Agree completely 2. Agree just a bit 3. Disagree just a bit 4. Disagree completely	
405	Do you know what is a School Management Committee (SMC)?	<input type="checkbox"/>	1. Yes 2. No	→ 406 → 413
406	Is there one in your school?	<input type="checkbox"/>	1. Yes 2. No	→ 407 → 413
407	Are you a member of the SMC?	<input type="checkbox"/>	1. Yes 2. No	→ 408 → 410
408	How many times did you go to an SMC meeting last school term?	_____	RECORD THE NUMBER OF ATTENDED MEETINGS	
409	What do you do as a member of the SMC?			
410	How useful is the SMC in your opinion?	<input type="checkbox"/>	1. Very useful 3. Somewhat useless 2. Somewhat useful 4. Very useless	
411	Can you think of a time the SMC did something good for the school, the pupils or your family? Please briefly describe what happened and when.			
412	Can you think of a time the SMC did something bad for the school, the pupils or your family? Please briefly describe what happened and when.			

Appendix 9: Instruments – School information 2 (caregiver questionnaire)

413	Do you know what is a Parent-Teacher Association (PTA)?	<input type="checkbox"/>	1. Yes 2. No	→ 414 → 5.
414	Is there one in your school?	<input type="checkbox"/>	1. Yes 2. No	→ 415 → 5.
415	Are you a member of the PTA?	<input type="checkbox"/>	1. Yes 2. No	→ 416 → 418
416	How many times did you go to a PTA meeting last school term?	<input type="text"/>	RECORD THE NUMBER OF ATTENDED MEETINGS	
417	What do you do as a member of the PTA?			
418	How useful is the PTA in your opinion?	<input type="checkbox"/>	1. Very useful 3. Somewhat useless 2. Somewhat useful 4. Very useless	
419	Can you think of a time the PTA did something good for the school, the pupils or your family? Please briefly describe what happened and when.			
420	Can you think of a time the PTA did something bad for the school, the pupils or your family? Please briefly describe what happened and when.			

Appendix 10: Explanatory and confounding variables

treat	= 1 if supported by ZOA, FOKAPAWA or Kwal Ryeko, 0 otherwise
FU	= 1 if follow-up data from 2014, 0 if data from 2012
treatFU	= treat × FU
ZOA	= 1 if supported by ZOA, 0 otherwise
FP	= 1 if supported by FOKAPAWA, 0 otherwise
KR	= 1 if supported by Kwal Ryeko, 0 otherwise
Female caregiver	= 1 if caregiver is female, 0 otherwise
Age caregiver	= age of caregiver in completed years
Literacy caregiver	= 0 if caregiver never reads a newspaper, 1 otherwise
Wealth caregiver	= asset index on a scale of 0 to 1 constructed by factor analysis
HH size	= number of people living in the household, including pupil and caregiver
Female child	= 1 if the pupil is female, 0 otherwise
Age child	= age of pupil in completed years
IQ	= age-adjusted intelligence quotient of pupil as compared to our sample
P2	= 1 if pupil is in grade 2, 0 otherwise
P3	= 1 if pupil is in grade 3, 0 otherwise
P4	= 1 if pupil is in grade 4, 0 otherwise
P5	= 1 if pupil is in grade 5, 0 otherwise
P6	= 1 if pupil is in grade 6, 0 otherwise
P7	= 1 if pupil is in grade 7, 0 otherwise

Appendix 11: Sub-sample balance for short-term effect DID estimation – Outcome indicators

	Treatment	Control	Difference
PTA know	0.883 (0.322)	0.798 (0.404)	0.086 (0.071)
PTA useful	0.915 (0.280)	0.855 (0.355)	0.060 (0.036)
SMC know	0.592 (0.494)	0.524 (0.502)	0.068 (0.065)
SMC useful	0.986 (0.119)	0.886 (0.321)	0.100* (0.049)
Observations	120	84	

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard deviations / clustered standard errors in parentheses

Appendix 12: Sub-sample balance for short-term effect DID estimation – Confounding variables

	Treatment	Control	Difference
Female caregiver	0.467 (0.501)	0.440 (0.499)	0.026 (0.109)
Age caregiver	42.5 (10.7)	43.7 (14.0)	-1.2 (1.8)
Literacy caregiver	0.292 (0.456)	0.357 (0.482)	-0.065 (0.065)
Wealth caregiver	0.188 (0.146)	0.230 (0.163)	-0.042* (0.021)
HH size	8.05 (2.66)	7.81 (2.73)	0.24 (0.34)
Female child	0.458 (0.500)	0.536 (0.502)	-0.077 (0.049)
Age child	11.53 (2.56)	11.62 (2.61)	-0.09 (0.24)
IQ child	99.3 (12.8)	98.7 (15.1)	0.6 (2.5)
P2 pupil	0.350 (0.479)	0.357 (0.482)	-0.007 (0.028)
P4 pupil	0.350 (0.479)	0.357 (0.482)	-0.007 (0.031)
P6 pupil	0.300 (0.460)	0.286 (0.454)	0.014 (0.057)
Observations	120	84	

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard deviations / clustered standard errors in parentheses

Appendix 13: Sub-sample balance for short-term effect BSD estimation – Confounding variables

	Treatment	Control	Difference
Female caregiver	0.467 (0.499)	0.440 (0.499)	0.026 (0.097)
Age caregiver	42.1 (11.4)	43.7 (14.0)	-1.6 (1.5)
Literacy caregiver	0.341 (0.475)	0.357 (0.482)	-0.016 (0.060)
Wealth caregiver	0.215 (0.149)	0.230 (0.163)	-0.015 (0.016)
HH size	8.16 (2398)	7.81 (2.73)	0.35 (0.35)
Female child	0.476 (0.500)	0.536 (0.502)	-0.060 (0.038)
Age child	11.59 (2.52)	11.62 (2.61)	-0.03 (0.20)
IQ child	99.6 (15.2)	98.7 (15.1)	0.9 (2.6)
P2 pupil	0.357 (0.480)	0.357 (0.482)	-0.000 (0.024)
P4 pupil	0.355 (0.479)	0.357 (0.482)	-0.002 (0.025)
P6 pupil	0.288 (0.453)	0.286 (0.454)	0.002 (0.049)
Observations	420	84	

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard deviations / clustered standard errors in parentheses

Appendix 14: Sub-sample balance for long-term effect estimation – Outcome indicators

	Treatment	Control	Difference
Textbook	0.547 (0.499)	0.507 (0.502)	0.040 (0.056)
Absent	0.250 (0.434)	0.250 (0.435)	0.000 (0.048)
Reading	0.264 (0.331)	0.288 (0.359)	-0.025 (0.036)
Math	0.477 (0.319)	0.451 (0.298)	-0.026 (0.038)
Observations	276	144	

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Standard deviations / clustered standard errors in parentheses

Appendix 15: Sub-sample balance for long-term effect estimation – Confounding variables

	Treatment	Control	Difference
Female caregiver	0.475 (0.500)	0.451 (0.499)	0.023 (0.065)
Age caregiver	41.9 (11.8)	42.4 (10.6)	-0.5 (1.1)
Literacy caregiver	0.360 (0.481)	0.306 (0.462)	0.054 (0.51)
Wealth caregiver	0.224 (0.150)	0.199 (0.147)	0.025 (0.018)
HH size	8.04 (2.80)	8.40 (3.28)	-0.36 (0.38)
Female child	0.478 (0.500)	0.472 (0.501)	0.006 (0.040)
Age child	11.68 (2.53)	11.42 (2.51)	0.25 (0.23)
IQ child	99.3 (16.3)	100.1 (13.0)	-0.8 (2.0)
P2 pupil	0.355 (0.479)	0.361 (0.482)	-0.006 (0.022)
P4 pupil	0.351 (0.478)	0.361 (0.482)	-0.010 (0.024)
P6 pupil	0.293 (0.456)	0.278 (0.449)	0.016 (0.045)
Observations	276	144	

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

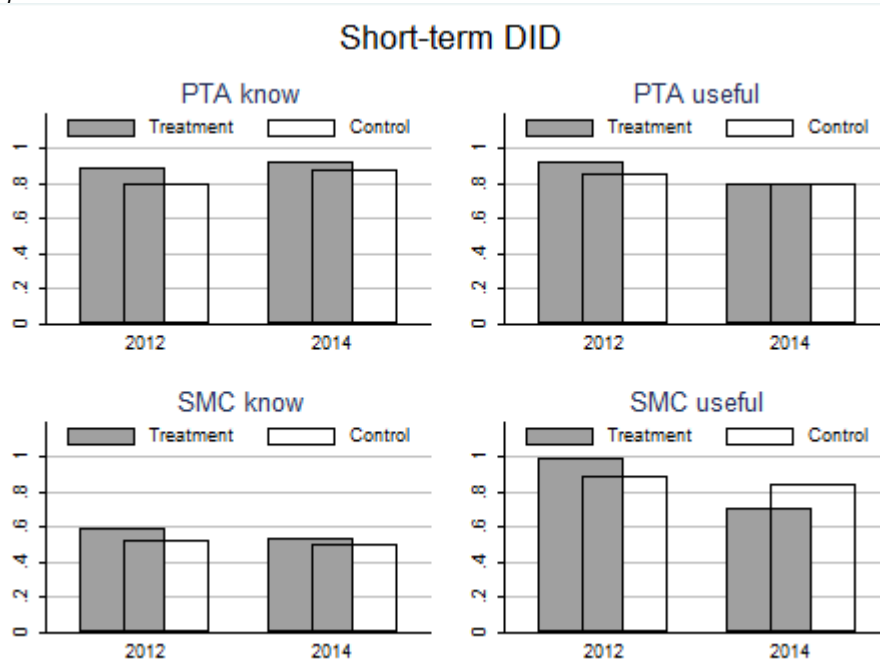
Standard deviations / clustered standard errors in parentheses

Appendix 16: Short-term effect estimations (DID)

	PTA know	PTA useful	SMC know	SMC useful
treat	0.063 (0.062)	0.059 (0.045)	0.137 (0.085)	0.215** (0.103)
treatFU	-0.013 (0.063)	-0.051 (0.073)	-0.043 (0.095)	-0.364*** (0.138)
FU	0.069* (0.030)	-0.073 (0.061)	0.012 (0.083)	-0.059 (0.048)
Female caregiver	-0.027 (0.035)	-0.003 (0.029)	-0.110** (0.053)	-0.035 (0.045)
Age caregiver	0.002 (0.002)	0.001 (0.002)	0.008*** (0.002)	-0.001 (0.002)
Literacy caregiver	0.070*** (0.022)	-0.033 (0.046)	0.332*** (0.051)	-0.069 (0.046)
Wealth caregiver	0.148** (0.065)	0.021 (0.122)	0.913*** (0.195)	-0.045 (0.131)
N	465	415	465	256
Pseudo R ²	0.0525	0.0266	0.1593	0.1398

Probit marginal effects reported, * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$
Standard errors clustered at the school level in parentheses

Appendix 17: Short-term outcome indicator levels



Appendix 18: Short-term effect estimations (BSD)

	Furniture	Furniture	Teaching time
treat	0.050 (0.126)	0.545 ^{***} (0.151)	0.141 (0.299)
FP		-0.564 ^{***} (0.102)	
PTA useful	1.052 (0.955)	0.944 (1.054)	0.951 (1.433)
SMC useful	-0.776 (0.495)	-0.476 (0.502)	-0.139 (0.936)
Wealth caregiver	2.761 [*] (1.419)	3.382 ^{**} (1.307)	4.755 ^{**} (2.284)
Literacy caregiver	-0.425 (0.450)	-1.077 ^{**} (0.453)	-1.761 ^{***} (0.601)
Class dummies	yes	yes	Yes
N	117	117	188
Pseudo R ²	0.0663	0.2251	0.0369

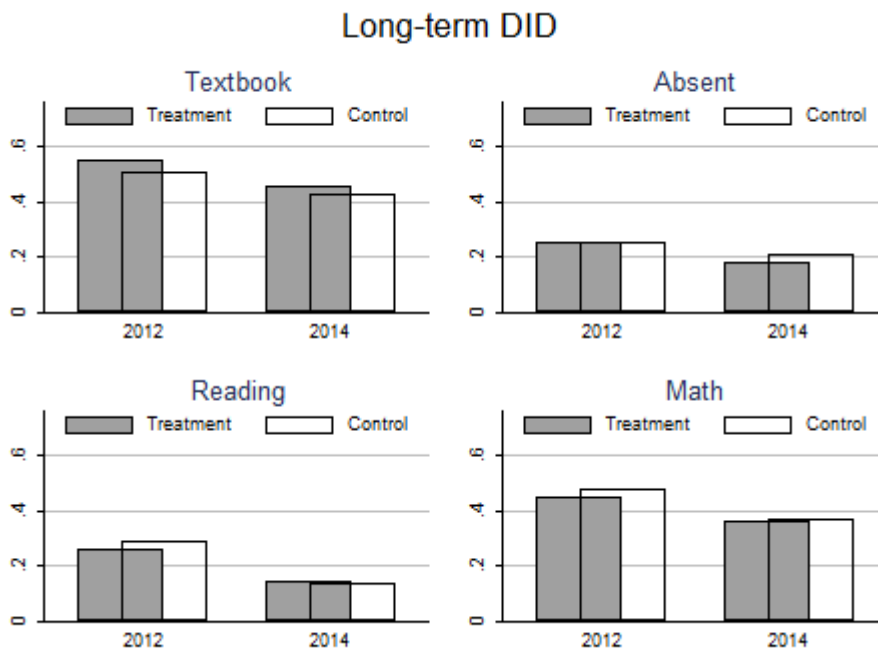
For PTA useful, SMC useful, Wealth caregiver, and Literacy caregiver, mean levels for each school are used.
 Probit/tobit marginal effects reported for Furniture, ^{*} $p < 0.10$, ^{**} $p < 0.05$, ^{***} $p < 0.01$
 Standard errors clustered at the school level in parentheses

Appendix 19: Long-term effect estimations (DID)

	Textbook	Absent	Reading	Math
treat	0.041 (0.058)	0.005 (0.046)	-0.027 (0.048)	-0.039 (0.040)
treatFU	-0.012 (0.073)	-0.034 (0.050)	0.025 (0.046)	0.045 (0.048)
FU	-0.024 (0.070)	-0.020 (0.041)	-0.083** (0.040)	-0.079 (0.045)
Female child	-0.054 (0.038)	0.054** (0.024)	-0.047* (0.025)	-0.016 (0.019)
IQ			0.006*** (0.001)	0.003*** (0.001)
Wealth caregiver	0.144 (0.113)	-0.275*** (0.101)	-0.028 (0.090)	0.053 (0.080)
Literacy caregiver	-0.065 (0.041)	0.024 (0.036)	-0.032 (0.030)	0.009 (0.024)
HH size	0.006 (0.007)	0.001 (0.005)		
Class dummies	yes	yes	yes	Yes
N	978	978	919	920
Pseudo R ²	0.0653	0.0237	0.5389	0.4707

Probit/tobit marginal effects reported. * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$
Standard errors clustered at the school level in parentheses

Appendix 20: Long-term outcome indicator levels



Appendix 21: Short-term effect estimations (BSD)

	Retention	Retention	Progress	Progress
treat	0.006 (0.059)		-0.033 (0.090)	
ZOA		0.133 (0.081)		0.198* (0.105)
FP		0.066 (0.093)		-0.059 (0.120)
KR		-0.130** (0.054)		-0.214 (0.135)
Female child	0.025 (0.039)	0.028 (0.038)	0.200** (0.081)	0.210** (0.083)
IQ	0.002 (0.002)	0.002 (0.002)	0.010*** (0.003)	0.011*** (0.003)
Wealth caregiver	0.048 (0.212)	0.042 (0.224)	0.553 (0.343)	0.576 (0.348)
Literacy caregiver	0.094 (0.068)	0.079 (0.063)	0.120 (0.094)	0.091 (0.096)
HH size	0.013 (0.009)	0.011 (0.009)	0.004 (0.013)	0.007 (0.012)
N	290	290	216	216
Pseudo R ²	0.0209	0.0515	0.0975	0.1364

Probit/LPM marginal effects reported, * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$
Standard errors clustered at the school level in parentheses

Appendix 22: Financial efficiency

Description	Year 1	Year 2	Year 3	Year 4	Year 5
Personnel	170,908	178,653	186,686	194,020	202,671
Ex-patriate staff (incl tax and benefits)	40,000	42,000	44,000	45,000	47,000
Local staff	114,908	120,653	126,686	133,020	139,671
Program staff	84,308	88,523	92,950	97,597	102,477
Support staff	30,600	32,130	33,737	35,423	37,194
Coordination staff based @ lead organization (local and expats)	9,000	9,000	9,000	9,000	9,000
Consortium Coordinator (inc office and travel costs)	9,000	9,000	9,000	9,000	9,000
Travel expenses (local and international)	7,000	7,000	7,000	7,000	7,000
Support	55,720	55,964	55,964	55,964	55,964
Running cost of vehicles and motor cycles	33,488	33,732	33,732	33,732	33,732
Communications (incl depreciation and running costs)	3,040	3,040	3,040	3,040	3,040
Office accommodation and supplies	19,192	19,192	19,192	19,192	19,192
Direct key activity costs	151,765	152,700	152,750	152,750	152,750
Equitable access to basic services	45,015	45,950	46,000	46,000	46,000
<u>Consortium organization</u>	34,015	34,950	35,000	35,000	35,000
Local capacity development	27,015	27,950	28,000	28,000	28,000
Construction and inputs/supplies	7,000	7,000	7,000	7,000	7,000
<u>Local partners</u>	11,000	11,000	11,000	11,000	11,000
Local capacity development	11,000	11,000	11,000	11,000	11,000
Existence and sustainable management of sectoral systems	8,050	8,050	8,050	8,050	8,050
<u>Consortium organization</u>	5,450	5,450	5,450	5,450	5,450
Local capacity development	5,450	5,450	5,450	5,450	5,450
<u>Local partners</u>	2,600	2,600	2,600	2,600	2,600
Construction and inputs/supplies	2,600	2,600	2,600	2,600	2,600
Improved livelihoods	38,350	38,350	38,350	38,350	38,350
<u>Consortium organization</u>	34,350	34,350	34,350	34,350	34,350
Local capacity development	21,750	21,750	21,750	21,750	21,750
Construction and inputs/supplies	12,600	12,600	12,600	12,600	12,600
<u>Local partners</u>	4,000	4,000	4,000	4,000	4,000
Local capacity development	4,000	4,000	4,000	4,000	4,000
Well-organised and well-governed communities	60,350	60,350	60,350	60,350	60,350
<u>Consortium organisation</u>	10,850	10,850	10,850	10,850	10,850
Local capacity development	10,850	10,850	10,850	10,850	10,850
<u>Local partners</u>	49,500	49,500	49,500	49,500	49,500
Local capacity development	33,000	33,000	33,000	33,000	33,000
Construction and inputs/supplies	16,500	16,500	16,500	16,500	16,500
Miscellaneous	33,897	33,723	34,004	34,297	34,603
Monitoring and Evaluation including M and E staffing, travel and consulting!	16,990	16,990	16,990	16,990	16,990
Bank charges, legal fees and audit costs	1,050	1,050	1,050	1,050	1,050
Other	15,857	15,683	15,964	16,257	16,563
TOTAL in Euros	412,290	421,040	429,404	437,032	445,989
Total in int\$	343,575	350,867	357,837	364,193	371,657
Per beneficiary in int\$ using the average number of beneficiaries based on the documents provided by ZOA	68.72	70.17	71.57	72.84	74.33

Technical paper

Uganda Red Cross Society

1. Introduction

This technical report about the Ugandan Red Cross Society (URCS) is one of the studies within the framework of the Joint MFSII evaluation at country level - Uganda; In particular, the report serves to give input to the overall joint evaluation report on MFSII funding to the Millennium Development Goals, Capacity Development, and Civil Society Strengthening.

The outline of this technical report is as follows. First, Chapter 2 gives a description of the context, in which the URCS operates, highlighting the main relevant (international) political, economic, cultural and social issues with which the organization has to deal in pursuance of its objectives.

Chapter 3 gives the project description and the profile of the URCS e.g. its mission, vision, and strategic objectives. The data collection and analytical approach in section 3 gives attention to the methodological choice made. This study aims at giving plausible explications on the effectiveness of the Red Cross' support to the URCS based on empirical evidence. These explanations are given to the URCS' MDG realized outcomes. We end with a Discussion and Conclusion.

1.1. Brief summary of the analyses and the findings

In the study quantitative research methods are used to evaluate the impact of the URCS project on achieving the targets on the MDG's. The approach is centered on the comparison between triangulated baseline data (2012) and triangulated follow-up (endline) data (2014). We find that the project had some positive impact on 3 of the 9 measured outcome indicators. In particular, we find positive impact on the knowledge and implementation of measures that can prevent drought-related problems with crop and livestock production.

2. Context

Uganda is a landlocked country with a population of 32.7 million. Yoweri Museveni, who became president in 1996, introduced democratic reforms and has been credited for substantially improving human rights and bringing stability to the country. Economic reforms in the 1990s have resulted in solid growth. High population growth remains a concern.

For nearly two decades the Lord's Resistance Army (LRA) has perpetrated massacres and mutilations in the North, which has resulted in the displacement of 1.6 million people. The UN estimates that the group has abducted 20,000 children. The cessation of hostilities in the North following signing of different components of a final peace agreement in 2006 and 2007 has had a stabilizing effect in the region. Uganda has won praise for its vigorous campaign against HIV/AIDS, the prevalence of which among high-risk groups decreased from 18% in the 1990s to 6.4% in 2008. Uganda is a pioneer in the liberalization of the media in Africa. There were 2.5 million internet users by August 2009.

Climate change and natural resource degradation are responsible for increasingly frequent natural hazards, including drought, floods and landslides. For example the semi-arid Karamoja region in the North East has experienced repeated and severe droughts over the last five years. When rains began in the second half of 2007, they were short and torrential, leading to widespread flooding and destruction of property and infrastructure, and loss of lives in many parts of the neighboring Teso Region, but in Karamoja itself as well. Early March 2010, more than 300 people were feared dead after heavy rain caused a series of landslides in the mountainous Eastern region of Bududa.

The increased variability of precipitation expected in Uganda due to climate change is likely to impact health negatively. After flood events, diarrheal diseases and vector-borne diseases are more common due to contamination of drinking water with human waste. Stagnant pools of water provide breeding grounds for disease carrying mosquitoes. In times of drought, water quality can decrease, causing diarrhea. Inadequate access to sufficient amounts of water for personal hygiene can cause diarrhoeal diseases, intestinal worms and trachoma.

The Ugandan Partners for Resilience will focus on communities in three areas in Northern and North Eastern Uganda that are directly dependent on natural resources to sustain their livelihoods. The people living in the Lira and Apac districts of Lango sub-region are primarily subsistence farmers with few options for alternative livelihoods. Supplemental sources of income are often derived from fishing, brick making, charcoal burning and casual labour. These districts, which are prone to flooding and drought, have a high concentration of wetlands in varying states of environmental degradation and part of their forest cover is depleted.

The Acholi and Iteso are subsistence farmers living in the low-lying, mostly flat Acholi and Teso sub-regions, which are prone to flooding and drought. Significant environmental degradation can be observed, specifically deforestation. The Teso region has a high concentration of seasonal wetlands and, sharing a watershed with parts of Karamoja, is at high risk of flash flooding. This watershed connection poses interesting challenges and opportunities for upstream-downstream management between the two communities. Especially the populations in areas bordering on Karamoja region and Lango sub-region are vulnerable to drought and flood. In Acholi sub-region the Partners for Resilience will work in Kitgum, Pader and Amuru districts, and in Teso sub-region in Katakwi and Amuria districts.

These communities have been selected because of their high vulnerability and interdependent environmental hazards. These hazards will only increase as a result of climate change and further environmental degradation. In addition, the common hazards in the target areas provide a unique opportunity for direct knowledge sharing between these communities, who are all critically dependent on natural resources to sustain their livelihoods.

3. Project description

The two main natural hazards that communities are exposed to in Uganda are drought as well as floods. Drought mainly features in the North-east of the country, i.e. Karamoja Region and Acholi Region, while floods occur mainly in Teso Region as well as the neighbouring areas, i.e. Acholi and Karamoja Regions. Adverse effects of climate change are already visible in the regions. In the 1980's and 1990's Karamoja for example used to experience severe drought cycles every 10 years. During the last decade, severe drought conditions have become more frequent, coming every two to three years. From 2006 to date Karamoja has experienced severe drought. When rains began in the second half of 2007, they were short and torrential, leading to widespread flooding and destruction of property and infrastructures and loss of lives in many parts of Teso Region but also in Karamoja Region.

These climate changes affect both crops and livestock leading to depletion of food stocks, low incomes, high prices and livestock disease. Development interventions have concentrated on immediate crisis, especially providing emergency relief for famine stricken populations especially the distribution of food aid (including food for work; supporting therapeutic and supplementary feeding centres). While emergency humanitarian assistance is extremely important, resources need to be invested also in strengthening the capacity of the community to build internal sustainable mechanisms to cope with long term adversity. Governmental and non-governmental interventions should be geared at enhancing long term sustainable development, implying that humanitarian assistance needs to be integrated with long-term development strategies, if they are to promote sustainable livelihoods.

Households are extremely vulnerable to natural hazards such as flood and drought. When these occur they often result in food insecurity and a weakening of the social service delivery system. Many of the natural hazards faced are made worse by environmental degradation and the effects of climate change.

Households possess an inadequate understanding of the links between climate change, environmental degradation and increased risks of disasters. Subsequently they also lack adequate capacity to reduce the risks associated with disasters. When disasters do occur there is also a lack of economic capacity to recover without significant external interventions. With few other options for economic empowerment communities are often forced to turn to tree cutting and other forms of environmental degradation, such as wetland encroachment, to sustain their livelihoods, especially during the dry seasons.

Level staff still lack significant practical experience in disaster risk management, climate change and climate change adaptation and there is a need for institutional and capacity building. The interest in climate change adaptation is only beginning; therefore the capacity of local governments is also quite low in terms of the ability to analyze the context of climate change and climate adaptation. There is also a resource gap between what is available for adaptation measures and what is needed. In terms of

environmental degradation, current enforcement of natural resource policies is generally inadequate. This has a number of causes including inadequate facilitation from the macro level and a need for increased understanding regarding the trade-offs between short-term economic benefits of ecosystems and the long term socio-economic benefits of ecosystems.

The URCS trains “committees” of community members in topics and skills related to disasters, climate change and environmental degradation resilience.

- Committee members identify environmental and climate risks together with URCS using hazard maps.
- Committee members come up with solutions together with URCS
- Committee members familiarize their neighbors with the solutions
- The communities work with URCS to implement the solutions
- It is assumed that solutions exist to the identified risks, and that the communities will be willing to implement them. So greater resilience to disasters, climate change and environmental degradation is achieved.

4. Impact evaluation

4.1. Data collection

We held a baseline survey in the Autumn of 2012. We sampled our respondents from two areas – Apac and Katakwi districts in the Lango and Teso sub-regions respectively – where the project was in its earliest stages (the committees had been established but no other work had been done) by the time of the baseline data collection in 2012 so as to allow for a difference-in-differences identification strategy.

The project was implemented in about half the parishes in each of the two districts. We randomly selected two parishes targeted by the project in each district. Within each parish, we randomly selected two villages, and within each village, we randomly sampled 11 household heads and 1 committee member to be interviewed. Except for asking additional questions about the functioning of the committees, we treat the committee members the same way as other respondents.

For each of the treated parishes, we also chose the nearest non-treated parish as a control, again randomly selecting 2 villages in each parish and 12 household heads from each village to be interviewed. Our baseline sample thus consisted of 192 respondents, of which half resided in communities where the project was being rolled out, and half in nearby communities without the project. In the Summer of 2014, we conducted a follow-up survey using the almost same sample technique. Table 1 gives an overview of the sample composition.

Table 1: Sample overview

Observations	Treatment		Control		Total	
	2012	2014	2012	2014	2012	2014
Household heads	88	115	96	128	184	243
Committee members	8	13	-	-	8	13
Total	96	128	96	128	192	256

In both survey waves we asked respondents questions about if floods and droughts affected their crop and livestock production. In addition, we asked if they have some knowledge about measures to mitigate or adopt the consequences of these disasters and, if so, if they have implemented these. In Tables 2–4 we translated these questions in a series of dummy variables and report the descriptive statistics on these variables.

Table 2: Floods (crops)

	Floods and water logging				
	Treatment		Control		ALL
	2012	2014	2012	2014	
Crops affected (<i>CFA</i>)	0.938 (0.243) 96	0.457 (0.500) 127	0.917 (0.278) 96	0.359 (0.482) 128	0.631 (0.483) 447
Known measures (<i>CFKM</i>)	0.800 (0.402) 90	0.397 (0.493) 58	0.739 (0.442) 88	0.217 (0.417) 46	0.603 (0.490) 282
Implemented measures (<i>CFIM</i>)	0.756 (0.432) 90	0.379 (0.489) 58	0.682 (0.468) 85	0.217 (0.417) 46	0.566 (0.496) 279

Legend: mean
(standard deviation)
observations

Where

- *CFA*: Dummy equal to 1 if the respondents crops get affected by floods or water logging, 0 otherwise.
- *CFKM*: Dummy equal to 1 if the respondent can name at least one preventive and/or mitigation measure to counter the effects of floods or water logging on his crops, 0 otherwise.
- *CFIM*: Dummy equal to 1 if the respondent implements at least one of the previously named preventive or mitigation measures.

Table 3: Drought (crops)

	Drought				
	Treatment		Control		ALL
	2012	2014	2012	2014	
Crops affected (<i>CDA</i>)	0.938 (0.243) 96	0.890 (0.314) 127	0.917 (0.278) 96	0.836 (0.372) 128	0.890 (0.313) 447
Known measures (<i>CDKM</i>)	0.344 (0.478) 90	0.248 (0.434) 113	0.386 (0.490) 88	0.121 (0.328) 107	0.266 (0.443) 398
Implemented measures (<i>CDIM</i>)	0.247 (0.434) 89	0.152 (0.360) 112	0.261 (0.442) 88	0.065 (0.248) 107	0.174 (0.380) 396

Legend: mean
(standard deviation)
observations

Where

- *CDA*: Dummy equal to 1 if the respondents crops get affected by drought or bush fire, 0 otherwise.
- *CDKM*: Dummy equal to 1 if the respondent can name at least one preventive and/or mitigation measure to counter the effects of drought or bush fire on his crops, 0 otherwise.
- *CDIM*: Dummy equal to 1 if the respondent implements at least one of the previously named preventive or mitigation measures.

Table 4: Drought (livestock)

	Treatment		Control		ALL
	2012	2014	2012	2014	
Livestock affected (<i>LDA</i>)	0.760 (0.429) 96	0.386 (0.489) 127	0.781 (0.416) 96	0.336 (0.474) 128	0.537 (0.499) 447
Known measures (<i>LDKM</i>)	0.137 (0.346) 73	0.306 (0.466) 49	0.200 (0.403) 75	0.209 (0.412) 43	0.204 (0.404) 240
Implemented measures (<i>LDIM</i>)	0.082 (0.277) 73	0.224 (0.422) 49	0.160 (0.369) 75	0.140 (0.351) 43	0.146 (0.354) 240

Legend: mean
(standard deviation)
observations

Where.

- *LDA*: Dummy equal to 1 if the respondents livestock gets affected by drought or bush fire, 0 otherwise.
- *LDKM*: Dummy equal to 1 if the respondent can name at least one preventive and/or mitigation measure to counter the effects of drought or bush fire on his livestock, 0 otherwise.
- *LDIM*: Dummy equal to 1 if the respondent implements at least one of the previously named preventive or mitigation measures.

4.2. Analyses and results

We use a difference-in-differences (DID) approach to estimate the intent-to-treat effects (ITT) of the project on the outcomes described above. We start by estimating if the project affects climate-related problem prevalence (CFA, CDA, LDA) using (1) a probit difference-in-differences estimation with standard errors clustered at the village level, and (2) a difference-in-differences estimation with kernel-based propensity score matching (DID-PSM)

In addition, we employ the same strategies to estimate project effects on the awareness and implementation of preventive/mitigation measures (*CFKM*, *CFIM*, *CDKM*, *CDIM*, *LDKM*, *LDIM*). The questions related to these measures were only asked to respondents who face the related problems, and the DID estimations could thus suffer from a selection bias. To account for any such biases, we additionally estimate two-step Heckman selection models for these outcomes.

4.2.1.1. Research question 1: Provide the results; include sensitivity analyses; succinctly describe the major results.

Table 5: Floods (crops)

Indicator	DID	DID-PSM	Heckman
<i>CFA</i>	0.012 (0.553)	0.048 (0.081)	
<i>CFKM</i>	0.294 (0.448)	0.068 (0.111)	0.131 (0.148)
<i>CFIM</i>	0.264 (0.431)	0.047 (0.116)	0.102 (0.146)

Standard errors in parentheses. DID: Standard errors clustered at the village level.
* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

We start first by discussing the impact of the project on flood damage on crop production. Based on the regression results in Table 5, we find no evidence that the project has an impact on the negative effects of floods and water logging on crop production. Besides, we detect no statistically significant impact of the project on the knowledge of measures that can prevent or mitigate the negative effects of floods and

water logging on crop production. Also we find no significant impact of the project on the implementation of measures to prevent or mitigate the negative effects of floods and water logging on crop production.

Table 6: Drought (crops)

Indicator	DID	DID-PSM	Heckman
<i>CDA</i>	0.065 (0.214)	0.012 (0.059)	
<i>CDKM</i>	0.676* (0.354)	0.210** (0.088)	0.108* (0.059)
<i>CDIM</i>	0.575** (0.284)	0.116 (0.076)	0.120* (0.068)

Standard errors in parentheses. DID, Heckman: Standard errors clustered at the village level.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Let us now turn to the project results on the impact of droughts on crop production. Table 6 offers some clear conclusions. First, the project has no statistically significant impact on the negative effects of drought and bush fire on crop production. Second, the project can also not prevent or mitigate the negative effects of drought and bush fire on crop production. Third, there is some indication that the project may entail some positive impact on the implementation of measures to prevent or mitigate the negative effects of droughts on crop production.

Table 7: Drought (livestock)

Indicator	Drought and bush fire (livestock)		
	DID	DID-PSM	Heckman
<i>LDA</i>	0.190 (0.285)	0.070 (0.090)	
<i>LDKM</i>	0.716 (0.597)	0.170 (0.112)	0.184 (0.163)
<i>LDIM</i>	0.820* (0.495)	0.118 (0.098)	0.176 (0.116)

Standard errors in parentheses. DID, Heckman: Standard errors clustered at the village level.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Finally, we turn to the results on livestock production. We find no evidence that the project influences the actual impact or knowledge about the impact of droughts on livestock. However, we do find some weak effect that the project may have positive impact on the implementation of measures to prevent or mitigate the negative effects of drought and bush fire on livestock production.

We can summarize our main findings as follows:

Table 8: Impact overview

	Affected by problem	Known measures	Implemented measures
Floods (crops)	0	0	0
Drought (crops)	0	++	+
Drought (livestock)	0	0	+
Legend:	++ Conclusively positive effect	(all estimations yield a significantly positive result)	
	+ Likely positive effect	(some estimations yield a significantly positive result)	
	0 No effect	(no significant results)	
	- Likely negative effect	(some estimations yield a significantly negative result)	
	-- Conclusively negative effect	(all estimations yield a significantly negative result)	

The fact that we find no statistically significant project effects on many of the outcome indicators could in theory be due to an insufficient sample size and a consequent low power of our estimations. However, our sample was as large as budget and time considerations as well as project specifics allowed, so increasing the sample size based on ex-ante power analysis would not have been possible. Conducting an retrospective power analysis to compute the minimum detectable effect sizes (and thus to determine whether statistically insignificant results reflect no actual deference between the treatment and control

groups or just a low-powered estimation) is a controversial issue,¹ often considered fundamentally flawed.² The main reason is that it is immediately obvious that as the significance level increases, retrospective power decreases. Hence in case there is a significant effect, the power will be high, while the power will by definition be low if there is no significant effect. This implies that if we find a significant effect, a power analysis becomes redundant for apparently the power of the test is big enough. It also implies that if we do not find a significant effect the power is apparently too low to pick up the observed effect size. A similar reasoning holds for the reverse power analyses: if the impact is insignificant apparently the sample is too small to pick up the possible effect. Additional information that can be obtained by conducting the reverse power analyses is minor. Retrospective power analyses, also in the form of reverse power analyses suffer from the “power approach paradox.”² Considering the fundamental critiques of retrospective analyses, we do not report and power calculations or minimum detectable effect sizes.

4.2.1.2. Research question 2: Did the project reach its objectives? Can the results be attributed to the project? If not, why not? Did other factors play a role?

The project had some positive impact on 3 of the 9 measured outcome indicators. In particular, we find positive impact on the knowledge and implementation of measures that can prevent drought-related problems with crop and livestock production. On the other hand, we do not find any evidence of impact on the knowledge and implementation measures that can prevent flood-related problems with crop and livestock production.

Perhaps most importantly, we do not find any evidence of project impact on the prevalence of flood- or drought-related problems with crop or livestock production. Thanks to our use of a difference-in-differences set-up and the inclusion of standard socioeconomic confounding factors into the models, we can safely attribute the reported results to the project. However, other factors also play a role in the actual levels of the outcome indicators, especially the age and the level of education of the mothers (see appendix for detailed estimation results).

Table 9: Other factors

		Other factors				
	Outcome indicator	FEM	AGE	LIT	ASI	COM
Floods & crops	Affected by problem	0	–	0	0	0
	Known measures	0	0	+	0	0
	Implemented measures	0	0	0	0	0
Drought & crops	Affected by problem	0	–	0	0	0
	Known measures	0	0	0	0	++
	Implemented measures	0	0	0	+	++
Drought & livestock	Affected by problem	0	0	+	+	0
	Known measures	0	0	0	0	0
	Implemented measures	0	0	0	0	0
Legend:	++	Conclusively positive effect (all estimations yield a significantly positive result)				
	+	Likely positive effect (some estimations yield a significantly positive result)				
	0	No effect (no significant results)				
	–	Likely negative effect (some estimations yield a significantly negative result)				
	--	Conclusively negative effect (all estimations yield a significantly negative result)				

4.2.1.3. Research question 3: How relevant are the results?

Besides a general contribution to MDG 7, the project – if successful – could also be very relevant in helping to achieve the objectives to “develop national capacity for coordination and implementation of climate change adaptation and mitigation activities in the country in support of social welfare and national development” as well as to “ensure climate proof development planning” as defined in section 8.5.3 of Uganda’s National Development Plan (2010/11 – 2014/15). However, the relevance and usefulness of the project is limited to the areas of positive results.

¹ Thomas, L. (1997). Retrospective Power Analysis. *Conservation Biology* 11(1): 276-280.

² Hoening, J. M. , and D. M. Heisey (2001). The Abuse of Power: The Pervasive Fallacy of Power Calculations for Data Analysis. *The American Statistician* (55): 1-6, 19-24.

4.2.1.4. *Research question 4: How efficient was the project?*

Due to the lack of information provided by the CFA and SPO we cannot do a reliable estimation on the financial efficiency of the project and is it not possible to compare it with the provided benchmarks.

5. Discussion and conclusion

5.1.1. Related literature

Current and predicted climate change means that adaptation in the agricultural sector is urgent.³ Farmers are already altering their practices in response to changes in the climate,⁴ and poor people and countries will need outside assistance for adaptation.⁵ Poor farmers' ability to cope with stresses induced by climate change will depend, inter alia, on access to knowledge, training, credit and technologies.⁶ For example, the World Bank outlines three strategic objectives for adaptation efforts in agriculture: monitor climate change impacts on crops, forests, livestock and fisheries; support farmers and lenders in managing the risks of climate change impacts; and improve management techniques and crop varieties/livestock breeds to prevent crop and livestock losses due to climate change and increased pest pressures.⁷ Poor farmers' ability to adapt will also depend on their food security and the opportunities to derive a greater proportion of income from non-climate-affected farm and non-farm sources.⁸

5.1.2. Discussion and conclusion

Since the project experienced delays in its rollout, it was possible to use a difference in differences approach, which can allow us to net out the impact of the project by controlling for unrelated trends and shocks. Although the selection of the benefiting communities was not random, the small (parish-level) size of the target areas allowed us to identify sufficiently similar control areas, which – together with propensity score matching techniques – allows for precise identification of project impact.

We measured the impact of the project on three thematic areas: (1) Flood-related problems affecting crop production; (2) Drought-related problems affecting crop production; (3) Drought-related problems affecting livestock production. Within each area, we focused on three successive steps of the underlying theory of change:

- The knowledge of prevention and mitigation measures
- Their implementation
- The prevalence of climate-related problems

We find first no evidence of project impact on flood-related problems. Besides, we find some evidence of positive project impact on the knowledge and implementation of measures to prevent or mitigate drought-related problems, especially in crop production. We do not, however, find any evidence of any impact of this improvement on the prevalence of drought related problems.

While this could be due to the ineffectiveness of the project, it can just as easily be explained by the relatively short time-frame of the evaluation. Spanning only two years, it covers at most 4 agricultural cycles – a period over which it is unlikely to observe effects of newly adopted technologies. A follow-up survey would be needed to determine whether the first steps of the project's theory of change do lead to its ultimate goal or not.

³ World Bank (2007). World Development Report 2008: Agriculture for Development. Washington, D.C.: World Bank.

⁴ Deressa, T. T., R. M. Hassan, C. Ringler, T. Alemu, and M. Yesuf (2009). "Determinants of Farmer's Choice of Adaptation Methods to Climate Change in the Nile Basin of Ethiopia," *Global Environmental Change*, 19(2): 248–255.

⁵ World Bank (2007). World Development Report 2008: Agriculture for Development. Washington, D.C.: World Bank.

⁶ Kranjac-Berisavljevic, G., B. Osman-Elasha, W. P. Shah, and J. M. R. Stone (2009). "Climate Change." In B. D. McIntyre, H. R. Herren, J. Wakuhungu, and R. T. Watson (Eds.): *Agriculture at a Crossroads: International Assessment of Agricultural Knowledge, Science and Technology for Development*. Synthesis report. Washington, D.C.: Island Press, 46–52.

⁷ World Bank (2009). *Convenient Solutions to an Inconvenient Truth: Ecosystem-Based Approaches to Climate Change*. Washington, DC: World Bank.

⁸ Sabates-Wheeler, R., T. Mitchell, and F. Ellis (2008). "Avoiding Repetition: Time for CBA to Engage with the Livelihoods Literature?" *IDS Bulletin*, 39(4), 53–59.

Table 10 reports a summary of our findings on a scale of 1 to 10, with 1 being “not at all” and 10 being “completely”.

Table 10: Evaluation table

Question	Score
The project was well designed	5
The project was implemented as designed	5
The project reached all its objectives	3
The observed results are attributable to the project interventions	10
The observed results are relevant to the project beneficiaries	5
The project was implemented efficiently	N/A

6. References

- Deressa, T. T., R. M. Hassan, C. Ringler, T. Alemu, and M. Yesuf (2009). “Determinants of Farmer’s Choice of Adaptation Methods to Climate Change in the Nile Basin of Ethiopia,” *Global Environmental Change*, 19(2): 248–255.
- Kranjac-Berisavljevic, G., B. Osman-Elasha, W. P. Shah, and J. M. R. Stone (2009). “Climate Change.” In B. D. McIntyre, H. R. Herren, J. Wakuhungu, and R. T. Watson (Eds.): *Agriculture at a Crossroads: International Assessment of Agricultural Knowledge, Science and Technology for Development*. Synthesis report. Washington, D.C.: Island Press, 46–52.
- Sabates-Wheeler, R., T. Mitchell, and F. Ellis (2008). “Avoiding Repetition: Time for CBA to Engage with the Livelihoods Literature?” *IDS Bulletin*, 39(4), 53–59.
- World Bank (2007). *World Development Report 2008: Agriculture for Development*. Washington, D.C.: World Bank.
- World Bank (2009). *Convenient Solutions to an Inconvenient Truth: Ecosystem-Based Approaches to Climate Change*. Washington, DC: World Bank.

7. Appendix

Appendix 1: Explanatory and confounding variables

treat	= 1 if project is taking place, 0 otherwise
FU	= 1 if follow-up, 0 if baseline
treatFU	= treat × FU
COM	= 1 if the respondent is a member of a project committee, 0 otherwise
ASI	= asset index on a scale of 0 to 1 constructed by factor analysis
LIT	= 1 if the respondent sometimes reads a newspaper, 0 otherwise
AGE	= age in years
FEM	= 1 if the respondent is female, 0 otherwise

Appendix 2: Crops affected by floods

	(DID) CFA	(DID-PSM) CFA
treatFU	0.012 (0.553)	0.048 (0.081)
treat	0.168 (0.502)	
FU	-2.199*** (0.488)	
COM	-0.052 (0.252)	
ASI	-0.895 (0.664)	
LIT	0.150 (0.193)	
AGE	-0.011** (0.005)	
FEM	-0.192 (0.120)	
Spatial fixed effects	yes	no
N	430	430
(Pseudo) R ²	0.3989	0.2844

Standard errors in parentheses. DID: Standard errors clustered at the village level.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Appendix 3: Known measures to prevent/mitigate flood-related problems affecting crops

	(DID) CFKM	(DID-PSM) CFKM	(Heckman) ⁹ CFKM	
treatFU	0.294 (0.448)	0.068 (0.111)		0.131 (0.148)
treat	0.191 (0.322)			0.037 (0.105)
FU	-1.317*** (0.322)			-0.523*** (0.109)
COM	0.427 (0.290)			0.172* (0.105)
ASI	0.708 (0.776)		-0.317 (0.713)	
LIT	0.351* (0.205)		0.370** (0.181)	
AGE	0.003 (0.007)		-0.011*** (0.003)	
FEM	0.051 (0.167)		0.058 (0.141)	
Spatial fixed effects	yes	no	yes	no
N	268	268	431	268
(Pseudo) R ²	0.3989	0.2844		
Mills λ			0.081 (0.105)	

Standard errors in parentheses. DID, Heckman: Standard errors clustered at the village level.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

⁹ All reported results come from a maximum-likelihood estimation of the Heckman selection model which allows for clustered standard errors, but which does not produce a Mills λ estimate. The reported Mills λ values therefore come from a two-step estimation. Estimating the models using the two-step approach does not significantly change the results.

Appendix 4: Implemented measures to prevent/mitigate flood-related problems affecting crops

	(DID) CFIM	(DID-PSM) CFIM	(Heckman) ¹⁰ CFIM	
treatFU	0.264 (0.431)	0.047 (0.116)		0.102 (0.146)
treat	0.179 (0.316)			0.049 (0.108)
FU	-1.163*** (0.271)			-0.465*** (0.095)
COM	0.228 (0.235)			0.121 (0.091)
ASI	0.202 (0.938)		-0.254 (0.644)	
LIT	0.309 (0.238)		0.363** (0.181)	
AGE	0.004 (0.007)		-0.011*** (0.003)	
FEM	0.153 (0.186)		0.0441 (0.150)	
Spatial fixed effects	yes	no	yes	no
N	265	265	428	265
(Pseudo) R ²	0.2039	0.1690		
Mills λ			0.107 (0.108)	

Standard errors in parentheses. DID, Heckman: Standard errors clustered at the village level.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

¹⁰ All reported results come from a maximum-likelihood estimation of the Heckman selection model which allows for clustered standard errors, but which does not produce a Mills λ estimate. The reported Mills λ values therefore come from a two-step estimation. Estimating the models using the two-step approach does not significantly change the results.

Appendix 5: Crops affected by drought

	(DID) CDA	(DID-PSM) CDA
treatFU	0.065 (0.214)	0.012 (0.059)
treat	0.141 (0.452)	
FU	-0.411*** (0.130)	
COM	0.239 (0.344)	
ASI	0.050 (0.689)	
LIT	-0.020 (0.111)	
AGE	-0.0113** (0.005)	
FEM	0.037 (0.110)	
Spatial fixed effects	yes	no
N	430	430
(Pseudo) R ²	0.1633	0.0137

Standard errors in parentheses. DID: Standard errors clustered at the village level.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Appendix 6: Known measures to prevent/mitigate drought-related problems affecting crops

	(DID) CDKM	(DID-PSM) CDKM	(Heckman) ¹¹ CDKM	
treatFU	0.676* (0.354)	0.210** (0.088)		0.108* (0.0592)
treat	-0.218 (0.211)			-0.000 (0.000)
FU	-0.891*** (0.244)			-0.108* (0.059)
COM	0.558** (0.253)			0.000** (0.000)
ASI	0.858 (0.682)		0.000 (0.000)	
LIT	0.002 (0.170)		0.000* (0.000)	
AGE	0.000 (0.005)		-0.000* (0.000)	
FEM	0.046 (0.145)		0.000 (0.000)	
Spatial fixed effects	yes	no	yes	no
N	384	384	431	384
(Pseudo) R ²	0.0667	0.0752		
Mills λ			-0.013 (0.223)	

Standard errors in parentheses. DID, Heckman: Standard errors clustered at the village level.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

¹¹ All reported results come from a maximum-likelihood estimation of the Heckman selection model which allows for clustered standard errors, but which does not produce a Mills λ estimate. The reported Mills λ values therefore come from a two-step estimation. Estimating the models using the two-step approach does not significantly change the results.

Appendix 7: Implemented measures to prevent/mitigate drought-related problems affecting crops

	(DID) CDIM	(DID-PSM) CDIM	(Heckman) ¹² CDIM	
treatFU	0.575** (0.284)	0.116 (0.0757)	0.120* (0.0679)	
treat	-0.120 (0.263)		-0.0428 (0.0761)	
FU	-0.883*** (0.261)		-0.205*** (0.0523)	
COM	0.478** (0.231)		0.144** (0.0575)	
ASI	1.137* (0.686)		0.260 (0.699)	
LIT	-0.0141 (0.210)		0.102 (0.132)	
AGE	-0.00268 (0.00483)		-0.0107* (0.00566)	
FEM	-0.0497 (0.152)		0.0146 (0.133)	
Spatial fixed effects	yes	no	yes	no
N	383	383	430	383
(Pseudo) R ²	0.0728	0.0549		
Mills λ			-0.116 (0.195)	

Standard errors in parentheses. DID, Heckman: Standard errors clustered at the village level.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

¹² All reported results come from a maximum-likelihood estimation of the Heckman selection model which allows for clustered standard errors, but which does not produce a Mills λ estimate. The reported Mills λ values therefore come from a two-step estimation. Estimating the models using the two-step approach does not significantly change the results.

Appendix 8: Livestock affected by drought

	(DID) LDA	(DID-PSM) LDA
treatFU	0.190 (0.285)	0.0697 (0.0902)
treat	-0.0987 (0.226)	
FU	-1.184*** (0.170)	
COM	0.218 (0.226)	
ASI	1.289** (0.585)	
LIT	0.200* (0.103)	
AGE	-0.00311 (0.00430)	
FEM	-0.106 (0.109)	
Spatial fixed effects	yes	no
N	430	430
(Pseudo) R ²	0.1492	0.165

Standard errors in parentheses. DID: Standard errors clustered at the village level.
 * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

Appendix 9: Known measures to prevent/mitigate drought-related problems affecting livestock

	(DID) LDKM	(DID-PSM) LDKM	(Heckman) ¹³ LDKM	
treatFU	0.716 (0.597)	0.170 (0.112)		0.184 (0.163)
treat	-0.395* (0.208)			-0.0869 (0.0731)
FU	0.0528 (0.446)			0.00930 (0.117)
COM	0.110 (0.320)			0.00155 (0.0736)
ASI	-0.407 (0.674)		1.351** (0.569)	
LIT	0.0405 (0.231)		0.370*** (0.0887)	
AGE	-0.000404 (0.00486)		-0.00560 (0.00406)	
FEM	-0.111 (0.234)		0.0452 (0.100)	
Spatial fixed effects	yes	no	yes	no
N	230	230	432	230
(Pseudo) R ²	0.0552	0.0298		
Mills λ			-0.053 (0.157)	

Standard errors in parentheses. DID, Heckman: Standard errors clustered at the village level.

* $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

¹³ All reported results come from a maximum-likelihood estimation of the Heckman selection model which allows for clustered standard errors, but which does not produce a Mills λ estimate. The reported Mills λ values therefore come from a two-step estimation. Estimating the models using the two-step approach does not significantly change the results.

Appendix 10: Implemented measures to prevent/mitigate drought-related problems affecting livestock

	(DID) LDIM	(DID-PSM) LDIM	(Heckman) ¹⁴ LDIM	
treatFU	0.820* (0.495)	0.118 (0.0977)	0.176 (0.116)	
treat	-0.473** (0.236)		-0.0893 (0.0611)	
FU	-0.0368 (0.364)		-0.0160 (0.0810)	
COM	0.126 (0.336)		0.0149 (0.0692)	
ASI	0.119 (0.680)		1.371** (0.585)	
LIT	0.197 (0.192)		0.377*** (0.0872)	
AGE	0.00248 (0.00633)		-0.00537 (0.00408)	
FEM	-0.0568 (0.270)		0.0448 (0.101)	
Spatial fixed effects	yes	no	yes	no
N	230	230	432	230
(Pseudo) R ²	0.0500	0.0297		
Mills λ			-0.132 (0.140)	

Standard errors in parentheses. DID, Heckman: Standard errors clustered at the village level.
 * $p < 0.10$, ** $p < 0.05$, *** $p < 0.01$

¹⁴ All reported results come from a maximum-likelihood estimation of the Heckman selection model which allows for clustered standard errors, but which does not produce a Mills λ estimate. The reported Mills λ values therefore come from a two-step estimation. Estimating the models using the two-step approach does not significantly change the results.

Capacity development of Southern partner organisations

Dodoth Agro Pastoral Development Organisation (DADO)

Technical report on DADO's capacity development

1. INTRODUCTION

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Purpose and outline of technical report

The technical report about Kalongo Dodoth Agro Pastoral Development Organisation (DADO) regards one of the 8 studies on the capacity development of Southern Partner Organisations (SPO's) within the framework of the Joint MFSII evaluation at country level - Uganda. The report serves to give input to the overall joint evaluation report on MFSII funding to capacity development, in addition to the reporting on the other components of the joint evaluation e.g. Millennium Development Goals, and Civil Society Strengthening.

The technical report gives firstly, in Chapter 2 - Context, a description of the context, in which DADO operates, highlighting the main relevant political, economical, cultural and social issues with which the organisation has to deal in pursuance of its objectives. Chapter 3 - Project Description gives the profile of DADO e.g. its mission, vision, and strategic objectives, and budget indications; over the period 2014-2018 that represent an average yearly amount of € 110,000 with a current staff of 9 persons (6 program staff) .

The same chapter describes the development in the support of the Co-Funding Agency (CFA) e.g. PAX to DADO as well. The cooperation between DADO and PAX within the framework of firstly Pastoralists Peace Building Program Uganda and since 2013 the Human Security in the Borderlands program in a/o human rights trainings and peace mediation initiatives / meetings. With the explanations on DADO and PAX is focused on key features of the project: PAX' support is mostly program oriented, and not geared to capacity development as such.

Chapter 4 - Data collection and analytical approach gives attention to the methodological choice made: the capacity development study aims at giving plausible indications on the effectiveness of PAX' support to DADO, based on descriptive and theoretical evidence (the first two steps in the evidence ladder). Chapter 5 - Results gives the changes per core capability and their underlying aspects with explanations on the change qualifications per aspect. Chapter 6 - Discussion and Chapter 7 - Conclusion provide the findings of the analysis culminating in the conclusions with respect to the evaluation questions.

Brief summary of the analyses and the findings

In the study approach qualitative and quantitative research methods are combined. The approach is centred on the comparison between triangulated baseline data (2012) and triangulated follow-up (endline) data (2014). For this background documents, Focus groups/group interviews, workshops, and organisational self assessments in 2012 and 2014, resulting in 2 sets of capability scores. Endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, were qualified in terms of 'improved', 'stable', or 'worsened'. The qualifications and their reasons were peer reviewed in a workshop.

Changes of the core capabilities 1, 2, and 3 showed clearly improvement since 2012, which is in line with PAX' focus since then. Initially PAX and DADO were both actively involved in human security issues and peace mediation in the Karamoja region, but since 2013 DADO is increasingly taking a central role with PAX in a backstopping role. PAX' strategy could blossom because other donors extended also support to DADO: they provided more funds for projects/programmes for which the assignment of core staff was needed. *The chosen approach can only be maintained under the condition that other donors remain supporting DADO as well.*

The way PAX supports DADO has developed over time since 2011 and was not specially focused on capacity development. DADO's organisational capacity was strengthened resulting from increased knowledge of and its grown responsibilities in the peace mediation, human rights and Monitoring, Documenting and Reporting programs/activities. *PAX is recommended to continue its involvement in DADO within the framework of its Human Security in the Borderlands program in the way that was done thus far*, i.e. program oriented and incidentally fused on punctual capacity development issues.

In the assessment of the project design the statements The project was well designed , The project was implemented as designed , and The project reached all its objectives were all rated with 7 (out of 10).

2. CONTEXT

Since Museveni's ascent to power the Ugandan state apparatus succeeded in stabilising the political situation in Uganda. Except for the north eastern part of the country (i.e. Karamoja), the national army could safeguard the security of the Ugandan citizens. The functioning of the rule of law in Karamoja in particular was under threat, due to a growing group of young men with few opportunities in the mainstream of Ugandan society. During the campaigns of disarmament of the Ugandan army, human rights were not well respected in Karamoja. The state was not capable to play to gain an effective preponderance to counteract the frequent armed conflicts between communities. Moreover: socio-economical marginalisation and cultural habits (such as cattle raids and suppression of women) contributed to high crime rates, whereas access to juridical structures are insufficient.

The Lord's Resistance Army (LRA) is not exercising military operations and terror in Northern Uganda anymore. Up to now the Ugandan government and army, as well as civil society organisations play an important role in the return of citizens from the IDP camps to their home grounds, and the recovery of their social structures with post-conflict rehabilitation and trauma processing are keywords.¹

The Ugandan government has developed in 2004 the *Karamoja Integrated Disarmament and Development Plan (KIDDP)*² for Karamoja with support of DANIDA and in cooperation with INGOs. In 2007 this plan was enlarged to the *Peace, Recovery and Development Plan for Northern Uganda (PRDP)* within the context of peace in Acholi after the war with the LRA. The situation of the youth in Northern Uganda and Karamoja is seen herein as a special problem, but an appropriate approach by the government was lacking. The way the Ugandan army implemented the disarmament of citizens in Karamoja appeared to be contradicting with the KIDPP/PRDP: communities that are engaging themselves in voluntary disarmament were insufficiently protected against those having kept their arms. In the process of disarmament establishment of protected kraals serving the protection cattle owners in larger and artificial kraal units protected by the governmental army (2005-2006). After this period a shift to decentralised kraals was started; those kraals were protected by local defence units.

Young men in the pastoral communities of Karamoja are confronted with the same lack of social economic perspective, as their peers in Acholi. The young Karamoja men however function within a context, where typical masculine qualities can be proved: being in war with neighbouring communities, cattle raids³. With cattle a man can earn a respected social position at a relatively young age⁴. The continuing situation of insecurity hampers significant investments in the local economy. Therefore options for mobilising young people for peace, combined with developing a new lifestyle are limited. Young men within the age range of 15-30 year may become in the long term a threat for stability in the former war areas and the communities of pastoralists.

¹ Between 2005 and 2008 Uganda's score on the Failed States Index improved, but or dropped again in 2009. According to the 2009 rating, Uganda now ranks no 21 among a total of 38 failed states worldwide; www.fundforpeace.org/weg/index.php

² Republic of Uganda, Office of the Prime Minister: *Karamoja Integrated Disarmament and Development Programme: Creating Conditions for Promoting Human Security and Recovery in Karamoja*, June 2007

³ Simon Simonse, 'Heroes, Hooligans, Mercenaries: The Warrior-Herdsman of the Horn of Africa, Small Arms Control and the Rehabilitation of Failed Statehood, in *Vanguards and vandals, Youth, Politics and Conflict*', edited by J. Abbink & I. van Kessel, Leiden, etc.: E.J. Brill 2004; D. Akabwai (with P.E. Ateyo), *The Scramble for Cattle, Power and Guns in Karamoja*, Feinstein International Center Report, December 2004; K.A. Mkuu, *Guns & Governance in the Rift Valley, Pastoralist Conflict & Small Arms*, Oxford, etc. 2008, James Currey.

⁴ Pax Christi Horn of Africa: *What Warriors Want, Pastoralist Youth & Small Arms Proliferation in Upper Awash, Ethiopia and Karamoja, Uganda*, Civil Society Acting on Community Security, vol.4, Nairobi, 2004.

Within the Alliance Freedom from Fear, Pax (former IKV Pax Christi) cooperates with Amnesty International for contributing to security and justice in North Uganda and Karamoja in particular. The alliance focuses on the youth-young people as specific target group. The youth that grew up in the IDP-camps in Northern Uganda did not have the opportunity to build their own perspective in society: they did not get proper education (basic and vocational), don't have employment opportunities, and consequently feel excluded from society resulting in a hostile attitude towards society. The biggest challenge for disarmament and peace building are the *karacuna*, the young men of the warrior age group from pastoral communities in the Karamoja cluster that engage in cattle raiding. PAX has been actively involved in Karamoja since early 2000 with a focus on community based security strategies. The organisation promoted establishing civil society organisations that focus on cross border peace building initiatives and intercommunity dialogue across borders for reducing the conflicts between cattle raiding communities.

In 2006 the Peace and Sport (P&S) programme for young warriors in the borderlands of Uganda, South Sudan and Kenya was set up, together with Bishop Paride Taban and Seeds of Peace Africa (SOPA); this programme was implemented by the Kotido Peace Initiative (KOPEIN). Pax facilitated in the first five years of the Peace & Sports program the establishment of linkages between the mentioned CSOs involved in the program and the church with one another across borders through training workshops at different levels from organizational to kraal level, bi-annual coordination meetings, and staff detachment to different field activities. Pax also advocated getting the repressive disarmament and disproportionate violence of the UPDF (like the helicopter gunship bombings of kraals) on the agenda of the Dutch Parliament to put pressure on the Museveni regime⁵.

The Kotido Peace Initiative (KOPEIN) operates since 2000 with the objective to take peace initiatives in the Karamoja region. The organisation represents the Jie ethnic group, mostly living in and around Kotido; it was involved in cross border peace initiatives with partners from Kenya (Turkana) and South Sudan (Jiye, Toposa, Buya, Didinga, and Murle⁶)⁷. In the conflict mapping analysis carried by Pax and SOPA (Seeds of Peace Africa) 2010-2011⁸, the stable cooperation between the Jie and the Dodoth, living in and around Kaabong, deserved continued attention from Pax in bringing about peace activities within the region. Already from 2008 onwards attention to the Dodoth is given, also due to the marginalised position of the ethnic group. In this the Dodoth Agro Pastoral Development Organisation (DADO) was instrumental; the organisation was founded in July 1996 by men and women of Kaabong district as a Community Based Organisation.⁹ The organisation has developed a narrow cooperation with KOPEIN since, because Jie and Dodoth were having often conflicts at the Uganda side of Karamoja. DADO learnt considerably from KOPEIN on cross-border peacebuilding; this programmatic learning was actively stimulated by IKV Pax Christi.

⁵ Human Security in the Borderlands program, Annex to Funding proposal, 2011 p. 15

⁶ The Buya, Didinga, and Murle being speakers of languages of the Surma group, are linguistically speaking not part of the Karamojong Cluster. They, however, share the same culture of cattle raiding with the speakers of Akarimojong and related dialects.

⁷ Mid Term Strategic Review Workshop Cross Border Peace & Sports Programme At The St. Mary's Reparatrix Retreat Centre Date: 23rd-25th November, 2009 Organized by KOPEIN Uganda In collaboration with Seeds of Peace Africa and IKV Pax Christi Netherlands

⁸ HUMAN SECURITY IN THE BORDERLANDS OF SUDAN, UGANDA AND KENYA, Key advocacy issues from the perspective of a grassroots peace building programme for youth warriors, IKV Pax Christi/SOPA, July 2011, p. 20

⁹ This was before the Present Kaabong was carved out of Kotido as a district. On 26th July 2005 after operating as a CBO for approximately 10 years under then Kotido district, DADO was registered with the National NGO board under the Ministry of Internal Affairs of the Uganda Government as a nongovernmental organisation. DADO is registered by Kaabong District Local Government as of the Development Partner among others. See DADO Profile, April 2012, p. 1

3. PROJECT DESCRIPTION

Profile Southern Partner Organisation (SPO)

Dodoto Agro-Pastoral Development Organization (DADO) was founded in July 1996 by men and women of Kaabong district, as a community based Organization (CBO). This was before the Present Kaabong was carved out of Kotido as a district. On 26 July 2005 after operating as a CBO for approximately 10 years under the then larger Kotido district, DADO was registered with the National NGO board under the Ministry of Internal Affairs of the Uganda Government as a Non Governmental Organisation. DADO is also registered by the Kaabong District Local Government as one of its development partners.

DADO operates in Kaabong district of North Karamoja with a concentration in the sub counties of, Lodiko, Sidok, Lolelia, Kalapata, Kaabong East, Kaabong West and Karenga. Some other projects are also implemented in the sub counties of Kawalakol, Kathile and Kamion on the corridors/borders of the Kidepo Valley National Conservation Area Park.

DADO's mission regards the empowerment of agro-pastoralist in Dodoto to achieve improved and sustainable livelihoods through improved agriculture [cropping and animal health], business skills development and income generating activities, domestic violence prevention and HIV/AIDS Awareness/Education, Peace Building, Conflict Mitigation and Transformation, Human Rights, Good Governance, Lobby and Advocacy for Pastoralist Rights¹⁰. The organisation's mission statement was recently reformulated more concisely in its new Organisational Strategy 2014-2018. The organisation aims to 'improve food and nutritional security; animal health, including natural resources rights to reduce poverty and conflict through building community resilience and capabilities, securing better lives and sustainable livelihoods'¹¹.

The organisation's current strategic objectives relate to the areas mentioned in the mission statement and do relate all to DADO's overall goal by envisaging 'prosperous and sustainable agro-pastoral communities with access to enough food and livelihood options to fulfil their potential in harmony'¹². The organisation seeks actively to mediate peace and strive to harmony in a conflict prone region of Uganda. It aims doing this by contributing to conditions for better livelihoods (capacity development for improvement of livestock, agriculture, market development, income generation), by contributing to enhancing capacity of peace building, by promoting human rights, in the Dodoto communities and Karamoja in general.

In the 2012 organisational profile women and youth groups were to be focal in the organisation's activities; the strategic plan of 2014 is less explicit about this; the strategic plan is however very clear about the organisation itself: the development and strengthening of DADO's organisational and institutional capacity now is formulated as a strategic objective on its own¹³.

¹⁰ See DADO Profile, April 2012, p. 1

¹¹ DADO Organisational Strategy 2014-2018, January 2014, p. 2

¹² DADO Organisational Strategy 2014-2018, January 2014, p. 2

¹³ DADO Organisational Strategy 2014-2018, January 2014, p. 3

DADO has 25 founder members that constitute the Annual General Assembly (AGA) with an elected Board comprising of nine members 1/3 of which are women. The composition of the Board is multi skilled comprising of Development, Health professionals, Administrators, Civil Engineers and leaders. The organization has a Programme Coordinator who coordinates and oversees the activities and operation of the organization on behalf of the Board.

Currently (August 2014) the organisation has a staffing of 9 persons Executive Director (male), Programme Officer (male) Project Officer Peace Building (male), Project Officer, Livestock Development (male), Project Officer, Livelihoods (female), Project Officer, Governance (male), Office Assistant (female), Senior Security Guard (male), and Assistant Security Guard (male). In 2012 the organisation was slightly larger: it hosted 11 salaried employees, of which 5 are program staff and the other 7 support staff (6 male; 5 female), and 7 volunteers (5 male, 2 female). It appears that apart from the reduction in support staff, the gender balance in 2014 was differing (7 male, 2 female).

DADO's budget varies in accordance with the programs the organisation has in implementation. Currently this concerns the programs :

- Human Security in the Borderlands/previously Pastoralist Peacebuilding Program (PAX Netherlands)
- Karamoja Livestock Development Project Phase III (VSF Belgium)
- Water, Sanitation Project in Kaabong (WASAKA) (VSF Belgium)
- Karamoja Human Rights Capacity-building and Awareness (Open Society Institute (OSI) Open Society Institute for Eastern Africa (OSIEA)

Based on these donor commitments by mentioned donors DADO has made a budget projection for the period 2014-2018¹⁴.

Table 1: DADO budget projection 2014 - 2018

Programmes Costs in €	2014	2015	2016	2017	2018	Total
Agriculture, Livestock Extension and Water Development	8,532	8,873	9,228	9,597	9,981	46,211
Peace Building and Human Rights Protection	24,685	25,672	26,699	27,767	28,878	133,702
Sustainable Livelihoods for poverty reduction	25,370	26,385	27,440	28,538	29,679	137,411
Research and Advocacy	10,507	10,928	11,365	11,819	12,292	56,911
Infrastructural /Institutional Development and Support	10,960	11,398	11,854	12,329	12,822	59,363
Programme Management and Administration Costs	23,580	24,524	25,505	26,525	27,586	127,719
GRAND TOTAL	103,635	107,780	112,091	116,575	121,238	561,319

¹⁴ DADO Organisational Strategy 2014-2018, January 2014, p. 4; Exchange rate € 1 = UGX 3,331

Support Co-funding Organisation (CFA) to SPO

PAX has supported DADO until and including 2014 with funding its program costs (amongst others intercommunity, regional/district peace actors and women peace group meetings and some office costs), in addition to the funding provided by VSF Belgium and Oxfam GB for office operations.

On capacity development specific staff trainings were provided on advocacy/campaigning, on Monitoring, Documenting and Reporting (MDR), and human rights and facilitation (ToT) for DADO's Karamoja group peace building/mediation by providing trainings in collaboration with Amnesty International / Special programme on Africa. This was done within PAX' Pastoralists Peace Building Program Uganda / Human security in the Borderlands. In addition PAX carried out a support visit for improving DADO's financial administration. The budgeted capacity development amounts and related budget depletion percentages for this program are summarised in the next table

Table 2: PAX' support for Human Security in the Borderlands Program Uganda/Pastoralists Peace Building Program Uganda in €¹⁵

Year	Budgeted amounts according to contract (€)	Budget depletion (%)
2011	€5,620	100%
2012	€20,008	86% (€17,206)
2013	€18,000	100%
2014	€25,042	Not yet known

PAX' support to DADO concerns a small part of its total expenditures over the years 2011 - 2013, as is shown in the next table.

Table 3: Consolidated program expenditures PAX for Uganda in €¹⁶ and % share off Pastoralists Peace Building Program

2011	%	2012	%	2013	%
130,000	4	231,000	8	184,000	9

DADO's reporting to PAX regarding the human security situation the Borderlands (Kenya, South Sudan and Uganda) reflects clearly the focus of PAX' support to DADO¹⁷. Most of these expenditures are geared to strengthening DADO's capacity at program level; except for PAX' support to DADO's financial administration, no other specific support to the organisation's operational capacity was provided¹⁸. This reporting confirms the observation made in the baseline report that PAX' support was mainly focused on the core capabilities To Act and commit, To Deliver on development objectives, To Adapt and self-renew, and To relate to external stakeholders¹⁹. The next table shows PAX' orientation towards DADO's capacity development during the baseline study.

¹⁵ Contracts between (IKV) PAX (Christi) and DADO 2011, 2012, 2013, 2014 and Financial Reports DADO 2011, 2012, 2013, and 2014

¹⁶ See IKV PAX Christi, Annual Account 2012, p.14 and PAX Annual Account 2013, May 2014, p. 14

¹⁷ Dodoth Agro-Pastoralist Development Organisation [Dado] - Human Security Annual Report In The Borderlands [Kenya, South Sudan And Uganda] - Sub Mitted To IKV Pax Christi Netherlands, Reporting Period: 20th January, 2014

¹⁸ See PAX Uganda Annual Report 2013, Output Tables, p. 1

¹⁹ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. 408

PAX' targeting core capabilities DADO - Baseline report measurement

(1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	3
Human Resources development training (jointly with Amnesty International)	
2. Adapt and self-renew	4
Exposure visits (Pristina, Mitrovica), human rights trainings	
3. Deliver on development objectives	5
Coaching on delivery, support in coordination activities and to accounting	
4. Relate to external stakeholders	4
Support to establishment cross border and regional relations	
5. Achieve coherence	1
No targeted support	

The next table regarding PAX' orientation to DADO's capacity development at the time of the endline does show only a change in attention for core capability 1 To act & commit, because of PAX' intensified attention to DADO's financial accounting.

PAX' targeting core capabilities DADO - Endline report measurement

(1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	5
Support to DADO's financial accounting	
2. Adapt and self-renew	4
Trainings in human rights, advocacy/campaigning, and on Monitoring, Documenting and Reporting (MDR)	
3. Deliver on development objectives	5
Coaching on delivery, and support to coordination activities	
4. Relate to external stakeholders	4
Support to establishment cross border and regional relations	
5. Achieve coherence	1
No targeted support	

DADO's own orientation to capacity development was certainly active, but concrete activities in this respect still depend very much on what the organisation's donors facilitate. This was also the case at the time the baseline measurements were done²⁰.

Per 2013 PAX focused its support mainly on activities within its Human Security in the Borderlands program; it concerned cross border dialogues, network meetings within the Peace and Sport Program, and meetings of the Karamoja human rights consortium²¹. DADO was selected to be the host organisation of the pilot project Human Rights Trainings in Karamoja; the main objective of the project is 'to strengthen the promotion and protection of human rights in the Northern Karamoja sub-region, especially for the most vulnerable communities, in relation to human security issues and existing peace and reconciliation actions'²². The pilot project included the following activities:

²⁰ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. p. 408-410

²¹ in 2013 DADO and KOPEIN, in cooperation with PAX and Amnesty International, initiated the Karamoja Human Rights Consortium, a partnership of 8 local CSOs from Kotido, Kaabong and Abim district focussing on human rights awareness raising, monitoring, documentation and reporting

²² See 'Samenvattende informatie project mensenrechtentrainingen in Karamoja', Pilot year 1 (prolonged into 2014), July 2013, p. 1

- Training of Trainers for CSO field workers to train community Human Rights Volunteers (HRVs)
- Training of community volunteers/leaders by CSO field workers
- Human Rights awareness and dialogue sessions with existing community groups
- HR awareness through Music, Dance and Drama (MDD)
- Dialogue meetings with traditional elders
- Dialogue meetings with local authorities and security officials
- Training in Monitoring, Documenting and Reporting (MDR)
- Procure and distribute equipments for monitoring HR abuses and violations
- Legal and psychosocial support to survivors

All listed activities are mainly supported with funds from the Open Society Initiative Africa (OSIEA). Amnesty International (AI/SPA) and PAX contribute to the project by giving continuous advice and mentoring throughout the project period. The pilot was extended into 2014. PAX' capacity development support to DADO per 2013 should be seen in the light of this special responsibility.

PAX' capacity development support to DADO is thus instrumental for DADO's (besides KOPEIN's) Karamoja peace building and mediation work. The human security programme in Karamoja addresses conflicts between Jie and Dodoth communities and their neighbouring communities across the border in Kenya (Turkana) and South Sudan (Toposa, Didinga, Buya) by creating/maintaining interfaces and facilitating dialogue between communities and between authorities and communities in Karamoja; furthermore it tackles the tensions and lack of trust between Karamajong communities and traditional leaders on the one hand and government and state security organs on the other hand through dialogue and cooperation (e.g. authorities-community partnership in retrieving stolen cattle and joint grazing of different communities). *PAX' Theory of Change is mainly oriented on facilitation of dialogues, conflict mediation, and brokering cooperation through local civil society organisations between parties that have conflicting interests, political/ethnic tensions and poor resource bases.*

At program outcome level PAX reports that in three years time human security in Karamoja has greatly improved according to local partners, in spite of violent incidents with livestock thefts and killings, occasional murders and abductions of artisanal gold miners. Human rights infringements by army and police have decreased since the end of the violent disarmament period, but are still prevalent in Kaabong where arms are hidden among the Dodoth²³. Cattle raiding and conflicts between Jie and Dodoth have diminished since 2011. Inter-community relations have improved because of dialogue meetings and leadership collaboration, and joint grazing of Jie and Dodoth (with Turkana) at kraal level for the first time in the second half of 2013. Moreover there is effective dialogue with government, army, police, kraal leaders and karacuna on community security issues. The dialogue approach of PAX' partners contributed to increased awareness that dialogue and justice resolve more than revenge and violent repression. Karamajong partners have gained an increased capacity in human rights awareness raising and to certain extent in monitoring, documentation and reporting of human rights violations.

²³ See Cross border(Uganda, Kenya and South Sudan) Security incidences in as recorded in Kaabong and Kotido, Uganda 2013/2014, as reported by DADO, August 2014 (internal publication).

Cross-border relations between Karamajong and Didinga and Toposa (from South Sudan) have slightly improved through increased collaboration between authorities and communities across the border since the end of 2012. However relations between Didinga and Toposa in South Sudan have grown more tense by the end of 2013. The level of trust between communities and authorities in this butting cross-border collaboration is still very low and further cooperation is currently hindered by the eruption of violent conflict in South Sudan.²⁴

Key features project

PAX' support to DADO covers a part of DADO's entire spectrum of activities. The support focuses on a series of interventions mainly within its Human Security in the Borderlands program and its preceding peace brokering and human rights activities . In this entire range of activities capacity development has a modest place, hence PAX' support cannot be considered as a distinct capacity development project. Better is it to refer to certain punctual interventions that touch upon capacity development i.e. training in Monitoring, Documenting and Reporting (MDR), TOT in human rights and facilitation (ToT) and in addition support to DADO's financial administration. These interventions aims at serving the improvement of a part of DADO's operations, but cannot be considered as such as a project on its own.

²⁴ See PAX Annual Report 2013, Narrative Part, p. 5

4. DATA COLLECTION AND ANALYTICAL APPROACH

For putting up the baseline on capacity development for the SPO DADO the evaluation tools are shortly explained. For the field research for the baseline and endline (follow up assessment) studies two special Research Manuals were written.²⁵

Background documents

For both the baseline as the endline initially on strategy, context and activities were studied and verified with concerned SPO (DADO) and related CFA (PAX).

Focus groups/group interviews

Focus group interviews were held with DADO's management and the important stakeholder organisation KOPEIN for getting data on the organisations development and its working environment. In these interviews attention was given to the organisation's *Timeline* until the baseline year 2012, its *Theory of Change*, and the *Results Chain CFA - SPO - Target groups / stakeholders*. *Observation* of the SPO's office and working environment gives additional information about the SPO.

A complementary approach was followed in the fieldwork of the endline study that has taken place during the period June 2014; herein interview formats were used emphasising *key changes and wished changes* within the SPO, as seen by interviewees from the SPO personnel, from externals and from the supporting CFA.

Organisational self assessment

In the baseline as well as the endline organisational self assessments were done with respondents of the SPO; in the endline assessment was aimed at a participation of 30% of the respondents present in the baseline assessment; for DADO this was 11%²⁶; the endline workshop has taken place on 16 June 2014. The same questionnaire covering 5 Core Capabilities and connected indicators with prompting questions was used, in order to facilitate comparability between the baseline and endline outcomes.

Outcomes of the self assessment in the baseline were related to all elements of *Focus groups/group interviews* for making up a *Synthesis scoring form* that is the basis for the evaluation of each core capability and its underlying aspects. After processing the *Synthesis scoring form* a debriefing feedback meeting with DADO has taken place to discuss determining factors for the given scores. After these debriefing additional *self reporting* was requested from the respondents; they were asked to issue their remarks/comments on the synthesis scoring form. Final scoring and related explanations were given by the evaluators in a special feedback meeting on 27 September 2012 and peer reviewed.

²⁵ Research Manual, Evaluation Study *Capacity development* of Southern partner organisations -Baseline - Uganda, Eric Kamphuis, Molenrij/Kampala: June/July 2012
Research Manual, Evaluation Study *Capacity development* of Southern partner organisations - Uganda -Endline, Eric Kamphuis Molenrij/Kampala: March /April 2014

²⁶ 30% proved to be not possible in the case of DADO, as the organisation reduced in size (see Profile SPO) and a profound refurbishing of the organisation)

Outcomes in the endline were related to interview findings (with DADO personnel, externals, and PAX). Then endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, reflecting changes in core capabilities and their underlying aspects over the period June 2012- June 2014, were qualified in terms of 'improved', 'stable', or 'worsened'. These qualifications were generated by an Excel tool that was specially developed for this purpose; the tool generated endline scores per core capability and their underlying aspects, based on multiple choice answers on 64 questions; the other 18 questions regarded open requests for additional comments per different aspect/core capability and did not influence the scoring. The tool thus firstly determined endline scores per core capability and their underlying aspects and these scores were then related with the scores of the baseline study for getting the change qualifications²⁷. The change qualifications of the core capabilities and their underlying aspects were linked with an inventory of determining factors for these changes. This was done in workshop sessions and interviews; for DADO change qualifications, determining factors and open comments provided in the questionnaire were captured in a workshop report and interview reports. The workshop report was reviewed in a special feedback phone session with DADO on 29 and 30 August 2014. Subsequently the workshop report was peer reviewed, and served as input for the evaluator's final assessment.

Observation forms

Regarding DADO a detailed chronology of study/research activities was recorded on Observation forms. In the forms was also space for the researchers to make observations on the research process, the collected data, or the cooperation extended by DADO and PAX as related CFA.

Reasons for choice of mentioned methods

Organisational assessments regard essentially interactive processes between the evaluated organisation and the evaluators. Taking a baseline does not only concern the handling of measurement tools, but also the triangulation of collected findings in interviews/focus groups. The followed approach is thus a mixture of two perspectives. Firstly: the application of survey research and feedback, and secondly: the strong attention for people working in organisations that face changes. For that reason data gathering through a questionnaire and self-assessment went hand in hand.

Respecting the two perspectives simultaneously means that research techniques like Difference-in-Differences are not applicable in this assessment framework. Factors influencing organisational development are complex and multidimensional and cannot be captured in the 5C research within the timeframe given. Organisational assessments combine different measuring and observation methods, as mentioned above with assessment based on expertise in the area of organisational development. Difference-in-Differences and Randomized Controlled Trial (randomized assignment) for example can hardly be matched with such combination.

²⁷ The scores of the baseline study were in 2012 not made up by means of this tool; the final scores were then determined by putting up the Synthesis scores. For consistency sake the original 2012 scores were reviewed with the Excel tool, in order to get a comparison between the baseline and endline scores on the same basis; in a view cases baseline scores had to be adapted; these adaptations were in general marginal. Through the review of the baseline scores with the Excel tool, both baseline and endline scores are given with one decimal.

The choice for the mentioned methods has implications for type of evidence the endline study can generate and consequently in what terms effectiveness of interventions can be qualified. The next table gives an overview of the 4 possible levels of evidence, the related parameters of evidence / types of research, and hence the qualifications of the effectiveness of interventions²⁸.

Table 4: The Evidence Ladder

Levels of evidence	Parameter of evidence	Types of research	Effectiveness of interventions
4. Causal	As in 1, 2, and 3, but there is now sound and substantial evidence that the outcome is caused by the intervention and/or clear evidence showing which ingredients of the intervention are responsible for the outcome.	<ul style="list-style-type: none"> • Randomised Control Trial • Repeated case studies (N=1 designs) 	Efficacious
3. Indicative	As in 1 and 2, but it has now been demonstrated that the intervention clearly leads to the desired outcomes (e.g. goals are attained, target problems decrease, competencies increase, clients are satisfied).	<ul style="list-style-type: none"> • Quasi-experimental studies • Theory of Change studies • Norm referenced approaches • Benchmark studies • Client satisfaction studies • Goal attainment studies • Quality assurance studies 	Functional
2. Theoretical	As in 1, but the intervention now has a plausible rationale (i.e. a program theory) to explain why it should work with whom	<ul style="list-style-type: none"> • Reviews • Meta-analysis • Expert knowledge studies 	Plausible
1. Descriptive	The essential elements of the intervention (e.g. goals, target group, methods and activities, requirements) have been made explicit	<ul style="list-style-type: none"> • Descriptive studies • Observation studies • Analysis of documents • Conduct of interviews 	Potential

²⁸ This overview is based on the various 'ladders of evidence' that are in use in health research; the overview takes the realities of developmental research into account.

The approach followed in the capacity development component of the MFS2 regarding the Capacity development of Southern partner organisations is mainly related to the evidence level 'theoretical'. So the effectiveness of the interventions can the best be qualified as 'plausible'. The types of research related to the levels of evidence 1 and 2 (Descriptive and Theoretical) corresponds with the described earlier in this chapter.

The use of the 5 Core capabilities conceptual framework made it possible to compare baseline and endline scores of core capabilities and thus to reach to a certain extend the level of evidence 'indicative'. One should however realise that for the determination of the final scores and the qualifications of capability changes interviews, workshops, core group discussions and observation studies were vital. Time constraints made it also not possible to carry out a profound Theory of Change study or client satisfaction studies. Hence the capacity development study can the best generate plausible explanations of the effectiveness of researched interventions.

5. RESULTS

This chapter gives a descriptive analysis of the findings collected during the follow-up assessment (endline study) following the approach described in the previous chapter. The endline study generated scores per core capability and their underlying aspects that are based on scores per indicator. The comparison between baseline and endline scores are here not given at indicator level, as the scores on aspects underlying the core capabilities give sufficient insight in the major changes per each core capability²⁹ and thus on the organisation's capacity development over the period June 2012 - June 2014 (i.e. baseline scoring and endline scoring periods). Per each aspect an explanation given on the finally assigned change qualifications, based on the change qualifications given stemming from the questionnaires used in the organisational self assessment. If the difference between the baseline and endline scores was between -0.25 and + 0.25, the aspect change was qualified as "stable", if the difference was more than + 0.25, then the qualification was "improved", and if the difference was less than -0.25, the aspect change was qualified as "worsened". The final change qualifications, set by the evaluator, take into account what emerged in the workshops, interviews, focus group meetings and the final feedback meeting with DADO. The baseline and endline scores are given with one decimal to make clear how the Change qualifications stemming from the questionnaires were given. After the explanations of the change qualifications per aspect an explanation is given on the overall change qualifications per entire core capability.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
1 Capability to act and commit	2.9	3.2	Improved	Improved
1a Level of effective leadership	2.9	3.3	Improved	Improved
1b Level of realistic strategic planning	3.2	3.0	Stable	Stable
1c Level of translation of strategy into operations	3.5	3.3	Stable	Stable
1d Level of staff capacity and motivation	2.3	3.2	Improved	Improved
1e Level of financial resource security	3.3	3.4	Stable	Improved

1a. *Improved*: Level of effective leadership improved, because capacity building was undertaken for staff and Board of Directors in management, policy and strategic planning. The sessions were undertaken in November 2013 and beginning of 2014. Also staff meetings are often conducted, as compared to 2012. Sharing of and agreeing upon new ideas among staff on the most appropriate way they should work became a significant change in the course of 2013.

1b. *Stable*: Level of realistic strategic planning improved because of Joint staff and BOD strategic planning, which resulted into the current Organization's strategic plan 2014 - 2018. This was not the case in 2012. The mentioned involvement of all staff and Board of Directors in planning, implementation, monitoring, review of activities and proposal development meant a significant change for the organisation in the course of in 2013; the same counts for the joint monitoring of projects with local government, and the district peace and security committee. However: some of the structures like the Annual General Meeting and the Board of Directors are not fully committed to organizational activities, due to in their view inadequate resources to facilitate them: the development partners/donors are reluctant to fund BOD members through DSA's.

²⁹ Detailed data at indicator level are captured in the Excel scoring tool and can be made available.

1c. *Stable*: Conditions for effective planning created, because of development of the current organization's strategic plan 2014 - 2018. This is now a guide for project proposal developments and implementations. DADO implements since 2013 at least 4 Projects in its thematic areas. 1) Human Security in the Borderlands - Uganda, funded by PAX Netherlands, 2) Karamoja Livestock Development Project Phase III funded by VSF Belgium, 3) Water, Sanitation Project in Kaabong (WASAKA) funded by VSF Belgium, 4) Karamoja Human Rights Capacity-building and Awareness-Raising Project funded by Open Society Institute (OSI) through Open Society Institute for Eastern Africa (OSIEA), and 5) DADO IKV Pax Christi Human Security (Oxfam UK).

1d. *Improved*: Still room for capacity development, but options for the organisation are limited. Deliberate efforts to work on motivation of staff; most staff newly assigned. Instability in availability of staff due the lack of funds for their salaries meant a setback in 2013. This was because some development partners were not willing at times to meet all staffs costs/salaries. The staff members are however flexible to implement organizational activities since beginning 2013. During periods when the organization did not have funds to recruit and pay employees, the available few did all the work. For example the staff attached to the peace-building project did the livelihood project activities as well. However: recruitment of well-experienced, qualified and action-oriented staff has taken place; five staff members were recently (2013/2014) recruited.

1e. *Improved*: DADO has more than three development partners/donors namely PAX, VSF Belgium, OSI/OSIEA (see 1c), OXFAM and Veterinaries without borders since beginning 2014.. The organisation's funding base for the next future looks more stable, due to the now existing sound accounting since 2014. The expectation for increased funding was incorporated in the organisation's strategic plan.

Overall the change of core capability To Act and Self Renew can be qualified as improved; most changes that made this improvement possible have taken place during the year 2013. PAX' financial involvement in DADO slightly increased, but in general its funding base became stronger. PAX' assigning more responsibility to DADO in the Human Security in the Borderlands program has given the organisation clearer status in its working environment.

Indicator	Baseline score	Endline score	Change qualification - questionnaire	Evaluator's change qualification after workshops/interviews
2 Capability to adapt and self-renew	2.6	3.2	Improved	Improved
2a Level of effective application of M&E	2.4	3.0	Improved	Improved
2b Level of strategic use of M&E	2.5	3.4	Improved	Stable
2c Level of openness to strategic learning	2.9	3.2	Improved	Improved
2d Level of context awareness	2.5	3.4	Improved	Improved

2a. *Improved*: Conditions for improved effective application of M&E were created in the course of 2013+ now Board Members, DADO staff, as well as District Line departments are currently involved in Project/Programmes reviews through joint meetings and monitoring. Performance review meetings are regularly conducted; these involve all staff since 2013. This is done on monthly and quarterly basis depending on position in staff. Weekly meetings on progress of activities are also held; these also involve all staff. All improved conditions paved the way for a better effective application of M&E in the near future.

2b. *Stable*: Strategic use of M&E of linked to DADO's field activities; as example was mentioned direct monitoring and accounting of Village Saving and Loans Association (VSLAs) group funds to determine profits; there is room for improvement in many other areas where DADO is active; the endline score appeared overrated, which was endorsed by DADO's management.

2c. *Improved*: Level of openness to strategic learning improved in 2013, because staff members are currently (2013-2014) using Monitoring, Evaluation And Learning (MEAL) for the ongoing projects/programmes; this was not the case before 2012. The executive director is open to staff and BOD regarding organizational information (i.e. grants); likewise staff members are open to one another and to the executive director to express their views and also disappointments from beginning 2013.

2d. *Improved*: The organization engages with key stakeholders in the field more intensively, which enables a profound understanding current trends. DADO utilizes and involves existing administrative and community structures, especially the Local Government offices and officers of Community Development.

Overall the change of core capability To Adapt and Self Renew is qualified as Improved; favourable conditions for further improvement were realised, and this can be expected in the near future, provided that the current staff continues operating.

Indicator	Baseline score	Endline score	Change qualification - questionnaire	Evaluator's change qualification after workshops/interviews
3 Capability to deliver on development objectives	2.6	3.2	Improved	Improved
3a Extent to which organization delivers on planned products and services	3.1	3.5	Improved	Improved
3b Extent to which delivered products and services are relevant for target population in terms of the effect they have	2.6	3.2	Improved	Improved
3c Level of work efficiency	2.3	2.9	Improved	Stable

3a. *Improved*: The extent to which organization delivers on planned products and services improved, because staff members themselves currently prepare work plans and budgets upon which projects/programmes since 2013. Staff now besides their main operational work plans, draw weekly, monthly and quarterly work plans, which are approved by the Programs Office or the Executive Director. The organization has also earlier agreed on performance standards since 2012, according to which performance of each staff is periodically checked. Work planning and work performance reviewing now appears streamlined, but field checking of the delivery of planned services and services needs more attention.

3b. *Improved*: The relevance for and effects of delivered products / services are for target improved, because needs assessments are jointly done with communities/stakeholders in the course of the ongoing projects/ programs. Issues generated by communities/stakeholders are usually taken into consideration in the next planning processes: through beneficiary testimonies feedback is given on Projects/Programs. Reports are generally shared between different partners, community level beneficiaries and other groups of actors involved in the project partners including LOKADO, TUPADO, the Catholic Diocese of Lodwar, donors and District leaders. DADO's relevance was

illustrated in its contributing to peace beyond Ugandan borders in Kenya and South Sudan by facilitating cross-border trade. There is now (2013-2014) increased inter community interaction through barter trade were Turkana pastoralists from Kenya for instance exchange their Livestock and foods with the Dodoth and the Jie of Uganda. PAX has contributed significantly to this process.

3c. *Stable*: DADO stated efficiency is solely depending on commitment and on personal efforts. No clear idea about efficiency measurement was given; a possible qualification Improved is not justified. Still a clear notion on efficiency is not present in the organisation (examples: input / output ratio based money values per set of activities, cost saving practices for more value for money).

Overall the change of core capability To Deliver on Development Objectives is qualified as Improved, in line of what was shown in the self assessment of the organisation. Conditions for more positive changes in this core capability are present, but partially materialised. For this better field checking of deliverables and a concrete notion of efficiency are needed.

Indicator	Baseline score	Endline score	Change qualification - questionnaire	Evaluator's change qualification after workshops/interviews
4 Capability to relate	3.5	3.5	Stable	Stable
4a Level of involving external parties in internal policy/strategy development	3.5	3.6	Stable	Stable
4b Level of engagement of organization in networks, alliances and collaborative efforts	3.6	4.0	Improved	Improved
4c Extent to which organization is actively engaging with target groups	3.4	3.3	Stable	Stable
4d Level of effective relationships within the organization	3.4	3.3	Stable	Stable

4a. *Stable*: DADO collaborates since 2012 with other organizations like KAPDA, KOPEIN, LOKADO to realize the common goal of protecting lives e.g. during activities like peace sensitization, and peace dialogues. The skills of the consultant contracted in 2013 for the development of the current strategic plan 2014 - 2018 were well used by BOD and DADO staff. This action was funded by PAX in the last year's budget. Other stakeholders (district line departments, district security and peace committee, kraal leaders, sub-county committees, the district political wing), were not mentioned in this respect.

4b. *Improved*: Retaining good relations with funders depends on donor policies beyond DADO's influence. DADO's claim being able to create / maintain relationships with international funding organizations (no donor has withdrawn since 2012), should be seen in that light. Local stakeholders credit DADO for its conflict mediation, locally and outside community in 2013 (i.e. Inter District -Kaabong and Kotido- Peace and Security Actors meetings; Sub Regional -Kenya, Uganda and South Sudan -Eastern Equatoria- Peace and Security Actors meetings; Sub Counties Peace and Security Committees trainings on leadership skills, roles and conflict resolution; trainings of the District Peace and Security Committees on leadership skills/roles, peace building, conflict resolution; and sharing of early warning information on conflicts, and related rapid responses). All these PAX supported initiatives contributed to DADO's improved position in regional networks. DADO participates since 2012 in coalitions at local, national and

international levels e.g Coalition for Pastoral Civil Society Organization (COPACSO) and is consortium member of the Karamoja Human Rights Consortium, which is supported by the Open Society Initiative (OSI) and assisted by PAX and Amnesty International Netherlands. DADO is member of the an informal network of NGOs and churches working on inter-community mediation and peacebuilding in the border area of Uganda, South Sudan, and Kenya. This network was set up with assistance by PAX. Importance is given to exposure visits (i.e. Seminar on Intermediation & Facilitation of Dialogue in Pristina, Kosovo, June 2012).

4c. *Stable*: Strategic dialogue is also undertaken with internal and external parties with focusing on strengthening the project outputs and outcomes. Participatory assessments and action planning is usually done by projects/programs officers together with intended beneficiaries (meetings for instance with youth and women groups). These are ongoing activities.

4d. *Stable*: Within DADO tried to improve on effective relationships within the organisation. However, no organisation is perfect. DADO at times also experiences challenges in this issue. However the relationship between staff and BOD is very good. There is free interaction, sharing of skills and joint planning. BODs and staff are closely linked to each other through joint meetings. The BOD occasionally checks the staff's work and share with the staff their experiences, as well as challenges encountered implementation problems.

Overall the change of core capability To Relate is qualified as Stable, in spite of the clear improvements on the Level of engagement of organization in networks, alliances and collaborative efforts that were realised in 2013. On the other aspects of this core capability there is room for improvement.

Indicator	Baseline score	Endline score	Change qualification - questionnaire	Evaluator's change qualification after workshops/interviews
5 Capability to achieve coherence	3.4	3.5	Stable	Improved
5a Existence of mechanisms for coherence	3.5	3.7	Stable	Improved
5b Level of coherence of various efforts of organization	3.3	3.3	Stable	Improved

5a. *Improved*: Level of coherence of various efforts of organization improved because both staffs and Board of Directors adhere to the organization's Mission/Vision, Strategies and Objectives. The organisation's Mandate, Vision and strategy is used by the management to guide its decision making, regarding Projects/Programmes design. Finance and Human Resource Policies are in place and actively used in the recruitment of new staff in 2014. The organisation owns assets like land, 3 motorcycles, computers, vehicles, and generator, solar power system, which facilitates its work. It also owns a guest wing for hire, which generates income for the organization. Access to internet remains a challenge for the organisation. Both staff and BODs are taken through the new strategic plan in a full day workshop that was conducted by the consultant contracted for late 2013, hence staff and BODs were both argued to stick to the organisation's strategic plan 2014 - 2018, this to a large extent is working. especially in view of the current/ongoing projects and programmes. The new in 2014 appointed staff was made acquainted with the organisation's vision/mission.

5b. *Improved*: Staff planning and Project reviews are usually taking place monthly and quarterly by staff and senior management to check progress in planned activities since 2013. This is done within the common consciousness of

the organisation's principles on mandates and operations. Herein team work is being encouraged. However on an active search for synergies in the organisation is not reported: in that respect the level of coherence of various efforts of organisation is susceptible for improvement.

Overall the change of core capability To Achieve Coherence is qualified as Improved, because now mechanisms for coherence are not only existing, but also actively used. However: there is still room for the realisation of synergies in the organisation.

6. DISCUSSION

Followed CFA-SPO approach related to the findings

The overview of the results shows in general that DADO has made important steps in its capacity development. The next core capability table illustrates this:

Core capability	Baseline	Endline	Final change qualification
1 To act and commit	2.9	3.2	Improved
2 To adapt and self-renew	2.6	3.3	Improved
3 To deliver on development objectives	2.6	3.2	Improved
4 To relate	3.5	3.5	Stable
5 To achieve coherence	3.4	3.5	Improved

These important steps are especially reflected in the changes of the core capabilities 1, 2, and 3. In the baseline report was indicated that PAX has targeted these capabilities clearly in 2012³⁰. PAX was then also focused on Core capability 4³¹; for this core capability the endline did not show the same change as was the case with the other three. A clear explanation for this is not easy to give. Certainly does count that the establishment of strong interactions between different, and often antagonising, communities (a central issue in the Core capability To deliver on development objectives) was complicated. At the same time were donor relationships and relations with governmental bodies already fairly well established (important elements in the Core capability To relate): here was relatively less to 'gain'³². PAX' efforts to have DADO more engaged in networks, alliances and collaborative efforts were successful. Core capability 5 improved slightly but steadily: now mechanisms for coherence are not only existing, but also actively used.

PAX' approach has from 2012 onwards not been essentially changed. As was shown in Chapter 3 Project Description under *Support CFA to SPO*, PAX has with the formulation of its Human Security in the Borderlands program in 2013 put its programmatic support to DADO in a more coherent framework that is based on the study outcomes of the document Human security in the borderlands of Sudan, Uganda and Kenya - key advocacy issues from the perspective of a grassroots Peace building programme for youth warriors-, published by PAX and SOPA in July 2011³³. This coherent approach also helped DADO to overcome a major overhaul of its organisation in 2013, when the Board of Directors was more actively involved in the policy development of the organisation and partially its staff was renewed, and 5 new staff members recruited (2013/2014).

³⁰ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. p. 408

³¹ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. p. 408-410

³² Please note that PAX' efforts with respect to the level of DADO's engagement in networks, alliances, and collaborative efforts resulted in a clear increase of organisation's engagement.

³³ See footnote 8

Recommendations

The choice made by PAX to focus on support to specific programs, combined with coaching and support for the mobilisation of external advice in DADO's strategy development, as well as the special support to improve the organisation's accounting, proved to be pragmatic and in line with the DADO's organisational needs. PAX has always avoided to be heavily involved in core funding support of the organisation: requests for structural support to salary payments of staff members was always turned down.

Initially PAX and DADO were both actively involved in human security issues and peace mediation in the Karamoja region, but since 2013 DADO is now increasingly taking a more central role with PAX in a backstopping role. PAX' strategy could blossom due to the support other donors extended to DADO: these institutions provided more funds for projects/programmes for which the assignment of core staff was needed.

The chosen approach can thus only be maintained under the condition that other donors remain supporting DADO as well.

The way PAX supports DADO has developed over time and was not specially focused on capacity development. DADO's organisational capacity appears clearly strengthened as a result of its increased knowledge of and its grown responsibilities in the peace mediation, human rights and Monitoring, Documenting and Reporting programs/activities. In the current setup with other supporting donors,

PAX is recommended to continue its involvement in DADO within the framework of its Human Security in the Borderlands program in the way that was done thus far, i.e. program oriented and incidentally fused on punctual capacity development issues.

Remarks on evaluation approach

Last but not least: the evaluation of DADO's capacity development itself, especially concerning the impact of PAX' support can benefit more from more detailed budget and expenditure data (per training, per meeting), as outputs and envisaged outcomes increasingly better recorded by PAX with respect to its programs ; DADO made progress in its Monitoring, Documenting and Reporting practices, but should pursue further improvement.

The chosen qualitative approach to assess the capacity development of SPO's, as described in Chapter 3 appeared to work well. The use of capability scoring require a careful approach: scores can serve a comparison between baseline and endline outcomes, but this comparison needs to be thoroughly triangulated through interviews, focus group discussions, or joint analysis and verification workshops with stakeholders. In the current evaluation setup triangulation was an integral part of the evaluation, but to honour fully the requirements triangulation require more research time was needed; then the qualification of effectiveness of interventions can then be firmly plausible and to a certain extend functional³⁴.

³⁴ See Chapter 4: Table of levels of evidence

7. CONCLUSION

In this chapter conclusions are drawn with respect to the 3 evaluation questions of the MFS2 Evaluation Study Capacity Development of Southern Partner Organisations - Uganda, e.g.:

1. *What are the changes in partner organisations' capacity during the 2012–2014 period?*
2. *To what degree are the changes identified in partner capacity attributable to development interventions undertaken by the MFS II consortia (i.e. measuring effectiveness)?*
3. *What factors explain the findings drawn from the questions above?*

Changes in DADO's capacity during the 2012–2014 period

Overall DADO's organisation is in June 2014 in a better shape than it was in June 2012. Its abilities related to implementation clearly improved (Core capabilities 1 and 3), its strategic orientation and related use of monitoring improved (Core capability 2), and its relation networks were well consolidated and more firm, as also its organisational coherence (Core capabilities 4 and 5).

PAX' influence on identified changes

Changes in DADO's capacity since June 2012 can be attributed to PAX' interventions thereafter. PAX' support became less fragmented and more coherently structured over time when the Human Security in the Borderlands program was formulated and put in action in 2013. PAX did not specifically focus on DADO's capacity development, but was more oriented on program support. When program implementation was hampered by lacking capacities within DADO specific capacity development support was provided (accounting, MDR - Monitoring, Documenting and Reporting). PAX supported DADO with small amounts in comparison with other donors, but its support was effective, due to its focus.

Explaining factors to identified changes

PAX' support could blossom, because of the presence of other donor organisations that supported other programs DADO is running. This made the establishment of a well operating office possible. Besides that the prolonged cooperation between PAX and DADO facilitated a better positioning of DADO in its complicated operational environment: DADO could take advantage of PAX' distant and independent position, and of its cross border connections with other organisations similar to DADO. In addition could PAX increasingly get insights on ongoing developments in the region; this benefitted a more focused policy orientation, resulting in the formulation of the Human Security in the Borderlands program.

Assessment project design

Previous observations result in an assessment of the project design. It should be noted here again that PAX' interventions cannot be seen as a separate project; better is it to refer to programmatic interventions, which fall since 2013 in the Human Security in the Borderlands program. The next table gives assessment scores on 3 statements: The project was well designed , The project was implemented as designed , and The project reached all its objectives.

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	7

Capacity development of Southern partner organisations

Rwenzori Consortium for Civic Competence (RWECO)

Technical report on RWECO's capacity development

1. INTRODUCTION

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Purpose and outline of technical report

The technical report about RWECO regards one of the 8 studies on the capacity development of Southern Partner Organisations (SPO's) within the framework of the Joint MFSII evaluation at country level - Uganda; for the capacity development component of this evaluation 8 SPO's were selected. The report serves to give input to the overall joint evaluation report on MFSII funding to capacity development, in addition to the reporting on the other components of the joint evaluation e.g. Millennium Development Goals, and Civil Society Strengthening.

The technical report gives firstly, in Chapter 2 - Context, a description of the context, in which RWECO operates, highlighting the main relevant political, economical, cultural and social issues with which the organisation has to deal in pursuance of its objectives; in these issues the national and regional (i.e. Rwenzori) perspectives are leading.

Chapter 3 - Project Description gives the profile of RWECO. The Rwenzori Consortium for Civic Competence (RWECO) was formed in 2008 as a Consortium of Civil Society Organisations of 4 HIVOS Partners in the Rwenzori Region; the consortium was incorporated as a company limited by guarantee under section 16(1) of the Companies Act (No.125811) in December 2010. It comprises four Non Governmental Organizations in the Rwenzori region: i.e. Karambi Action for Life Improvement (KALI), Good Hope Foundation for Rural Development (GHFRD), Human Rights Democracy Link Africa (RIDE Africa, which was previously Integrated Women Development Program - IWDP-), and Rwenzori Information Centres Network (RIC-NET). RWECO was also registered in 2013 by the NGO Board (Reg. No. 10361) under the NGO Registration Act, CAP. 113.

In RWECO's profile its mission, vision, and strategic objectives, and budget indications is described; over the period 2011-2014 the total amount of € 710,000 is involved for the whole of RWECO's organisation with a current staff of 6 persons RWECO's Coordination Unit (decreased from 8 in 2013) and 8 staff in the member organisations (2 per member organisation; decrease from 16 in 2013), and

a reduced number of staff for E-society (3 staff); hence minimally 14 staff (plus 3 staff for E-society) directly draw their salary from the projects both at the CU and the member organisations.

The same chapter describes the development in the support of the Co-Funding Agency (CFA) e.g. HIVOS to RWECO as well. Before the establishment of the consortium the organisations Kali, Good Hope and the Integrated Women Development Program -IWDP- (later RIDE AFRICA) were already partners of HIVOS. These four organisations, together with HIVOS, have successfully applied for EU funding for a joint project in the area of civic competence to strengthen social accountability. To achieve a coordinated implementation, RWECO has been formed as of January 2009. HIVOS' main support to RWECO regarded the project: *Enhancing civic competence on Social Accountability in the Rwenzori Region*; 3 years project operating in 7 districts, 80 sub counties for the period 2011-2014, with a budget of € 710,000.

Chapter 4 - Data collection and analytical approach gives attention to the methodological choice made: the capacity development study aims at giving plausible explications on the effectiveness of HIVOS' support to RWECO, based on descriptive and theoretical evidence (the first two steps in the evidence ladder). These explanations are given on 2 levels on the contributing factors to RWECO CU's capacity development and RWECO's realised outcomes within the outcome area *the responsiveness at district level to citizen demands in Rwenzori Region*.

Chapter 5 - Results gives the changes per core capability and their underlying aspects with explanations on the change qualifications per aspect, and a contribution analysis on realised outcomes within the outcome area *the responsiveness at district level to citizen demands in Rwenzori Region*.

Chapter 6 - Discussion and Chapter 7 - Conclusion provide the findings of the analysis culminating in the conclusions with respect to the evaluation questions.

Brief summary of the analyses and the findings

In the study approach qualitative and quantitative research methods are combined. The approach is centred on the comparison between triangulated baseline data (2012) and triangulated follow-up (endline) data (2014). For this background documents, Focus groups/group interviews, workshops, and organisational self assessments in 2012 and 2014, resulting in 2 sets of capability scores. Endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, were qualified in terms of 'improved', 'stable', or 'worsened'. The qualifications and their reasons were peer reviewed in a workshop.

All core capabilities appeared to be stable since 2012, but at the level of aspects underlying each core capability changes in the core capabilities 1 To act & commit and 2 To Adapt & self renew did occur. HIVOS' heavy focus on core funding RWECO remained with some focus on the core capabilities To act & commit and To deliver on development objectives. Contributions to changes in the outcome area *the responsiveness at district level to citizen demands* could be plausibly explained, when it concerned Immediate (direct) outcomes. For medium (direct) outcomes this was more illustrative.

The technical report recommends that if HIVOS decides to discontinue its support to RWECO, there is nothing to recommend with respect to the cooperation between both organisations.

If HIVOS decides to continue its support to RWECO it is recommended that:

- *RWECO investigates the effectiveness of its outputs on outcomes more profoundly than thus far, by firstly defining more exactly outcomes in measurable terms, and by assessing whether the current consortium setup still can serve its ambitions in the same as it did*
- *HIVOS investigates co-funding opportunities for continuing core funding, together with assessing to what extent RWECO can develop own earning capacity for partial cost coverage.*

In the assessment of the project design the statements The project was well designed , The project was implemented as designed , and The project reached all its objectives were rated respectively with 7, 7, and 7 (out of 10).

2. CONTEXT

Since Yoweri Museveni became president in 1986, important progress in the democratisation process was realised by the introduction of democratic reforms and improvement of human rights. Western-supported economic reforms made steady economic growth and decreasing inflation possible. In November 1988, the NRC Statute passed the Constitutional Commission Act of 1988 (NRC Statute 1988), which established a body to hear public testimony and to draft a new constitution. This finally has led to the promulgation of the constitution in 1995, which contributed to the restoration of economic and social stability in many parts of the country, as well as the rehabilitation of state institutions that were collapsed in the early 80s.

Presidential elections were held for the first time in 1996. Museveni was re-elected by direct popular vote for four consecutive terms. His ruling National Resistance Movement (NRM) has since then a dominant position in the political spectrum. Uganda held a referendum in June 2000 on whether to remove a ban on political party activities. The results were mixed. Almost 90 percent of those voting supported continuation of the single-party system. Opposition parties had called for a boycott, however, and overall voter turnout was just over 50 percent.¹ The legal reintroduction of multi-party democracy in Uganda took place, following another national referendum in 2005. At the same time presidential term limits have been removed.

The integrity of the constitution itself has been tampered with, most notably when it was amended in 2005. Many public, private and civic institutions show increasingly serious deficits. While key governance institutions exist, they proved often to be weak and not acting independently and decisively on important policy matters. The majority of Ugandans felt increasingly disconnected from politics in spite of periodic participation in elections. Civic political consciousness and growing apathy were increasingly a threat to democracy and good governance.² By 2006 general elections the recently introduced multiparty system was still be weak to ensure checks and balances based on separation of powers with independent judicial, executive and legislative branches.³ Since the 2011 presidential and parliamentary elections, post elections events made the civil society situation fragile, i.e. the government declaring the 'Walk to Work Group' illegal in April 2012⁴, and the removal of four rebel NRM MPs in June 2013⁵, were salient issues in the political discussion in 2013.

Already in 2011 the Uganda Governance Monitoring Platform (UGMP) has taken the initiative to formulate and disseminate The Citizens Manifesto with an outreach to at least 5 million citizens. The Manifesto would address reversing the democracy deficits, strengthening civic competence, revitalising the electoral process, developing citizenship, and bringing about changes in the way citizens were governed. The Manifesto was issued before the general elections of February 2011.⁶

¹ Freedom House 2002

² Genesis of the Citizens Manifesto and Overview of Process, The Synthesis Report, p. 14, September 2010

³ Uganda National Report For the Implementation of the Programme of Action for the Least Developed Countries for the Decade 2001-2010, Submitted to the United Nations Office of the High Representative for the Least Developed Countries and Small Island Developing States (UN-OHRLS), Republic of Uganda Ministry of Finance, Planning and Economic Development, 2006

⁴ <http://www.hrw.org/news/2012/04/04/uganda-walk-work-group-declared-illegal>

⁵ http://www.observer.ug/index.php?option=com_content&view=article&id=25609:rebel-mps-nrm-cannot-eat-its-cake-and-have-it

⁶ Towards a Peaceful and Prosperous Uganda with Happy People, The Citizens' Manifesto 2011 - 2016, Citizens Manifesto Coordination Office of the UGANDA NATIONAL NGO FORUM (UNNGOF), December 2010 (<http://www.ngoforum.or.ug/>). The Manifesto is derived from the National Citizens Manifesto Synthesis Report, 14 September 2010, and contains a concise statement of principles and demands.

In spite of this and other civil society initiatives, the civil rights picture in Uganda looks mixed. For instance, access to information for all citizens acquired legal basis in 2011, but press and internet are characterised in 2012 as partly free⁷; this situation appeared not to be changed in 2014⁸. The position of homosexuals was attacked by fierce discussions on the proposed anti homo-sexuality act over the years 2009-2012. President Museveni signed the Uganda Anti-Homosexuality Act, 2014 on 24 February 2014, but on 1 August 2014, the Constitutional Court of Uganda ruled the law invalid, as it was not passed with the required quorum.⁹

Decentralisation of public organs advocated by the Local Government Act advocates citizen participation in local governance and development processes will become increasingly significant. Since its adoption, collaboration between local government and the civil society organizations has been greatly enhanced at different levels of decentralized government.¹⁰ Accountability of these public organs has become more and more a key issue in the further development of decentralisation.

While public concern over economic issues has seen a sharp increase over the last years, the perception of government effectiveness in addressing these issues declined over the past ten years. Citizens feel that the handling of social services over time such as health, education, and water has become considerably worse. From a high of 74 percent in 2002 saying government is doing very (fairly) well in providing basic health services, only 48 percent say the same in 2012. Similarly, positive marks for government handling of educational needs have dropped from a high of 86 percent in 2000 to just 55 percent in 2012.¹¹

Additionally corruption of civil service employees has however remained problematic: Transparency International's Corruption Perception Index (CPI) for Uganda of 2013 was a little lower than in 2012, which means a worsening in the perceived occurrence of corruption¹². Civil Society organisations have emerged in Uganda in various parts of the country. Accountability of in governance and public service delivery, civic competence for promoting human rights, good governance and livelihoods improvement are main issues addressed by these organisations.

Their political environment in Uganda has remained tense for civil society organisations; the Ministry of Internal Affairs issued a press statement demanding all NGOs to renew their registration or register newly and announced also that NGO's activities would be scrutinised¹³.

In the Rwenzori Region (West Uganda near Lake Albert), the Rwenzori Consortium for Civil Competence (RWECO) addresses these and is herein actively supported by HIVOS with MFS2 funds.

⁷ Freedom House 2012 (<http://www.freedomhouse.org/country/uganda>)

⁸ Freedom House 2014 (<http://freedomhouse.org/country/uganda#.VES46clCtCs>)

⁹ http://en.wikipedia.org/wiki/Uganda_Anti-Homosexuality_Act,_2014

¹⁰ PDM-net : Country profile Uganda (2007) (http://www.pdm-net.org/fiches_pays/Uganda_Sept07.pdf)

¹¹ http://www.afrobarometer.org/files/documents/press_release/uga_r5_pr2.pdf

¹² The Corruption Perceptions Index ranks countries and territories based on how corrupt their public sector is perceived to be. A country or territory's score indicates the perceived level of public sector corruption on a scale of 0 - 100, where 0 means that a country is perceived as highly corrupt and 100 means it is perceived as very clean. A country's rank indicates its position relative to the other countries and territories included in the index. This year's index includes 177 countries and territories; Uganda's score went from 29 to 26; See <http://www.transparency.org/cpi2013/results>

¹³ Rwenzori Consortium for Civic Competence (RWECO), Narrative Annual Report 2013, December 2013, pp. 2-3

3. PROJECT DESCRIPTION

Profile Southern Partner Organisation (SPO)

The Rwenzori Consortium for Civic Competence (RWECO) was formed in 2008 as a Consortium of Civil Society Organisations of 4 HIVOS Partners in the Rwenzori Region; the consortium was incorporated as a company limited by guarantee under section 16(1) of the Companies Act (No.125811) in December 2010. It comprises four Non Governmental Organizations in the Rwenzori region: i.e. Karambi Action for Life Improvement (KALI), Good Hope Foundation for Rural Development (GHFRD), Human Rights Democracy Link Africa (RIDE Africa, which was previously Integrated Women Development Program -IWDP-), and Rwenzori Information Centres Network (RIC-NET). RWECO was also registered in 2013 by the NGO Board (Reg. No. 10361) under the NGO Registration ACT, CAP. 113.

RWECO promotes good governance, because the organisation strongly believes that governance is a key factor in tackling poverty. ' Any poverty eradication action should be rooted in addressing governance'. In addition RWECO holds that the quality of governance will only improve, when citizens actively participate in the democratic processes and demand greater accountability from duty bearers who should also in turn respond actively to the citizens' demands.¹⁴

In line with these core values, RWECO's mission entails the enhancement of 'civic competence to demand for voice and accountability in governance and service delivery through meaningful and principled engagement between citizens and the state'.¹⁵ The organisation calls itself a watchdog on good governance and social justice¹⁶; it serves as a platform and a coordination unit for the 4 consortium partners and contributes at the same time to their activities.

The Uganda Governance Monitoring Platform (UGMP), which' program is hosted by the Uganda National NGO Forum (UNNGOF), implements the 'Citizens Manifesto' (CM) Initiative (see Chapter 2) and the movement for accountability thereof. In the Manifesto, citizens set a political statement agenda with their demands before aspiring leaders to fulfill the promises made during the 2011 elections.

RWECO has been active in this initiative in the Rwenzori Region since then; it worked initially through Citizens Election Watch-IT (CEW-IT)¹⁷ after the 2011 elections in enhancing civic competence to strengthen social accountability in a 2 years project supported by HIVOS, Oxfam and the European Union, operating in 11 sub counties of 5 districts in the Rwenzori Region and at national level in 25 districts in 5 regions¹⁸ (2012-2013). In addition RWECO was through CEW-IT also

¹⁴ The Rwenzori Consortium for Civic Competence (RWECO), Popular Version of the Annual Report 2012, p. 6; ' RWECO defines itself as a civil society watchdog on good governance and social justice and is a Learning and communication'.

¹⁵ Rwenzori Consortium for Civic Competence (RWECO), Popular Version of Annual Report 2012, p. 5

¹⁶ The Rwenzori Consortium for Civic Competence (RWECO), Annual Review 2012 (January - December): Annual review report for the project: "Enhancing Citizen's voice over Governance and service delivery by Local Authorities through Social Accountability in the Rwenzori region" (ROEA 1002681), p. 2

¹⁷ The Citizens Election Watch-IT (CEW-IT), which was founded in September 2010 is a legal consortium four founder members NGOs in Uganda who include : RWECO, PAC, CEFORD, ACORD and two additional members DENIVA and FHRI. CEW-IT is involved in Innovative methods of Election Monitoring, Social Accountability and Governance and empowering citizens in improving their livelihoods.

¹⁸ Rwenzori Consortium for Civic Competence (RWECO), Narrative Annual Review, 2013, Project Enhancing Civic Competence on Social Accountability in the Rwenzori region, p. 34

involved in the Citizen's Manifesto in Action (2011), aiming at building a social contract between citizens and their leaders, a project that was supported by Oxfam Novib, and HIVOS. Enhancing ICT watch (CEWIT) got funding from HIVOS of € 10,000 in 2014.

RWECO with its members has further built on previous approaches in two other projects:

- *Enhancing civic competence on Social Accountability in the Rwenzori Region*; 3 years project supported by HIVOS operating in 7 districts, 80 sub counties for the period 2011-2014, with a budget of € 710,000. This currently main project of RWECO has three objectives:
 - 1) to strengthen the capacity of citizens, CSOs and (Local) Governance Structures to utilize reliable information to demand and take action against poor service delivery and bad governance;
 - 2) to facilitate effective engagement and dialogue between the citizens, local governance structures; and
 - 3) to strengthen strategic linkages in the civil society and with the local governments.
- *Improving Quality of Education* through enhancing communication skills in 30 primary schools and 6 secondary schools and 2 Primary Teachers Colleges in Kasese and Kabarole districts supported by the Edukans Foundations. The project Improving quality of Education was supported by ICCO Cooperation with € 23,500 in 2014.

The RWECO Consortium is active in 7 districts from 2011 onwards i.e. Kasese, Kabarole, Kyegegwa, Bundibugyo, Kyenjojo, Ntoroko, and Kamwenge.

RWECO did issue its Strategic Plan 2012 -2016 in the first half of 2012. RWECO's overall objective and envisaged outcome regard 'A consortium of CSOs contributing to attainment of the National Objective of strengthening Good Governance, Defence and Security by empowering citizens and coordinating civil society in Uganda to actively and sustainably demand for transparent and accountable leadership and use of public resources. The envisaged outcome of this goal is an empowered citizenry, transparent and accountable public institutions, and reduced misuse of entrusted powers by political leaders and public servants. This will result into equitable access to public resources and increased household incomes'.¹⁹

The plan defines 4 objectives, on which the logframe is based:

- a) To enhance civic competence on voice and accountability in the Rwenzori region and beyond, so citizens can effectively engage duty bearers and demand for equitable social services,
- b) To coordinate capacity building of the RWECO members and constituents in citizen empowerment on constitutionalism, human rights and good governance,
- c) To undertake and/or coordinate advocacy activities on major policy issues at regional, national and international level, and:
- d) To mobilize resources and enhance internal systems for the RWECO members including accountability, public support and sustainability.²⁰

¹⁹ The Rwenzori Consortium for Civic Competence, RWECO, Strategic Plan, January 2012– December 2016, p. 4

²⁰ The Rwenzori Consortium for Civic Competence, RWECO, Strategic Plan, January 2012– December 2016, p. 5

The Plan was prepared by the RWECO members with the leadership of the Coordinating Unit during the period January - June 2012²¹; later in the year it was reflected by them in November 2012.²² This reflection was needed for establishing a good linkage between the projects the RWECO consortium already had in implementation with its strategy as defined in the plan, while honouring the diversity in orientation of RWECO's consortium members (i.e. quality of service delivery, and access to / sharing of information for rural communities, promotion societal partnerships -RIC-Net / Good Hope-, attention for rural poor participation in poverty eradication initiatives -Kali-, attention for marginalised women, promotion of human rights, democracy and good governance, peace building and conflict resolution, HIV/AIDS prevention & care -Ride Africa).

In 2013 a team of 8 staff is based at RWECO Coordination Unit (CU), 16 staff with the member organisations (4 per member organisation) and 7 staff at the E-Society (digital platforms of local governments and RWECO). A total of 31 staff (13 female, 18 male) directly draw their salary from the projects both at the CU and the member organisations.²³

In the course of 2014 RWECO's CU staff decreased to 6 persons and only 8 staff were with the member organisations (2 per member organisation), and a reduced number of staff at the E-society (number not known); hence minimally 14 staff directly draw their salary from the projects both at the CU and the member organisations; the 3 staff for E-society were getting honorarium from RWECO.²⁴ The cause of the steep reduction in staff is mainly due to HIVOS' reduced funding, as the implementation period of its main project Enhancing civic competence on Social Accountability in the Rwenzori Region comes to an end in the course of 2014.

The Strategic Plan 2012 - 2016 does not give a budget projection with a breakdown in yearly budgets for the whole period the plan covers. The plan now serves as a guide for RWECO's main policy, but actually the financial ramifications are determined by the donor support to the project *Enhancing civic competence* that RWECO has in implementation.

The next table gives an overview of all current project related donor support.

Table 1: RWECO: Funds from specific donors 2011 - 2014 in €²⁵

Funding organisations & project support	Period	Totals
HIVOS: <i>Enhancing civic competence on Social Accountability in the Rwenzori Region</i>	2011-2014	€ 710,000
HIVOS/EU/Oxfam: <i>Enhancing civic competence to strengthen social accountability</i>	2012-June 2013	€ 99,000
ICCO Cooperation (with Edukans): <i>Improving Quality of Education</i>	2012-2014	€ 103,500
Total		€ 912,500

²¹ The Rwenzori Consortium for Civic Competence, RWECO, Strategic Plan, January 2012– December 2016, p. 3

²² See: http://rwecovoice.blogspot.nl/2012_11_01_archive.html

²³ Rwenzori Consortium for Civic Competence (RWECO), Narrative Annual Report, 2013, Project Enhancing Civic Competence on Social Accountability in the Rwenzori region, p. 19

²⁴ Interviews with RWECO CU staff

²⁵ The Rwenzori Consortium for Civic Competence (RWECO), Annual Review 2012 (January - December): Annual review report for the project: "Enhancing Citizen's voice over Governance and service delivery by Local Authorities through Social Accountability in the Rwenzori region" (ROEA 1002681), p. 18; E-mail Jimmy Odyek on 21/10/2014; HIVOS' disbursements to RWECO 2011-2014 (see next paragraph)

These financial means were used by both RWECO's Coordination Unit and the consortium partners. The next table gives the distribution of funds for RWECO's project *Enhancing civic competence*, which by far its largest.

Table 2: Distribution of funds RWECO Project *Enhancing civic competence*

Cost centre	Shares 2011-2013 ²⁶	Shares 2014 ²⁷
Coordination Unit	24.5%	21%
Kali	17%	24%
Good Hope	17%	17%
RIDE AFRICA	17%	17%
RIC-NET	24.5%	21%

The distribution shows what the implementation concept of RWECO entails. The Coordination Unit (CU) facilitates strategy development, external contacts at national and regional level and with donor agencies, and last but not least facilitates M&E for all consortium members. CU is also involved in facilitating and providing members with advises and study opportunities. The consortium members for their part are involved in direct project implementation and provide CU constantly with grassroots experiences and knowledge needed for further policy development and Monitoring & evaluation.

Over the period 2011 - 2013 the RWECO consortium had on the average € 276,330 per year to spend²⁸, and in 2014 only € 83,500²⁹. This explains the earlier mentioned staff reduction.

RWECO searches new funding opportunities within the framework of its strategy and is engaged in the preparation of proposals. Thus far no new assignments have not been acquired.

Support Co-funding Organisation (CFA) to SPO

HIVOS has played from the outset an important role in RWECO's development. Before the establishment of the consortium the organisations Kali, Good Hope and the Integrated Women Development Program -IWDP- (later RIDE AFRICA) were already partners of HIVOS. These four organisations, together with HIVOS, have successfully applied for EU funding for a joint project in the area of civic competence to strengthen social accountability. To achieve a coordinated implementation, RWECO has been formed as of January 2009³⁰.

The initial relationship between HIVOS and RWECO cannot be seen in terms of the traditional donor-recipient relationship. HIVOS was actively involved as a full partner in the RWECO setup in 2009 to contribute to the handling of the mentioned EU funding. Currently HIVOS' role is more distant with

²⁶ RWECO-HIVOS Budget 20110617J&S-Distribution 2011-2013, provided by RWECO on 21/10/2014

²⁷ Final 2014 RWECO-HIVOS Budget Reviewed April 2014, provided by RWECO on 21/10/2014

²⁸ € 829,000 divided by 3; € 829,000 is the sum of €650,000+€99,000+€80,000; for 2011-2013 HIVOS made €650,00 available; for the same period € 99,000 was made available by HIVOS/EU/Oxfam, and € 80,000 by ICCO (€ 40,000 per year)

²⁹ € 83,500 is the sum of € 60,000+€ 23,500; for 2014 HIVOS made € 60,000 available and ICCO € 23,500

³⁰ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. 451

the firm establishment of RWECO's Coordination Unit. The capacity development activities that HIVOS has supported RWECO to implement in the period 2011-2014, are mostly programme related and not institutional. It regards:

1. Enhancing the capacities of Community Based Organisations in the Rwenzori Region through training to undertake long-term social accountability, monitoring of governance and service delivery,
2. Coordinating Civil Society Organisations in the Rwenzori Region to conduct joint policy reviews and tracking of public service delivery, and
3. Enhancing the capacity of RWECO as an institution to coordinate members in the region to conduct social accountability monitoring.³¹

Over the period 2011 - 2014 HIVOS has supported the RWECO consortium under MFS2, which amounts to the total of € 710,000. The next table gives an overview of HIVOS' disbursements for this period.

Table 3: HIVOS disbursements to RWECO for Project *Enhancing civic competence*³²

Disbursement dates	Disbursements in €
07-05-2011	150.000,0
05-18-2012	125.000,0
08-27-2012	125.000,0
01-18-2013	125.000,0
08-20-2013	125.000,0
04-10-2014	60.000,0
Total	710.000

Only the above mentioned 3rd support element is about RWECO's capacity development as an institution; this solely concerns RWECO's Coordination Unit. This element did take 21% - 24.5% of the total of provided funds (see Table 2 above); the support concerned mainly core funding (i.e. salaries, office costs, travel costs for exposure visits, costs related to development of code of conduct, development of tools, documentation best practices, and external consultancy) and amounts in total to about € 163,000 for the period 2011 - 2014.

HIVOS' funding was mainly serving Core capability To act and commit and Core capability To deliver on development objectives. HIVOS's main orientation over the period June 2012 - June 2014 appears to be unchanged with regard to both mentioned core capabilities. At the same time was the focus on the other three core capabilities To Adapt and Self renew, To relate, and To achieve coherence was less explicit than it was in the baseline. The next table gives HIVOS' orientation on all core capabilities of RWECO in the baseline.

³¹ The description is derived from direct contacts with HIVOS Netherlands; information was provided in a specific questionnaire; see: 5C
 endline – support sheet CFA: HIVOS-RWECO, June 2014

³² According to reporting HIVOS provided on 06/10/2014

HIVOS' targeting capacity development - Baseline report measurement

(1-5: 1 - not targeted, 5 - intensively targeted)³³

1. Act and commit	4
Core funding of salaries (focus expressed by HIVOS in the baseline)	
2. Adapt and self-renew	3
Monitoring, project results documentation trainings	
3. Deliver on development objectives	4
Salary support for strengthening capability to deliver (focus expressed by HIVOS in the baseline)	
4. Relate to external stakeholders	3
General support by core funding	
5. Achieve coherence	3
General support by core funding	

RWECO CU itself remained strong in pursuing its own capacity development; regarding this aspect no change in relation to the baseline is observed. Still the score of 4 for RWECO CU's own efforts stands, because it is further strengthened by an approach to the consortium, in which diversity in skills/competences is optimised, combined with its own organisation remaining lean. Besides that, RWECO CU focuses on the intensive use of ICT tools in implementation.³⁴

The focus on all the core capabilities To act & commit and To deliver on development objectives was more intensive than on the other three, where the implementation of the project stood central. Support declines to core capabilities 1 and 3 less in 2014, due to finalisation project *Enhancing civic competence*. HIVOS periodic internal Capacity Assessments have taken place three times in 2011, 2013, and in 2014; in these assessments was clearly indicated that general attention to RWECO's core capabilities was given in HIVOS' support during 3 visits (June 2011, March 2013, and March 2014) initially from the HIVOS The Hague and then twice from the Nairobi office, along with regular contacts by Skype or e-mail.³⁵ Apart from that, no special budgetary provisions besides the project *Enhancing civic competence on Social Accountability in the Rwenzori Region*, were made for capacity development. Previous explanations are reflected in the ratings in next table.

HIVOS' targeting capacity development - Endline report measurement

(1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	3
Continued core funding of salaries in organisation, but in 2014 lower	
2. Adapt and self-renew	2
Monitoring, project results documentation in shape; less attention from HIVOS	
3. Deliver on development objectives	3
Salary support field workers for strengthening capability to deliver	
4. Relate to external stakeholders	2
General support by core funding	
5. Achieve coherence	2
General support by core funding	

³³ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. 450

³⁴ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. 452

³⁵ Internal Capacity Assessments of RWECO done by HIVOS; these assessments regard 12 questions with respect to the 5 core capabilities and 5 questions with respect to gender equity policy of the organisation and within the organisation; during the visits exchanges (coaching) took place regarding. In all contacts between RWECO and HIVOS RWECO's result oriented management, strategic planning, financial accounting, multi stakeholders processes, network development, lobbying, and knowledge sharing, were touched upon.

Key features project

HIVOS has supported RWECO over the period 2011 - 2014 with the project *Enhancing civic competence on Social Accountability in the Rwenzori Region*. HIVOS' support to RWECO's capacity development is mainly geared to Enhancing the capacity of RWECO CU to facilitate and to conduct social accountability monitoring in Rwenzori region.

The way this support is extended concerns core funding (i.e. salaries, office costs, travel costs for exposure visits, costs related to development of code of conduct, development of tools, documentation best practices, and external consultancy) and is mainly focused on to the core capabilities To act and commit and To deliver on development objectives. Financially HIVOS' support takes for this about 23% of the entire HIVOS funding to RWECO CU, i.e. € 163,000 over the period 2011 - 2014.

4. DATA COLLECTION AND ANALYTICAL APPROACH

For putting up the baseline on capacity development for the SPO RWECO the evaluation tools are shortly explained. For the field research for the baseline and endline (follow-up assessment) studies two special Research Manuals were written.³⁶ The analytical approach in this technical report regards not only the contribution of CFA funding meant for the SPO's capacity to the actual development changes in the capacity of the SPO, but also to the contribution of changes in the SPO capacity to SPO outcomes (contribution analysis).

Background documents

For both the baseline as the endline initially on strategy, context and activities were studied and verified with concerned SPO (RWECO) and related CFA (HIVOS).

Focus groups/group interviews

Focus group interviews were held with RWECO 's staff members, staff and stakeholder organisations for getting data on the organisations development and its working environment. In these interviews attention was given to the organisation's *Timeline* until the baseline year 2012, its *Theory of Change*, and the *Results Chain CFA - SPO - Target groups / stakeholders*. *Observation* of the SPO's office and working environment gives additional information about the SPO.

A complementary approach was followed in the fieldwork of the endline study that has taken place during the period July 2014; herein interview formats were used emphasising *key changes and wished changes* within the SPO, as seen by interviewees from the SPO personnel, from externals and from the supporting CFA.

Organisational self assessment

In the baseline as well as the endline organisational self assessments were done with respondents of the SPO; in the endline assessment was aimed at a participation of 30% of the respondents present in the baseline assessment; for RWECO this was above 50%³⁷; the endline workshop has taken place on 15 July 2014. The same questionnaire covering 5 Core Capabilities and connected indicators with prompting questions was used, in order to facilitate comparability between the baseline and endline outcomes.

Outcomes of the self assessment in the baseline were related to all elements of *Focus groups/group interviews* for making up a *Synthesis scoring form* that is the basis for the evaluation of each core capability and its underlying aspects. After processing the *Synthesis scoring form* a debriefing feedback meeting with RWECO has taken place on 27 September 2012 to discuss determining factors for the given scores. After these debriefing additional *self reporting* was requested from the respondents; they were asked to issue their remarks/comments on the synthesis scoring form. Final scoring and related explanations were given by the evaluators and peer reviewed.

³⁶ Research Manual, Evaluation Study *Capacity development* of Southern partner organisations -Baseline - Uganda, Eric Kamphuis, Molenrij/Kampala: June/July 2012

Research Manual, Evaluation Study *Capacity development* of Southern partner organisations - Uganda -Endline, Eric Kamphuis Molenrij/Kampala: March /April 2014

³⁷ The workshop was attended by 2 RWECO CU staff (including it Coordinator and its M&E officer), and 8 staff from consortium partners (2 per each partner, including all their executive directors), of which at least one has attended in the baseline workshop.

Outcomes in the endline were related to interview findings (with RWECO CU personnel, externals, and HIVOS Netherlands). Then endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, reflecting changes in core capabilities and their underlying aspects over the period June 2012- June 2014, were qualified in terms of 'improved', 'stable', or 'worsened'. These qualifications were generated by an Excel tool that was specially developed for this purpose; the tool generated endline scores per core capability and their underlying aspects, based on multiple choice answers on 64 questions; the other 18 questions regarded open requests for additional comments per different aspect/core capability and did not influence the scoring. The tool thus firstly determined endline scores per core capability and their underlying aspects and these scores were then related with the scores of the baseline study for getting the change qualifications³⁸. The change qualifications of the core capabilities and their underlying aspects were linked with an inventory of determining factors for these changes. This was done in workshop sessions and interviews; for RWECO change qualifications, determining factors and open comments provided in the questionnaire were captured in a workshop report and interview reports. The workshop report was reviewed in a special feedback meeting with RWECO on 27 August 2014; subsequently the workshop report was peer reviewed, and served as input for the evaluator's final assessment.

Contribution analysis

The organisational self/assessment and interviews/core group discussions were carried out in service of the contribution analysis and related triangulation on 2 aspects:

1. the contribution of CFA funding meant for the SPO's capacity to the actual development changes in the capacity of the SPO
2. the contribution of changes in the SPO capacity to SPO outcomes

In the analysis of the contribution in SPO capacity changes to SPO outcomes was focused:

- on changes in the Core capabilities To act and commit and To Adapt and self renew, and
- on changes in one or maximally two SPO outcome areas.

CFA's and SPO's have intentions with their policies and operations thereof: i.e. these organisations depart both from their Theory of Change (ToC), which postulates intended *development pathways* for realising their outcomes. In principle each ToC encompasses the aspects of: Programme/ project/initiative, Context, Ideas/theories, Process/sequence of change, and Reflection and decision making³⁹. These aspects will shortly addressed insofar they are relevant in the explanation of the intended outcomes realisation of the CFA and SPO.

In the analysis of the factors behind observed changes in RWECO's outcome realisation, one needs to depart from a notion of the sequence as is displayed in the next figure.

³⁸ The scores of the baseline study were in 2012 not made up by means of this tool; the final scores were then determined by putting up the Synthesis scores. For consistency sake the original 2012 scores were reviewed with the Excel tool, in order to get a comparison between the baseline and endline scores on the same basis; in a view cases baseline scores had to be adapted; these adaptations were in general marginal. Through the review of the baseline scores with the Excel tool, both baseline and endline scores are given with one decimal.

³⁹ See also Review of the use of 'Theory of Change' in international development, Review Report, Isabel Vogel, April 2012, p.p.14-15 and p. 28

Fig 1: Results Chain scheme with Outcome Areas

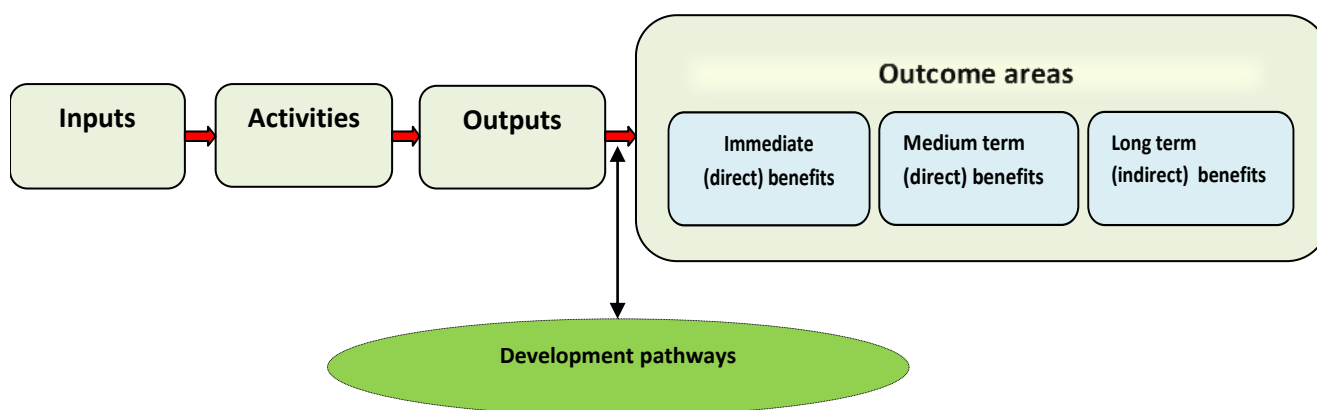


Figure 1 shows that in case of the MFSII evaluation CFA's and SPO's both produce *Outputs* for 'their' beneficiaries (i.e.: technical trainings, health insurance, advisory/counselling services, extension services, educational services) by carrying out *Activities* (i.e.: organisation & delivery of mentioned services, and by using *Inputs* (i.e.: own income, funding from thirds, services from others, upgrading own personnel). In the provision of a plausible explanation for changes by analysing the contributions to observed changes, there is a main focus on the question how and what extend the *Outputs* contribute to the realisation of a range of intended *Outcomes*. Additionally, *Outcomes* can be realised *Immediately (maximally 1 year)*, at *Medium term (2-3 years)* or at *Longer term (4 years and beyond)*, depending on what was intended. Hence answering the questions how and to what extend *Outputs* do contribute to the realisation of intended *Outcomes* within different *Outcome Areas*.⁴⁰

As RWECO's outcome area for analysis was chosen: *the responsiveness at district level to citizen demands*. This outcome area was selected as this is central in RWECO's mission and also the core of HIVOS' support to RWECO.⁴¹

Observation forms

Regarding RWECO a detailed chronology of study/research activities was recorded on Observation forms. In the forms was also space for the researchers to make observations on the research process, the collected data, or the cooperation extended by RWECO and HIVOS Netherlands as related CFA.

Reasons for choice of mentioned methods

Organisational assessments regard essentially interactive processes between the evaluated organisation and the evaluators. Taking a baseline does not only concern the handling of measurement tools, but also the triangulation of collected findings in interviews/focus groups. The followed approach is thus a mixture of two perspectives. Firstly: the application of survey research

⁴⁰ See ETC Research Manual, Evaluation Study *Capacity development* of Southern partner organisations - Uganda, Process Tracing, Eric Kamphuis, April 2014, p.p. 5/6. Please note that instead of Process Tracing this technical report speaks of Contribution analysis as a better alternative to describe the followed type of analysis.

⁴¹ The Research Manual, Evaluation Study *Capacity development* of Southern partner organisations - Uganda, Process Tracing, Eric Kamphuis, April 2014 gives further details of the approach. Please note that instead of Process Tracing this technical report speaks of **Contribution analysis** as a better alternative to describe the followed type of analysis.

and feedback, and secondly: the strong attention for people working in organisations that face changes. For that reason data gathering through a questionnaire and self-assessment went hand in hand.

Respecting the two perspectives simultaneously means that research techniques like Difference-in-Differences are not applicable in this assessment framework. Factors influencing organisational development are complex and multidimensional and cannot be captured in the 5C research within a timeframe, geared to a more profound contribution analysis that was done in relation to the SPO RWECO and the CFA HIVOS.⁴²

Organisational assessments combine different measuring and observation methods, as mentioned above with assessment based on expertise in the area of organisational development. Difference-in-Differences and Randomized Controlled Trial (randomized assignment) for example can hardly be matched with such combination.

The choice for the mentioned methods has implications for type of evidence the endline study can generate and consequently in what terms effectiveness of interventions can be qualified. The next table gives an overview of the 4 possible levels of evidence, the related parameters of evidence / types of research, and hence the qualifications of the effectiveness of interventions⁴³.

Table 5: The Evidence ladder

Levels of evidence	Parameter of evidence	Types of research	Effectiveness of interventions
4. Causal	As in 1, 2, and 3, but there is now sound and substantial evidence that the outcome is caused by the intervention and/or clear evidence showing which ingredients of the intervention are responsible for the outcome.	<ul style="list-style-type: none"> • Randomised Control Trial • Repeated case studies (N=1 designs) 	Efficacious
3. Indicative	As in 1 and 2, but it has now been demonstrated that the intervention clearly leads to the desired outcomes (e.g. goals are	<ul style="list-style-type: none"> • Quasi-experimental studies • Theory of Change studies • Norm referenced approaches 	Functional

⁴² In 3 out of the 8 endline studies this contribution analysis was done, which is in line with the outcomes of the *Overview Discussion and Action Points, Workshop Joint MFS II Evaluations, Amsterdam, 26 and 27 February 2014, Prepared by Gerton Rongen – Synthesis team.* Contribution analysis for all 8 endline studies would require more research time and that would overstretch the budget boundaries for the capacity development research component of the Joint MFS2 Evaluations Uganda

⁴³ This overview is based on the various 'ladders of evidence' that are in use in health research; the overview takes the realities of developmental research into account.

	attained, target problems decrease, competencies increase, clients are satisfied).	<ul style="list-style-type: none"> • Benchmark studies • Client satisfaction studies • Goal attainment studies • Quality assurance studies 	
2. Theoretical	As in 1, but the intervention now has a plausible rationale (i.e. a program theory) to explain why it should work with whom	<ul style="list-style-type: none"> • Reviews • Meta-analysis • Expert knowledge studies 	Plausible
1. Descriptive	The essential elements of the intervention (e.g. goals, target group, methods and activities, requirements) have been made explicit	<ul style="list-style-type: none"> • Descriptive studies • Observation studies • Analysis of documents • Conduct of interviews 	Potential

The approach followed, including the contribution analysis, in the MFS2 evaluation regarding the Capacity development of Southern partner organisations is mainly related to the evidence level 'theoretical'. The effectiveness of the interventions can the best be qualified as 'plausible'. The types of research related to the levels of evidence 1 and 2 (Descriptive and Theoretical) corresponds with the described earlier research approach in this chapter.

The use of the 5 Core capabilities conceptual framework made it possible to compare baseline and endline scores of core capabilities and thus to reach to a certain extend the level of evidence 'indicative'. One should however realise that for the determination of the final scores and the qualifications of capability changes, interviews, workshops, observation studies, and core group discussions were vital. Time constraints made it not possible to carry out a profound Theory of Change study or client satisfaction studies. Hence the capacity development study can the best generate plausible explanations of the effectiveness of researched interventions. It appears doubtful whether the extra contribution analysis component fully justifies an evidence level 'indicative' and a qualification of the effectiveness of the interventions as 'functional'.

5. RESULTS

This chapter provides firstly a descriptive analysis of RWECO's capacity development by analysing the relative changes in the scores of the five core capabilities. And secondly plausible explanations of the outcomes will be given that were the result (outcomes) of the observed changes, thereby pondering the evidence that either confirm these explanations or may overturn them.

Changes in RWECO's capacity development

In the following a descriptive analysis of the findings is given with respect to RWECO's capacity development that were collected during the follow-up assessment (endline study) following the approach described in the previous chapter. The endline study generated scores per core capability and their underlying aspects that are based on scores per indicator. The comparison between baseline and endline scores are here not given at indicator level, as the scores on aspects underlying the core capabilities give sufficient insight in the major changes per each core capability⁴⁴ and thus on the organisation's capacity development over the period June 2012 - June 2014 (i.e. baseline scoring and endline scoring periods). Per each aspect an explanation is given on the finally assigned change qualifications, based on the change qualifications given stemming from the questionnaires used in the organisational self assessment. If the difference between the baseline and endline scores was between -0.25 and + 0.25, the aspect change was qualified as "stable", if the difference was more than + 0.25, then the qualification was "improved", and if the difference was less than -0.25, the aspect change was qualified as "worsened". The final change qualifications, set by the evaluator, take into account what emerged in the workshops, interviews, focus group meetings and the final feedback meeting with RWECO. The baseline and endline scores are given with one decimal to make clear how the Change qualifications stemming from the questionnaires were given. After the explanations of the change qualifications per aspect an explanation is given on the overall change qualifications per entire core capability.

It should be noted that in the endline assessment 2 staff members from RWECO Coordination Unit and 8 staff members from the consortium partners participated (2 per consortium partner; for all consortium partner the executive directors participated) . Observations/comments per aspect per each core capability in *italics*.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
1 Capability to act and commit	3.5	3.5	Stable	Stable
1a Level of effective leadership	3.5	3.5	Stable	Stable
1b Level of realistic strategic planning	3.5	3.4	Stable	Stable
1c Level of translation of strategy into operations	3.5	3.6	Stable	Stable
1d Level of staff capacity and motivation	3.4	3.5	Stable	Improved
1e Level of financial resource security	3.6	3.7	Stable	Worsened

⁴⁴ Detailed data at indicator level are captured in the Excel scoring tool and can be made available.

1a. *Stable*: Same leadership with the same competencies as at the time of the baseline study; leadership is qualified as open, decisive and quick. Leadership follows the constitution of the organisation as well as related policies.

1b. *Stable*: Strategic plan 2012-2016 available; this made up in first half of 2012. New RWECO policies on gender and HIV helped to realize the objectives of the Strategic Plan, but funding was not available for activities regarding environmental management, and peace building/conflict resolution. Joint planning and review in quarterly meetings; reflection RWECO's policy and MoU between consortium partners also done in these meetings (2012).

1c. *Stable*: Programs/projects operate still within strategic plan; realisation of new entry points for strategic actions, in order to address changes at the local situation based on outcomes of internal mid-term review (2011).

1d. *Improved*: In-house capacity development, including further studies sponsored by RIC-NET or staff themselves, was realised; a computerized accounting system (Quick Book) was introduced; further training (same staff did online trainings and staff at membership level as well; further university studies MSc, post-graduate were facilitated)(2012); Election of sectoral committee members for finance and human resources carried out (December 2012); Improved capacity of staff and board was in line with policies and guidelines (2013); Special skills development in fund raising / resource mobilization through special training realised (June 2013). *Score related to this aspect has slightly increased, but given all initiatives taken, is qualification 'Improved' justified.*

1e. *Worsened*: Financial security is worsened, because long-term donor support for the program is not ensured; RWECO CU started to diversify and getting funds from other donors, such as Cooperation with ICCO, EU and Oxfam. All this funding is project based, short-term; hence RWECO has to look continuously for funding sources. Another focus of funding organisations to countries is observed, working areas change and less donor budgets are available. HIVOS is now phasing out; during 3 years (2011-2013) there was a budget of € 650,000; for the 18 months thereafter this is € 100,000 (€ 60,000 for 2014; € 40,000 for 2015) for strengthening earlier created structures through RWECO (consolidation approach). RWECO tries to generate funds through consultancies for other organisations, and a/o renting out meeting rooms; work as consultant is sought for organisations outside RWECO's 4 consortium members (for these members free consultancy was provided by RWECO CU). Assignments and funds from other donors Oxfam (2012), and EU (2013) realised (see also Chapter 3 Profile SPO). RWECO wishes to consider HIVOS as its key for the next future⁴⁵. At the moment of the endline measurement still 6 staff members at RWECO CU are present; this assessment will have different outcome, when the reduction in the size of the organisation comes about: then certainly the Capability to Act and to Commit will be lower. *In spite of the higher score for this aspect, the qualification worsened is justified instead of stable; this was confirmed in the feedback meeting with RWECO CU.*

Overall score core capability To act and commit is Stable, but especially the uncertain perspective for

⁴⁵ This was stated in RWECO's mid-term review in 2013. See PPT presentation Rwenzori Consortium for Civic Competence (RWECO), Internal M&E for project ROEA1002681 by Ms. Sheila Kengingo (M&E Officer), June- Sept, 2013

new assignments and hence the financial sustainability of the organisation; this has already its consequences for some of the organisation's program areas and its staffing. With HIVOS phasing out the organisation is put under pressure to ensure new assignments.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
2 Capability to adapt and self-renew	3.3	3.4	Stable	Improved
2a Level of effective application of M&E	3.5	3.6	Stable	Improved
2b Level of strategic use of M&E	3.0	3.5	Improved	Improved
2c Level of openness to strategic learning	3.1	3.3	Stable	Stable
2d Level of context awareness	3.4	3.4	Stable	Stable

2a. *Improved:* Mid-term review (June 2013)⁴⁶ led to identification of new entry points, joint planning practices and quarterly review meetings on the basis M & E reporting that is related to logical frameworks of projects; this meant a real improvement of in effectively applying its M&E; now the organisation has to act upon mid-term review outcomes and hence do more about youth, people with disabilities , HIV, and elderly people issues. Annual reflection meetings for specific projects and other partners take place since April 2013. In addition there is increased information sharing among RWECO's members and their beneficiaries through e-society facilities since Jun 2013. There are improved monitoring and accountability systems in place (from June 2013 onwards).

2b. *Improved:* Weaknesses in strategic use of M&E were assessed in mid-term review (2013) and strengths shared among partner organisations; M& E tools are now in place, and the member organisations are applying them; how this works out in practice will be closely monitored by RWECO CU. Effective information sourcing and dissemination has enhanced actions against bad governance; funding E-society in new areas/other districts arranged; in 2012 2 E-societies established, now there are 7 (2014). Currently the number of monitors is the same, but their skills and reporting have improved, due to RWECO trainings and follow-up. (Example: Reporting on a school: not only teacher's presence is measured, but also classroom sessions, availability of schoolbooks, or clean toilet facilities etc.; hence monitoring became more comprehensive).

2c. *Stable:* There has been openness and timely activity implementation involving all staff in meetings (2012).The mid-term review 2013 (see above) was vital to feed quarterly member meetings, which are "hot meetings" with lot of intense debate; now each RWECO member is made responsible for whole RWECO: i.e. if one of the member organisations fails, whole RWECO fails as Golden rule; that meant that performance of members is from then on are openly discussed; each member is held accountable for its actions (from June 2013). The first improvements of this new approach are awaited end 2013.

⁴⁶ Referred is to: PPT presentation Rwenzori Consortium for Civic Competence (RWECO), Internal M&E for project ROEA1002681by Ms. Sheila Kengingo (M&E Officer), June- Sept, 2013

2d. *Stable*: A chain of communication and systematic feedback from community level has been established. Monitors and Community Process Facilitators (CPFs-without financial remuneration) provide information about the situation in communities. All consortium members have a blog; project blogs for EPP/ C4C projects⁴⁷, where all activities are put and discussed (2013). Reports with better analysis and more detailed information are delivered for more in-depth context information. To this information sharing at district level contributes, e.g. more feedback from community through track FM (software for radio program), and linking electronic systems with district planning. To what extent these improved inputs result in better context awareness is not yet clear.

Overall score core capability To adapt and self renew is Stable, with clear improvement in the aspect strategic use of M&E. The overall qualification Stable will probably be shortly negatively influenced by the further to be expected scaling down of the organisation, due to HIVOS' phasing out.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
3 Capability to deliver on development objectives	3.1	3.2	Stable	Stable
3a Extend to which organisation delivers on planned products and services	3.4	3.5	Stable	Improved
3b Extent to which delivered products and services are relevant for target population in terms of the effect they have	3.1	3.2	Stable	Stable
3c Level of work efficiency	2.9	3.0	Stable	Stable

3a. *Improved*: Delivering on plans was similar as before, but there is now more intensive follow-up, in case M&E shows that follow-up actions are needed (extra time investment by bringing relevant parties together; site visits, discussions with leaders, exposure in the media; members take care on geographical basis -districts/sub-counties- of different campaigns); Kali focused on Districts of Kasese, and Kamwenge; Ride-Africa on on Districts of Kabarole, Kyenjojo and Kyegegwa; Good Hope on on Districts of: Kasese, Ntoroko, Bundibugyo; by taking advantage of each members specialisations.

3b. *Stable*: Better use of ICT to ease communication (RIC-Net). In 2011 pioneered with electronic system; now RWECO is having more skills on electronic society (e-society) with local communities. These electronic societies have led to increased demand for governmental services and increased engagement. The position of e-societies is growing, but their position still not clear. Quick qualitative feedback from communities through improved capacities of monitors now better (2013); hence responsiveness from district leaders improved, because of increased staff capacities (leaders have had trainings and more experience)(2013). Local governments are also learning from RWECO, e.g. use of RWECO tools by the structures (2013).

⁴⁷ EEP-Education Protection Policy; C4C - Connect for Change - MFS2 consortium to which HIVOS belongs

3c. *Stable*: Level of work efficiency has improved through more output based management with timelines, holding actors accountable, and an e-system has helped to provide and receive feedback more efficiently; in efficiency no notion about cost effectiveness as an element in efficiency, or measuring through relating the money value of inputs and outputs with each other. Efficiency and effectiveness in meeting targets appears improved, because of more experience, being flexible and innovative in assessing sectoral demands; in addition replication of interventions in other regions , such as E library, is now possible (2012-2013).

Overall score core capability To deliver on development objectives is Stable, as is also reflected in two of its aspects. Also here the expected scaling down of the organisation of the organisation will influence this core capability negatively.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
4 Capability to relate	3.7	3.8	Stable	Stable
4a Level of involving external parties in internal policy/strategy development	3.6	3.8	Stable	Stable
4b Level of engagement of organisation in networks, alliances and collaborative efforts	4.0	4.0	Stable	Stable
4c Extent to which organisation is actively engaging with target groups	3.5	3.6	Stable	Stable
4d Level of effective relationships within the organisation	3.7	3.7	Stable	Stable

4a. *Stable*: The involvement of external parties based on Strategic Plan 2012-2016, to which the policy issues like gender and HIV was added; Improved participation in district planning meetings by RWECO staff: relevant actions undertaken by district leaders showing flexibility in taking their actions (from 2012 onwards).

4b. *Stable*: Acquisition of a NGO certificate was needed to satisfy policy conditions in Uganda (RWECO's members were already registered as NGO's); The 4 RWECO consortium members are still the same; their partners have not changed either. And: in 2014 the Civil Society Budget Advocacy Group (CSBAG) became a new partner of the consortium.

4c. *Stable*: RWECO political & technical support from local governments to increase their performance in assigned areas (2012); RWECO is invited to attend council / technical planning meetings; districts hold open days for the public - RWECO is part of this process from 2012 onwards. The Public Private Partnership Rwenzori Regional Framework (established and developed in 2012-2103) is divided in clusters; RWECO's members belong to the governance cluster; MoU's with districts prepared (2012), as a formal way of working implying increased accountability; Joint education conferences through districts (2012), and formation of a district advocacy network- a voice of the voiceless realised (2013); Improved working relationship with media (both electronically and print) to disseminate information in

a wider media (2013). Maintaining relations with community structures , sub-county's and villages (through community monitors)(2012-2014).

4d. *Stable*: Effective relations within the organisation were maintained at the high level of the baseline; with the downscaling in mind this may change in the near future.

Overall score core capability To relate is across the board Stable, which means that the organisation has maintained its capacity that was measured in the baseline. Especially with respect to RWECO's high level of engagement in networks, alliances and collaborative efforts this contributed to the organisation's effectiveness. This effectiveness is susceptible to a downturn, due short-term uncertainty about new assignments and hence new funding for the organisation.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
5 Capability to achieve coherence	3.8	3.7	Stable	Stable
5a Existence of mechanisms for coherence	3.9	3.8	Stable	Stable
5b Level of coherence of various efforts of organisation	3.7	3.6	Stable	Stable

5a: *Stable*: Coherence mechanisms in place; RWECO was registered as an NGO in 2013; then clear and coherent mandate formulated (2013)(nb: RWECO's members were registered earlier); this all gives RWECO the formal status needed for its guidance to the consortium. there exist clear procedures about joint staff meetings, Board meetings, and there manuals for Human Resources (2009), Financials, and M&E tools in place. MoU's formally established with the Rwenzori Districts with which RWECO works (2013). New policy guidelines developed for RWECO on gender & HIV/AIDS (2013). Consortium ownership by RWECO's members has increased visibility; this has made RWECO more visible in the region (a/o acceptance of the resolution to carry RWECO flag by its members)(2013).

5b: *Stable*: Some members have just received the certificate of operation from the NGO board; this concerns quality assurance mechanisms -kind of certification procedure- of RIC-NET and RIDE-Africa. RIC-NET will receive the certificate at a ceremony September 2014; the procedure for other RWECO members is in process for obtaining the certificate. Capacity is built on quality assurance mechanism through DENIVA.⁴⁸

Overall score core capability To achieve coherence shows continuation of existing level: RWECO could fine-tune existing mechanisms and start to adopt new ones. Coherence of the whole RWECO setup

⁴⁸ DENIVA (Development Network of Indigenous Voluntary Associations) is a Ugandan Network of Non-Governmental and Community Based Organizations (NGOs/CBOs) providing a platform for collective action and a voice to voluntary local associations to strongly advocate for creation of more opportunities for people and Civil Society Organizations participation in the development of Uganda. The overall objective of DENIVA is to influence poverty reduction policies and related decision-making processes in favor of marginalized groups like women, children, internally displaced persons, HIV/AIDS positive population and persons with disabilities. See:<http://participedia.net/de/organizations/development-network-indigenous-voluntary-associations-deniva>; DENIVA contributed for Uganda to the assessment of civil society in Uganda while applying the CIVICUS conceptual framework (see: <http://www.civicus.org/>)

looks firmer; for RWECO CU and the consortium members there is still room to pursue internal synergies further.

Main conclusions on capability changes RWECO

The next core capability table gives a summary at core capability level of the baseline and endline score .

Core capability	Baseline	Endline	Final change qualification
1 To act and commit	3.5	3.5	Stable
2 To adapt and self-renew	3.3	3.4	Stable
3 To deliver on development objectives	3.1	3.2	Stable
4 To relate	3.7	3.8	Stable
5 To achieve coherence	3.8	3.7	Stable

For the unit of analysis the RWECO CU this concerns its solid establishing/ consolidating that has helped the consortium to become better equipped for the huge variety of its activities. This has affected certainly at aspects level within the Core capabilities 1 and 2. Regarding the aspects underlying the other core capabilities the baseline levels were maintained. Hence RWECO succeeded in the period June 2012 - June 2014 to consistently maintain its organisational capabilities and regularly improve aspects within its core capabilities. However: With the upcoming phasing-out of HIVOS MFSII, RWECO may face a big challenge to continue at this level.

HIVOS' approach towards RWECO has from 2012 onwards not been essentially changed in its main contribution to the project *Enhancing civic competence on Social Accountability in the Rwenzori Region*. Through this project core funding (i.e. salaries, office costs, travel costs for exposure visits, costs related to development of code of conduct, development of tools, documentation best practices, and external consultancy) and is mainly focused on to the core capabilities To act and commit and To deliver on development objectives. Financially HIVOS' support to RWECO CU amounts to € 163,000 over the period 2011 - 2014 (see Chapter 3 Profile of the SPO).

When looked at the scores at aspects level and related explanations, there are improvements within the core capabilities 1 and 2, and to a certain extend within core capability 3. HIVOS' support appeared to have a wider scope in orientation than was envisaged in its original focus on the core capabilities 1 and 3.

Plausible explanations of RWECO's outcome realisation

In the light of the adapted and subsequently applied research approach the effectiveness of interventions can be described in terms of a plausible explanation⁴⁹. This report attends to two types of contributions that are described in the Results chain scheme in Fig 1 (see Chapter 4):

1. the contribution of HIVOS funding to the actual changes in RWECO's core capabilities To act & commit and To adapt & self renew
2. the contribution of these changes in RWECO's capacity to its realised outcomes in the area of *the responsiveness at district level to citizen demands*

This outcome area was selected, as this is central in RWECO's mission and also the core of HIVOS' support to RWECO⁵⁰. The next table gives the relevant elements of the Theory of Change of HIVOS and that of RWECO that underlie the Results chain HIVOS - RWECO from inputs to outcomes.

Table 6: Overview relevant ToC elements HIVOS-RWECO

Elements	HIVOS	RWECO
Ideas/theories on change	National civil society organisations contribute to citizens empowerment	Conscious citizens ask for adequate service delivery government
Programme/ project/initiative seeking changes	Enabling RWECO's core operations and its capacity development	Information dissemination on governmental services / advocacy on government's accountability on quality of these services
Process/sequence of change	Core funding RWECO CU and consortium partners, active partner in RWECO consortium	Strategic Plan 2012-2016: To enhance civic competence, social accountability To coordinate capacity building of RWECO members To be engaged in advocacy activities on major policy issues To mobilize resources and enhance internal systems for the RWECO members ⁵¹
Reflection and decision making	Periodic capacity assessments, coaching	Involvement in preparation governmental decisions affecting poor, school children, M&E outputs / outcomes and related consortium decisions
Context	Declining financial means for development funding in the Netherlands	Political environment tense for NGOs/CSO activists Positive responsive regional authorities (MPs) Livelihoods affected by floods and draughts

The next table gives results chain gives a display of HIVOS' inputs contributing to RWECO's core capabilities that are instrumental in the realisation its activities. The outputs that these activities produced, generate immediate (direct) outcomes and after that medium term (direct) benefits.

⁴⁹ Or: 'the plausibly explanation of an specific outcome in a specific historical case, the identification of actors/factors that contribute to this outcome, and the assessment their relative importance', see: "Contribution analysis explores attribution through assessing the contribution a programme is making to observed results". Contribution analysis: An approach to exploring cause and effect, John Mayne ILAC Brief 16, May 2008, p. 1 or See: ETC Research Manual, Evaluation Study *Capacity development* of Southern partner organisations - Uganda, Process Tracing, Eric Kamphuis, April 2014, p 4

⁵⁰ See also Chapter 3 *Profile of the SPO*

⁵¹ See Chapter 3: *Profile of the SPO*

Table 7: Results chain for RWECO's outcome area: Responsiveness at district level to citizen demands

The following gives the result of a results chain analysis with RWECO CU focused on the outcome area *Responsiveness at district level to citizen demands*.

Inputs of HIVOS	RWECO's Activities	RWECO's Outputs	RWECO's Outcome areas	
			Immediate (direct) benefits	Medium term (direct) benefits
<p>Finance: 2012 & 2013 minimally Euro 250,000 / year for RWECO CO and 4 consortium partners</p> <p>Other support:</p> <ul style="list-style-type: none"> Supervision visits by HIVOS staff (3 visits in two years) by regional director Meeting to inform about and prepare for upcoming changes and exit Regular backstopping support by Skype, email, and phone. 	<p>Capacity to act & commit</p> <ul style="list-style-type: none"> Dialogue meetings with district leaders and monitors <ul style="list-style-type: none"> MoUs with districts Petitions, etc Support to district budget analysis Training of Community Process Facilitators (CPF) and monitors Radio + TV programs for sensitization and raising awareness Strengthening E-Societies <ul style="list-style-type: none"> Provision of internet & equipment Funding of 1 staff per district for about 9 months Training on IT Online D-groups and blogs Rural information centres <ul style="list-style-type: none"> Provision and dissemination of info Community sensitization <p>Capacity to adapt & self-renew</p> <ul style="list-style-type: none"> Joint quarterly meetings for planning and reflection Joint monitoring with districts Public expenditure tracking M&E position (noticed need in 2012) 	<ul style="list-style-type: none"> One meeting organised per year in 7 districts Report on budget analysis + recommendations shared and discussed in 7 districts 86 CPF + 840 monitors trained 3 radio stations with weekly programs on the radio; one TV station (about 3 shows on civic competence) 7 E-Societies operational (2 in 2012) 16 rural information centres (4 in 2012) <ul style="list-style-type: none"> Better reporting Changed approach from confronting to dialogue 	<ul style="list-style-type: none"> 220 schools, 80 agricultural programs, 85 water points and 75 health units monitored Establishment district integrity forums to combat corruption More awareness on roles/ responsibilities of the public in government programs/ projects E- Societies within district structure when RICNET phased out funding for staff (two district have employed staff to continue other centres have applied) <ul style="list-style-type: none"> Better reporting Changed approach from confronting to dialogue 	<p>Increased responsiveness of districts on citizens demands: Examples:</p> <ul style="list-style-type: none"> Special needs education in Kamwenge district (many examples provided- see reports on meetings with monitors) Recovery of misused government funds in 2013

Above Results chain has been verified and further refined during the field visit that was concentrated on the Kyenjojo and Kamwenge Districts (out of the total of 7 Districts i.e. Kasese, Kabarole, Kyegegwa, Bundibugyo, Kyenjojo, Ntoroko, and Kamwenge); the visited districts do give a fair picture of the realised outputs in the other districts, on which is reported by RWECO CU.

The results chain is generally in accordance with observations and interviews in the field; the results chain is later further related to provided written reporting by RWECO CU and activity publications. However no evidence could be found that E-Societies are contributing to civic competence in regard to demanding services from the districts. Rather the E-Societies were appreciated, because of their facilities (internet, printing, photocopying), their IT training and their IT support to district officers. Interviewed monitors and Community Process Facilitators said not to make use of the facilities to access, nor to disseminate information through the centres.

Capability Changes RWECO

As was stated in the previous paragraph *Main conclusions on capability changes RWECO*, the core capabilities To act & commit and To adapt & self renew have shown steadiness and improvement at aspects level through i.e. strategy, translation strategy into actions, improved accounting, and sufficient, better educated and motivated staff (CC1), and effective use of M&E (also through mid-term review 2013), internal learning practices/consortium strengthening, and sound field feedback through Monitors and Community Process Facilitators (CC2). These improvements were especially in the 2nd half of 2012 and 2013 vital for the execution of listed activities.

Outputs RWECO

The outputs thereof as shown in Table 7 were duly reported in detailed annual reviews that RWECO CU submitted to HIVOS, which were discussed in regular monitoring meetings. Outputs are reported (in focus group, interview and reports) in terms of: number of meetings organised per year in 7 districts, reports on budget analysis & recommendations produced, shared and discussed in 7 districts, number of CPF & monitors trained, number of radio stations with weekly programs on the radio; one TV station number of shows on civic competence, increasing number of operational E-Societies, and increasing number of rural information centres.

Consortium partner Kali confirmed in its reporting (focus group, interview and reports) on the central role of RWECO CU and the importance of Community Process Facilitators (CPF) in following developments in area of basic education and networking with district authorities.

Consortium partner RIC-NET confirmed in its reporting (focus group, interview and reports) on the presence of E-Societies present on 7 districts and information centres –info/ e-points at 35 sub-county parishes (nb: Each E-Society has about 5 computers and internet while the info points have normally one computer, one telephone and a policy notice board). RIC-NET confirmed RWECO CU's role in resource mobilisation and joint proposal writing; now RWECO being registered as NGO makes it easier to attract funding. However whether E-societies directly contributed to strengthening civic competence remains uncertain (see above).

Consortium partner Good Hope confirmed in its reporting (focus group, interview and reports) also importance of Community Process Facilitators (CPF), confirmed RWECO CU's role in resource mobilisation and joint proposal writing.

Consortium partner RIDE-Africa is oriented on good governance in its activities with RWECO CU with HIVOS funding citizens' responsiveness in 27 sub-counties. For all sub-counties, 10 monitors and 27 Community Process Facilitators are involved to increase civic competence. The monitors focus on Health, NAADS (National Agricultural Advisory Services), and education.

Immediate (direct) benefits

Detailed reporting on *Immediate (direct) benefits* that has been done through RWECO CU could partially be confirmed in reporting (focus group and interviews) by a Community Development Officer and 2 District Information Officers on successful functioning e-societies and radio programmes. One District speaker confirmed success of e-societies and engagement with consortium partner Kali; area Inspector of schools confirmed cooperation with consortium partner RIDE-Africa about children's rights on schools, whereas a senior community development officer confirmed cooperation with same consortium partner on revised governmental budget allocation in favour of poorest groups. Community monitors gave additional information about details of their work.

Reporting on budget transparency (<http://www.budget.go.ug/budget/content/launch-budget-transparency-initiative>) was discussed under coordination of RWECO with regional leaders through community process facilitators, as also anti-corruption issues through RWECO's blog (for example: <http://rwecovoice.blogspot.com/2013/12/rwenzori-ant-corruption-coalition.html>). RWECO's blog was often instrumental in meetings and forums with government and CSO's.

As *immediate (Direct) benefits* the Establishment of district integrity forums to combat corruption was confirmed in reporting, but regarding More awareness on roles/ responsibilities of the public in government programs/ projects this was more difficult to detect.

Medium term (direct) benefits

On *medium term (direct) benefits* some examples were given. In meetings with monitors special needs education at district level was highlighted and was the recovery of misused government funds in 2013 reported RWECO CU.

6. DISCUSSION

Followed CFA-SPO approach related to the findings

Attainment of detailed reported immediate benefits were confirmed in mentioned interviews with all consortium partners, and a sample of governmental officials and Community Process Facilitators and Monitors. The central role of RWECO CU was herein stipulated, hence RWECO CU's improvement in the core capabilities To act & commit and To adapt and self renew plausibly generated intended immediate outcomes.

The size of this impact is considerable, given the fact that the basis of RWECO's operations (by CU and the consortium partners) is much depending on HIVOS' core funding (see Table Overview relevant ToC elements HIVOS-RWECO in previous Chapter). Without this core funding any improvement in RWECO CU's core capabilities would not have been possible, as also a major part of the activities the consortium partners carry out, in service of attaining *Immediate (direct) benefits*. As was reported in Chapter 5, the attainment of these benefits can be plausibly explained by RWECO's efforts, in which its coverage in 7 districts by 86 Community Process Facilitators and 840 monitors looks firm. It is however not possible to indicate whether higher or lesser mobilisation of these human resources would be needed to generate the outcome, especially where it concerns the immediate (direct) outcome 'awareness raising on roles/responsibilities of the public in government programs/ projects.' The other immediate (direct) outcome 'Establishment district integrity forums to combat corruption' is a better measurable outcome.

About the attainment of *Medium term (direct) benefits* in terms of Increased responsiveness of districts on citizens demands, confirmation less strong, because the MFS2 evaluation period only covers maximally 2 years (June 2012 - June 2014). The mentioned example i.e. the recovery of misused government funds in 2013 appears to be an exception in this respect.

HIVOS' core funding support was and is still vital for RWECO (CU and consortium partners) as a basis for its operations, because the advocacy-orientated character of RWECO does not make cost-covering earning of own income probable. The same counts for HIVOS' support for strengthening RWECO CU's core capabilities To act & commit and To adapt & self renew: if this support will be discontinued, then attained results will fade away.

In case of a HIVOS phasing out for other reasons than directly related to RWECO's effectiveness, like general budget cuts in the Netherlands, the findings of this report are only relevant for determining/confirming the quality of past performance and not for future learning within a continued cooperation between HIVOS and RWECO.

Recommendations

If HIVOS decides to discontinue its support to RWECO, there is nothing to recommend with respect to the cooperation between both organisations.

If HIVOS decides to continue its support to RWECO it is recommended that:

- *RWECO investigates the effectiveness of its outputs on outcomes more profoundly than thus far, by firstly defining more exactly outcomes in measurable terms, and by assessing whether the current consortium setup still can serve its ambitions in the same as it did*
- *HIVOS investigates co-funding opportunities for continuing core funding, together with assessing to what extent RWECO can develop own earning capacity for partial cost coverage.*

Remarks on evaluation approach

The evaluation of RWECO's capacity development itself, especially with respect to the organisation's planning and implementation could be done with much care, thanks to the documentation that the organisation has made available, in addition to the information provided by HIVOS' head office. Further should be noted that RWECO's Monitoring & Evaluation is in a good shape, which facilitated the capacity development endline study, in addition to the information provided in workshops and interviews.

The chosen qualitative approach to assess the capacity development of SPO's, as described in Chapter 4, appeared to work well. The use of capability scoring require a careful approach: scores can serve a comparison between baseline and endline outcomes, but this comparison needs to be thoroughly triangulated through interviews, focus group discussions, or joint analysis and verification workshops with stakeholders. In the current evaluation setup contribution analysis was an integral part of the evaluation, with in its core the results chain analysis. Research time permitted a partial confirmation of causalities postulated; the qualification of effectiveness of interventions can be set as firmly plausible and to a certain extend functional⁵².

⁵² See Chapter 4: Table of levels of evidence

7. CONCLUSION

In this chapter conclusions are drawn with respect to the 3 evaluation questions of the MFS2 Evaluation Study Capacity Development of Southern Partner Organisations - Uganda, e.g.:

1. *What are the changes in partner organisations' capacity during the 2012–2014 period?*
2. *To what degree are the changes identified in partner capacity attributable to development interventions undertaken by the MFS II consortia (i.e. measuring effectiveness)?*
3. *What factors explain the findings drawn from the questions above?*

Changes in RWECO's capacity during the 2012–2014 period

Overall RWECO's organisation per June 2014 remained stable as compared to June 2012. At aspect level there were improvement within the core capabilities 1 and 2. RWECO delivered a huge variety of outputs within RWECO's outcome area *the responsiveness at district level to citizen demands in the Rwenzori Region*. It could plausibly explain the contribution of its outputs to the outcomes within this area.

HIVOS' influence on identified changes

HIVOS support basically contributed to RWECO's very existence by providing core funding under the project *Enhancing civic competence on Social Accountability in the Rwenzori Region*. The close cooperation with HIVOS contributed to the changes in RWECO's capacity since June 2012 as well. Within this cooperation changes on aspect level of the core capabilities 1 and 2 have taken place. HIVOS support to RWECO was considerable and long term; HIVOS became and stayed the most important donor organisation for RWECO (RWECO strongly wishes to continue this relation).

Explaining factors to identified changes

RWECO has support of a limited number of donors, but HIVOS was from the outset of RWECO's existence essential in its development as the most prominent donor. HIVOS participated as full partner in the RWECO consortium at the outset and basically made the establishment and further development of RWECO CU and its consortium partner possible. Within this general framework HIVOS's main focus was on the core capabilities To act and commit and To deliver on development objectives and to a lesser extent on To adapt and self renew. This focus was not specific, as most of the support regarded paying the salaries, travel costs, office costs, external consultancy and research to RWECO CU and salaries, travel costs, and office costs, for those working with the consortium partners.

Assessment project design

Previous observations result in an assessment of the project design. HIVOS' contribution was defined as a separate project *Enhancing civic competence on Social Accountability in the Rwenzori Region*. HIVOS' support to RWECO's capacity development is mainly geared to Enhancing the capacity of RWECO CU to facilitate and to conduct social accountability monitoring in Rwenzori region. The project appears to be well designed, but was not specifically geared to the 5 core capabilities per se.

The next table gives assessment scores on 3 statements: The project was well designed , The project was implemented as designed , and The project reached all its objectives.

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	7

Capacity development of Southern partner organisations

HEPS UGANDA - Coalition for Health Promotion and Social Development Technical report on HEPS' capacity development

1. INTRODUCTION

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Purpose and outline of technical report

The technical report about HEPS Uganda - Coalition for Health Promotion and Social Development regards one of the 8 studies on the capacity development of Southern Partner Organisations (SPO's) within the framework of the Joint MFSII evaluation at country level - Uganda; for the capacity development component of this evaluation 8 SPO's were selected. The report serves to give input to the overall joint evaluation report on MFSII funding to capacity development, in addition to the reporting on the other components of the joint evaluation e.g. Millennium Development Goals, and Civil Society Strengthening.

The technical report gives firstly, in Chapter 2 - Context, a description of the context, in which HEPS Uganda operates, highlighting the main relevant political, economical, cultural and social issues with which the organisation has to deal in pursuance of its objectives.

Chapter 3 - Project Description gives the profile of HEPS e.g. its mission, vision, and strategic objectives, and expenditure indications over the period 2011-2012 that represent the yearly amounts of € 252,101 (2011) and € 297,916 (2012) with a current staff of 22 full time professional staff and 3 support staff.

The same chapter describes the development in the support of the Co-Funding Agency (CFA) e.g. HIVOS to HEPS as well. The cooperation between HIVOS and HEPS was concentrated mainly on its Health Policy Advocacy (HPA) Program, the first of the three pillars of the Strategic Plan 2011-2015; there was little specific focus on HEPS' capacity development. Over the period 2011-2015 total HIVOS funding amounts to € 145,000.

Chapter 4 - Data collection and analytical approach gives attention to the methodological choice made: the capacity development study aims at giving plausible indications on the effectiveness of HIVOS' support to HEPS, based on descriptive and theoretical evidence (the first two steps in the evidence ladder).

Chapter 5 - Results gives the changes per core capability and their underlying aspects with explanations on the change qualifications per aspect.

Chapter 6 - Discussion and Chapter 7 - Conclusion provide the findings of the analysis culminating in the conclusions with respect to the evaluation questions.

Brief summary of the analyses and the findings

In the study approach qualitative and quantitative research methods are combined. The approach is centred on the comparison between triangulated baseline data (2012) and triangulated follow-up (endline) data (2014). For this background documents, Focus groups/group interviews, workshops, and organisational self assessments in August/September 2012 and March-April/September 2014, resulting in 2 sets of capability scores. Endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, were qualified in terms of 'improved', 'stable', or 'worsened'. The qualifications and their reasons were peer reviewed in a workshop.

Improvement of the core capabilities 1 and 2 were the most pronounced since 2012 and was realised recently (end 2013, beginning 2014), and carry potential for the next future. Core capability 3 showed partial improvement, but have also clear potential for improvement. These developments can mostly be attributed to the Irish INGO GOAL that supported HEPS with a comprehensive capacity development plan beginning 2013. HIVOS did not show a clear orientation on capacity development in general and on core capabilities in specific during the period June 2012-June 2014. HEPS continued with its engagement in networks, alliances and collaborative efforts (Core capability 4), due to its own efforts. After a critical period (2012- beginning 2013) HEPS succeeded safeguarding sufficient funding, which enabled the organisation to make its organisation more robust. The organisation's important regional and research expertise and networks at national level take advantage of the larger scale on which the organisation can function, also thanks to GOAL's contribution to HEPS' capacity development.

HIVOS' current approach can thus be maintained, under the condition that possible capacity development interventions complement the contributions by GOAL in this respect. This requires clear exchanges between HEPS, HIVOS and GOAL on capacity development issues at hand.

The way HIVOS has supported HEPS since 2011, showed a decreased interest in further capacity development. HEPS' organisational capacity already appears strengthened, and there is clear potential for an accelerated development of its organisation . In the current setup with other development partners, *HIVOS is recommended to continue its involvement in HEPS, and is additionally recommended to seek how it can complement to capacity development efforts of other development partners besides GOAL (government, other donors, other CSO's).*

The assessment scores based on 3 statements: "The project was well designed" , The project was implemented as designed" , and "The project reached all its objectives" could not been made, as HIVOS did not specifically design an intervention for HEPS' capacity development. An assessment along the 3 statements can therefore not be given.

2. CONTEXT

Uganda's health sector was in a bad shape in the 70-ies and early 80-ies, due to military absolute rule and civil war over this period. With the advent of the National Resistance Movement (NRM) government in 1986, the country regained stability and important progress was realised by the introduction of democratic reforms and improvement of human rights. Since then the health sector also slowly started to recover. In 1986, the Expanded Programme on Immunisation (EPI) was re-launched; the Maternal and Child Health (MCH) programme, Family Planning and the AIDS control programmes were also introduced.

By the early 1990s Uganda was among the African countries worst hit by the HIV/AIDS epidemic. The national government in cooperation with civil society organisations, gave a response to the epidemic with an open multi-sectoral approach. Central to the health sector reform were decentralization, and the Structural Adjustment Programmes that urged the government to reduce its responsibility for paying for social services, like health. The decentralization started in 1986 with the establishment of 'resistance councils', was reinforced in the 1995 constitution, and under the Local Government Act of 1997 further developed with special provisions for effective service delivery. Powers were devolved to district local authorities that belonged to the central government before.

The Ugandan health care delivery system was designed along this decentralised public system. This resulted in a multi-layered health care system from Health Centre I – IV as lower level units, with a district hospital for each district, and above this the regional and national referral hospitals.¹ The results of the health sector reform since 1995 until 2001 were disappointing. They showed that infant mortality figures had deteriorated and maternal mortality figures had hardly changed. The majority of the government budget appeared to be allocated to large hospitals (regional and national) and the central Ministry of Health (MoH), whose services benefits the urban population, rather than to district level facilities providing primary health care services to the rural poor. Additionally donor projects, with high overheads, focussed on investment goods and were inefficient at providing basic health care. User charges raised little revenue, and exemption schemes did not protect vulnerable groups; user fees were a significant barrier for poor people accessing services.²

Recognising these failings, during the late 1990-ies, the Government of Uganda initiated a comprehensive programme of radical health sector reforms. This included the decision to implement a sector-wide approach (SWAp) in August 2000, in order to improve coordination and with that efficiency and equity in the sector. Also did the SWAp induce donors to emphasise coordinated health oriented budget support, instead of isolated health projects support efforts. The first national Health Sector Strategic Plan (HSSP-1) envisaged strengthening a minimum health care package (MHCP) within a decentralised, district-based primary health care approach.

¹ PRIMARY HEALTH CARE AND HEALTH SECTOR REFORMS IN UGANDA, *Christine Kirunga Tashobya and Peter Ogwang Ogwai*, 2004, p. 2

² Health Systems Reforms in Uganda: Processes and Outputs, Edited by Christine Kirunga Tashobya, Freddie Ssengooba, Valeria Oliveira Cruz, Institute of Public Health, Makerere University, Uganda Health Systems Development Programme, London School of Hygiene & Tropical Medicine UK, Ministry of Health, Uganda, 2006, Chapter 1 The Ugandan health systems reforms: miracle or mirage? p. 16

The National Health Policy (NHP), first launched in 1999, was formulated in the context of the provisions of the 1995 Constitution and the Local Governments Act (1997), which decentralised health governance and service delivery (Ministry of Health, 1999). The first National Health Policy (NHP I), covered the period 1999/00-2008/09, adopted the Primary Health Care (PHC) strategy for national health development.

Four main reforms aimed to improve the financing of health care from 2000 to 2005: the formal suspension of user-charges in the public sector, a substantial increase in the health budget, better coordination of donor aid, and redirection of resources away from tertiary level services towards primary level MHCP provision with the inclusion of Private Not-For-Profit Providers (PNFP), aside governmental health services. Per 2003 was shown that efficiency gains can be made with a minimal budget increase and shifting of budget priorities: (reduction of self medication, increased use of PNFP, and increased budgets for MHCP). For these shifts being sustainable, donor aid had to enable better sector planners in the government to implement reforms that affect broader health systems³.

NHP I was revised to formulate the second National Health Policy (NHP II), to cover the period 2010/11-2019/20 (Ministry of Health, 2009). In the policy, Government commits to progressively increase the level of Government financing to the health sector and to ensure effectiveness, efficiency, and equity in the allocation and utilisation of resources.

Civil society organisations play an important role in Ugandan health sector since the early 90-ies. Over fifty civil society organisations consisting of private health organisations, health workers, health consumers and concerned citizens have put forward key concerns about the health sector's performance in 2010 through AGHA⁴: The Government of Uganda must allocate at least 15% of the national budget to the health sector and increase the per capita expenditure by at least US \$ 1 every year. Recruiting, training, and retaining sufficient numbers of health workers must be at the cornerstone of the MoH priorities. The funds, infrastructure and capacity to manage drugs and supplies in health centres and hospitals throughout the country must be a central component to all other MoH efforts. And finally the MHCP is guaranteed to all Ugandans, yet certain elements of this package are prioritized while others are neglected.⁵

In September 2013, the Ministry of Finance and Development released the MDG Report for Uganda, detailing Uganda's progress towards achieving the MDG's by 2015. The report mentioned that Uganda had already met in 2 of its 17 targets: e.g. Uganda had been able to halve absolute poverty and to contain its debt burden. There remain however critical areas where Uganda needs focus: e.g. maternal health, where the reduction of maternal mortality ratio is stagnant, the universal access to reproductive health goes slowly, and the spread of HIV/AIDS reversed instead of being halted⁶.

³ Freddie Ssengooba, Health Systems Development Programme, School of Public Health, Makerere University, Kampala,

⁴ AGHA: Action Group for Health, Human Rights, and HIV/AIDS

⁵ Civil Society Organisations, Perspectives and Priorities, Health Sector Performance FY 2009-2010, AGHA

(<http://www.aghauganda.org/publications/reports/The%20Health%20Sector%20performance%20report-%202009-2010.pdf>)

⁶ See Millennium Development Goals Report for Uganda 2013 Special theme: Drivers of MDG Progress in Uganda and Implications for the Post-2015 Development Agenda, Government of Uganda, Ministry of Finance, Planning and Economic Development, September 2013, p.p. i-iii ; and Chairman's Remarks at HEPS Uganda's 9th AGM held on 22nd Aug 2014 at HEPS Secretariat- Balintuma Road Rev. Can. Dr. John T. Kateeba

Advocating the specific rights of health consumers got increasingly attention in the CSO sector in the late 90-ies of the last century. In 1999 The Uganda National Health Consumers Organisation (UNHCO) was established with the purpose to 'advocate for a strong institutionalized platform that is able to articulate voices of consumers of health goods and services'⁷. In UNHCO's approach the Rights Based Approach (RBA) to healthcare delivery stands central in its contribution to improve community participation and accountability. HEPS-Uganda was established as a Health Consumers' Organisation in 1999 as well and became member of UNHCO. The organisation advocates health rights and responsibilities, works as civil society organisation in the health care arena and is for this supported by HIVOS with MFS2 funds over the period 2007-2011 and 2013-2015.

⁷ <http://unhco.or.ug/>; UNHCO is a development partner of CORDAID; see <https://www.cordaid.org/en/partners/uganda-national-health-consumers-organisation/>

3. PROJECT DESCRIPTION

Profile Southern Partner Organisation (SPO)

HEPS-Uganda is a health consumers organisation founded in 1999, and advocates for health rights in Uganda. It is a coalition of health consumers, advocates, healthcare practitioners, civil society organisations, and community based organisations that have a common concern about bottlenecks that hinder access to quality healthcare for all Ugandans. HEPS focused initially solely on Health Policy Advocacy. Subsequently, after conducting several advocacy activities on its own, the organisation started the Ugandan Coalition for Access to Essential Medicines in 2002. Members of the coalition include mainly national and international health CSOs and NGOs. The purpose of the coalition is to advocate for better healthcare through combined efforts.

In 2001 HEPS started a Community Empowerment programme (CEP). This outreach program focused on education with regard to health rights and responsibilities in rural communities in Uganda with the aim to ensure that people make informed choices about the healthcare.

Since then HEPS has developed its strategic areas, which are led down in its subsequent strategic plans. The third Strategic Plan 2011-2015 formulates a strategic focus oriented towards three focal areas namely⁸:

- 1) Citizen empowerment and building a health consumer/health provider mutually respectful relationship and feedback mechanism;
- 2) Advocacy for consumer-friendly health and health related laws, policies and interventions;
- 3) Building a professional HEPS Organisation through internal and external systems strengthening.

With the framework of HEPS strategic focus, 3 distinct programs are now in operation⁹.

1. Health Policy Advocacy - To advocate for health consumer friendly laws, policies and health packages and their implementation at all levels in Uganda through coalition building, partnership creation and sensitization. Within the Health Policy Advocacy Program, HEPS carries out studies that inform politicians, parliamentarians, and the ministry. HEPS focuses its advocacy on trade and its impact on access to essential medicines; health financing, human resources for health; and health systems strengthening. HEPS has established in two district coalitions in the east and north and one at the national level.

2. Community Empowerment - To empower health consumers in Uganda with knowledge and skills to claim their right to health and exercise their health responsibilities. HEPS implements currently activities in the districts of Mbarara (health rights, health literacy/sexual reproductive health, promotion safe abortion), Kyankwanzi (health literacy/sexual reproductive health), Kampala/Kawempe (literacy/sexual reproductive health), Kamuli (community empowerment in private health services), Lira (transparency and accountability healthcare), Bugiri (accountability healthcare).

⁸ HEPS-UGANDA - Coalition for Health Promotion and Social Development, Strategic Plan 2011-2015, July 2011, p. 8

⁹ See HEPS UGANDA Coalition for Health Promotion and Social Development Annual Report 2013, August 2014, Draft (without financials) p.p.3-26

3. Systems Strengthening - To strengthen the capacity of HEPS-Uganda and its civil society partners to meet their set strategic objectives as formulated in the strategic plan 2011-15. For this HEPS-Uganda aims to strengthen internal organisational systems to ensure sufficient capacity to implement its mandate. This covers its organisational infrastructure, human resources, monitoring and evaluation, operational procedures, communication systems, resource mobilisation, as well as its partnerships.

Overall HEPS-Uganda's programs run both at inter-/national and district-levels; it implements its health policy advocacy and related research program over the whole country. HEPS implements its community empowerment activities in 7 districts. The organisation's head office is based in Kampala, with regional offices in Lira for Northern, Mbarara for Western, and Pallisa for Eastern Uganda. Per August 2014 HEPS employs 22 full time professional staff and 3 support staff¹⁰. Staff increased recently, as by May 2013 the organisation hosted 16 full-time professional staff and 4 support staff¹¹.

In the Strategic Plan 2011-2015 a tentative estimate is made about the yearly expenditures of HEPS during the planning period. The next table gives an overview in € per strategic program.

Table 1: Estimate expenditures HEPS 2011-2015 per strategic program in €¹²

Program Area	2011	2012	2013	2014	2015
1. Health Policy Advocacy	192,192	192,192	192,192	192,192	192,192
% of total	24%	25%	26%	26%	26%
2. Community Empowerment	418,919	370,871	375,976	381,592	387,769
% of total	53%	49%	50%	53%	53%
3. Systems strengthening	183,183	195,195	180,180	152,553	156,156
% of total	23%	26%	24%	21%	21%
Totals	794,294	758,258	748,348	726,336	736,117

The overview shows that expected expenditures for community empowerment take about half of the total budget (49%-53%). This looks logical, because especially the community development program runs in different and sometimes very remote areas. The other strategic program components take roughly each a quarter of the budget; the relative size of all components is not expected to change drastically.

Actual yearly expenditures over the years 2011 and 2012 are shown in the following table¹³.

¹⁰ Own data collected in meeting with HEPS Executive Director and Operations Director on 28 August 2014

¹¹ Fund Development Strategy 2013/14-2017/18, Denis Kibira, Kampala, 28 May 2013, p. 1

¹² HEPS-UGANDA - Coalition for Health Promotion and Social Development, Strategic Plan 2011-2015, July 2011 appendix iii. indicative resource requirements, p.p. 37-38; conversion from UGX into € against exchange rate UGX 3,330 = € 1

¹³ HEPS Annual Report 2012, p. 18

Table 2: HEPS reported disbursements 2011 & 2012 per 31 December 2012 in €¹⁴

	2011	2012
Project disbursements	218,514	274,323
% of total	87%	92%
Administration	33,587	23,593
% of total	13%	8%
Totals	252,101	297,916
Funding available for programs	244,819	238,532
Deficits per year	-7,282	-59,383

Previous tables show a big difference in the estimated expenditures, brought up in the Strategic Plan 2011-2015 and the actual expenditures for the years 2011 and 2012. The actual expenditures were not covered by incomes coming from different donor agencies; especially in 2012 the deficit was considerable. In 2011, 11 donor agencies have made contributions; HIVOS was then the largest donor with a contribution of € 44,295 (see next paragraph figures over the period 2011-2015); other donations and contributions not from donor agencies were second in place: € 34,726. For the year 2012 HEPS did not get any new funding from HIVOS¹⁵, but contributions came from 13 other donors plus the Ministry of Health Uganda. The grant from MSH (Management Science for Health) was by far the largest (€ 72,754); MSH and the other parties provided more funding than in 2011, but grants from 5 of them were very small, and also other donations and contributions were smaller than in 2012 (€ 29,095). Project expenditures increased steeply, causing a much higher deficit. This circumstance urged the HEPS Board and management to actively look into the organisation's funding strategies: for this external expertise was hired to see how fund generating acquisitions fitting within HEPS' mandate could be realised. According to the analysis made, HEPS should focus on fundraising for programs, development of consultancy and business development¹⁶. The organisation primarily focused on fundraising for programs soon after the issuing of the expert report.

HEPS succeeded acquiring new assignments end 2013 and in the course of 2014. It concerns: COME – Community Engagement to stop Medicines Stock Outs funded by RTI¹⁷/GAPP for 2 years with possible renewal for 2 more years; Accountability Can Transform Health (ACT Health) funded by DFID through GOAL Uganda¹⁸ for 2-4 years; Community Action for increased uptake of HIV/AIDS services (CAD) Project funded by USAID through Management Science for Health¹⁹ for 9 months. In addition a project proposal by HEPS made for HIVOS resulted in funding for the project 'Contributing to the reduction of new AIDS infections in Uganda' over the period 1 June 2013 - 30 August 2015 for the

¹⁴ Exchange rate UGX 3,330 = € 1

¹⁵ Expenditures were done on unspent HIVOS funds

¹⁶ Fund Development Strategy 2013/14-2017/18, Denis Kibira, Kampala, 28 May 2013 made p.p. 15-16

¹⁷ Research Triangle Park (RTI) is an US-based institution involved in research, policy analysis, and program evaluation for objective information regarding health policies and programs (<http://www.rti.org/>); The Governance, Accountability, Participation And Performance (GAPP) Program is USAID-funded and envisages closer government/citizen relationships, increased citizen participation in local governance aiming to improve transparency and accountability thus for better service delivery; the program works through RTI in Uganda by issuing call for research proposals (<http://www.rti.org/page.cfm?obj=A585CB40-7B0F-47AE-8BE2CDCC6ABD11B5>)

¹⁸ An Irish international humanitarian agency dedicated to alleviating the suffering of the poorest of the poor, <http://www.goal.ie/>; ACT Health was launched on 26 March 2014 (see <http://www.goal.ie/NewsDetails/403>)

¹⁹ An US-based INGO with its mission: 'Saving lives and improving health of the world's poorest and most vulnerable people by closing the gap between knowledge and action in public health' (<http://www.msh.org/>)

value of € 99,999.50. With the advice of GOAL²⁰ (see above) HEPS intensified its attention to its 3rd strategic program: Systems strengthening. The specific objectives for this component are:

- 1) To strengthen HEPS-Uganda's internal management systems, policies and infrastructure
- 2) To create an environment for continuous learning and improvement
- 3) Initiate innovative resource mobilization approaches for the sustainability of HEPS-Uganda
- 4) Enhance the capacity of partner CBOs to run their organizations and understand the issues of health rights, health responsibilities, access to medicines and advocacy.
- 5) Build media alliance at all levels.

Support Co-funding Organisation (CFA) to SPO

HIVOS' support extended to HEPS dates back to 2007, when the partnership between the organisations started. Fund disbursed to HEPS over the period the period 2007-2010 are shown in next table.

Table 3: HIVOS realised disbursements to HEPS 2007-2010

Year	Amounts (€)	Observations
2007	22,057	Actually disbursed ²¹
2008	20,946	Actually disbursed ²²
2009	1,305	Actually disbursed ²³
2010	62,180	Actually disbursed ²⁴
Total	107,118	

HIVOS supported from 2010 onwards HEPS in the project Promoting increased access to HIV/AIDS treatment among the poor and vulnerable people in Uganda (HIV/AIDS treatment campaign) under the Uganda Coalition for Access to Essential Medicines (UCAEM)²⁵; HIVOS continued this project support in 2011. Capacity development activities aiming at strengthening of HEPS' organisation in general were not done as an activity on its own, but within the context of this project . HIVOS supported the HEPS secretariat to improve coordination and network management skills in the area of HIV advocacy and treatment. The salary of UCAEM coordinator is 100% supported HIVOS; HIVOS also contributed to the salaries of other project staff. With this support from HIVOS, the HEPS secretariat developed a strategy for a central platform for advocacy on HIV programs, services and treatment. The role of this coordination entity is to verify advocacy issues and to create a platform for CSO deliberations in service a joint HIV advocacy agenda²⁶.

²⁰ GOAL issued a HEPS Capacity Building Plan April - December 2013 (19 March 2013), in which the areas Human Resources, Finance, Governance, Program development and delivery, Sustainability, Service development and delivery, and M&E were included; related to each area trainings/workshops and mentoring meetings, to which 2 GOAL experts contributed; they were during the 2nd half of 2013 part of HEPS office in Kampala.

²¹ See HEPS Annual Report 2008, p. 24

²² Op. Cit. p.24

²³ See HEPS Annual Report 2010, p. 26

²⁴ Op. Cit. p. 26

²⁵ OP. cit. p. 4

²⁶ Support sheet CFA HIVOS, June 2014

The next table shows the realised MFS2 disbursement by HIVOS over the period 2011 - 2014

Table 4: HIVOS realised MFS2 disbursements to HEPS 2011-2014²⁷

Year	Amounts (€)	Transfer data
2011	35,000	02-17-2011
2011	10,000	11-16-2011
2013	59,150	06-19-2013
2014	40,484	09-02-2014
2014	366	09-18-2014
Total	145,000	

and planned disbursements over the period 2011-2015. It should be noted that the provision of MFS2 funding was done within the continuation of the existing partnership between HEPS and HIVOS. For this reason it is not possible to distinguish between MFS2 and non-MFS2 funding within the year 2011.

Table 5: HEPS' realised & planned expenditures 2011-2015²⁸

mixed expenditures for programs and capacity development

Year	Amounts (€)	Observations
2011/2012	44,295	Actually expended ²⁹ ; € 9,295 not from MFS2 funds
2013	21,386	Estimated expenditures Project reduction of new AIDS infections
2014	48,618	Estimated expenditures Project reduction of new AIDS infections ³⁰
2015	30,706	Estimated expenditures Project reduction of new AIDS infections ³¹
Total	145,000	

Most of HEPS' expenditures were linked to project implementation (Project reduction of new AIDS infections under UCAEM) and not explicitly to the capacity development of HEPS. This counts for all the years of the period 2011-2015³². HIVOS' regional office in Nairobi monitored and coached HEPS' management of its programs over the year 2011, when the MFS2 funding started. Similar monitoring and coaching takes place with respect to the project Reduction of new AIDS infections.

In the baseline report Core Capability To Act and commit, Core Capability To Adapt and Self Renew, and Core Capability, and To Deliver on Development Objectives were equally targeted, however not intensively; the next table shows HIVOS' orientation towards HEPS' capacity development in 2012³³.

²⁷ According to reporting HIVOS provided on 06/10/2014

²⁸ HEPS Annual Reports 2011, 2011, 2013 (draft August 2014), data from HIVOS Head Office, Karel Chambille, Evaluation Manager (September 2014); applied exchange rate UGX 3,330 = € 1

²⁹ HEPS Annual Report 2011, p. 28

³⁰ HEPS-Uganda Annual Review and Work Plan Project Period: 01-07-2013 - 30- 11-2013 *Project Contributing to the Reduction of New HIV Infections (2013-15), January 13th 2013*, p.p. 13-14

³¹ Estimate 2015 based on earlier expenditures and HIVOS' total disbursements

³² It should be noted that the total the total budgeted amount of HIVOS' funding over the period 2009-2011 was € 375,358. The expenditure figures of HIVOS funding shown in the HEPS Annual Reports for 2009, 2010, and 2011 reflect a total of €107,780, which differs hugely the mentioned HIVOS budget over this period.

³³ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. p. 429-430

HIVOS' targeting core capabilities HEPS - Baseline report measurement

(1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	3
Improvement fund raising / diversification	
2. Adapt and self-renew	3
M&E quality and report writing improvement	
3. Deliver on development objectives	3
Social media training	
4. Relate to external stakeholders	2
Communication and networking capacity building	
5. Achieve coherence	2
General support through program officer Nairobi	

HIVOS' focus on the core capabilities on all core capabilities appears to be unchanged over the period June 2012 - June 2014. The HIVOS' funded project under UCAEM continued, as was the case in the previous years. The focus on all core capabilities was not intensive and was always in service of the implementation of the project. This also confirmed in HIVOS' periodic internal Capacity Assessments, which were done twice in 2013; in these assessments was clearly indicated that no specific attention to HEPS' core capabilities was given in HIVOS' support.³⁴

The next table shows the ratings with respect to HIVOS' orientation on HEPS' capacity development, based on given explanation.

HIVOS' targeting core capabilities HEPS - Endline report measurement

(1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	2
Improvement fund raising / diversification	
2. Adapt and self-renew	2
M&E quality and report writing improvement	
3. Deliver on development objectives	3
Social media training	
4. Relate to external stakeholders	2
Communication and networking capacity building	
5. Achieve coherence	2
General support through program officer Nairobi	

GOAL (<http://www.goal.ie/> see previous paragraph), however, was in 2013 very much focused on HEPS' capacity development. It issued a capacity development plan³⁵, in which the areas Human Resources, Finance, Governance, Program development and delivery, Sustainability, Service development and delivery, and M&E were included. Related to each area trainings/workshops and

³⁴ Internal Capacity Assessments of HEPS done by HIVOS; these assessments regard 12 questions with respect to the 5 core capabilities and 5 questions with respect to gender equity policy of the organisation and within the organisation

³⁵ HEPS Capacity Building Plan April - December 2013 (GOAL Uganda, 19 March 2013)

mentoring meetings were planned and carried. Two GOAL experts contributed to these sessions; they were during the 2nd half of 2013 part of HEPS office in Kampala.

Looking at the capacity development issues touched upon, and the activities thereof, the conclusion is that GOAL's intervention in 2013 mainly influenced the development of the core capabilities To act & commit, To Adapt & self renew, and To Deliver on development objectives. This made HIVOS role with the respect to these core capabilities of minor importance in general and much less to these core capabilities in specific. The baseline score on HIVOS' targeting capacity development is therefore lower in the endline of the evaluation.

Key features project

HIVOS' support to HEPS with MFS2 funds relates mainly to the Health Policy Advocacy (HPA) Program, the first of the three pillars of the Strategic Plan 2011-2015. HIVOS supported from 2010 onwards HEPS in the project Promoting increased access to HIV/AIDS treatment among the poor and vulnerable people in Uganda (HIV/AIDS treatment campaign) under the Uganda Coalition for Access to Essential Medicines (UCAEM)³⁶ and HIVOS continued this project support in 2011 and in 2012 budget neutrally at a slower pace. HIVOS' support to UCAEM through HEPS got a renewed basis with the start of the project *Contributing to the Reduction of New HIV Infections (2013-15)* over the period July 2013 - November 2015, which entirely funded from MFSII. The project addresses specifically new HIV infections, which is in view of the reporting on MDG achievements in Uganda, relevant with the observed reversed spread of HIV/AIDS in the country.

As mentioned before HIVOS, did not specifically target the HEPS' Systems Strengthening Programme, as this was mainly covered by GOAL. Also there is no direct focus on the Community Empowerment Programme (CEP) either, because of the concentration on the operations of UCAEM.

In this entire range of activities that HIVOS supports HEPS, capacity development as a distinct and separate activity on its own has a minor place. HIVOS is prepared to take up such capacity development approach, in case circumstances so dictate, but this is not expected on short notice.

³⁶ See Chapter 3 Profile of the SPO

4. DATA COLLECTION AND ANALYTICAL APPROACH

For putting up the baseline on capacity development for the SPO HEPS the evaluation tools are shortly explained. For the field research for the baseline and endline (follow up assessment) studies two special Research Manuals were written.³⁷

Background documents

For both the baseline as the endline initially on strategy, context and activities were studied and verified with concerned SPO (HEPS) and related CFA (HIVOS).

Focus groups/group interviews

Focus group interviews were held with HEPS' management and the important stakeholders for getting data on the organisations development and its working environment. In these interviews attention was given to the organisation's *Timeline* until the baseline year 2012, its *Theory of Change*, and the *Results Chain CFA - SPO - Target groups / stakeholders*. *Observation* of the SPO's office and working environment gives additional information about the SPO.

A complementary approach was followed in the fieldwork of the endline study that has taken place during the period March - July 2014; herein interview formats were used emphasising *key changes and wished changes* within the SPO, as seen by interviewees from the SPO personnel, from externals and from the supporting CFA.

Organisational self assessment

In the baseline as well as the endline organisational self assessments were done with respondents of the SPO; in the endline assessment was aimed at a participation of 30% of the respondents present in the baseline assessment³⁸; for HEPS this was 35.5%; the endline workshop has taken place on 24 March 2014. The same questionnaire covering 5 Core Capabilities and connected indicators with prompting questions was used, in order to facilitate comparability between the baseline and endline outcomes.

Outcomes of the self assessment in the baseline were related to all elements of *Focus groups/group interviews* for making up a *Synthesis scoring form* that is the basis for the evaluation of each core capability and its underlying aspects. After processing the *Synthesis scoring form* a debriefing feedback meeting with HEPS has taken place to discuss determining factors for the given scores. After these debriefing additional *self reporting* was requested from the respondents; they were asked to issue their remarks/comments on the synthesis scoring form. Final scoring and related explanations were given by the evaluators in a special feedback meeting on 28 September 2012 and peer reviewed.

Outcomes in the endline were related to interview findings (with HEPS personnel, externals, and HIVOS offices The Hague and Nairobi). Then endline scores were compared with baseline scores per

³⁷ Research Manual, Evaluation Study *Capacity development* of Southern partner organisations -Baseline - Uganda, Eric Kamphuis, Molenrij/Kampala: June/July 2012

Research Manual, Evaluation Study *Capacity development* of Southern partner organisations - Uganda -Endline, Eric Kamphuis Molenrij/Kampala: March /April 2014

³⁸ This proved to be possible in the case of HEPS, as the key persons in the organisation were still in place (see Profile SPO)

each core capability and their underlying aspects. Differences between these scores, reflecting changes in core capabilities and their underlying aspects over the period June 2012 - June 2014, were qualified in terms of 'improved', 'stable', or 'worsened'. These qualifications were generated by an Excel tool that was specially developed for this purpose; the tool generated endline scores per core capability and their underlying aspects, based on multiple choice answers on 64 questions; the other 18 questions regarded open requests for additional comments per different aspect/core capability and did not influence the scoring. The tool thus firstly determined endline scores per core capability and their underlying aspects and these scores were then related with the scores of the baseline study for getting the change qualifications³⁹. The change qualifications of the core capabilities and their underlying aspects were linked with an inventory of determining factors for these changes. This was done in workshop sessions and interviews; for HEPS change qualifications, determining factors and open comments provided in the questionnaire were captured in a workshop report and interview reports. The workshop report was reviewed in a special feedback meeting with HEPS on 28 August 2014; subsequently the workshop report was peer reviewed, and served as input for the evaluator's final assessment.

Observation forms

Regarding HEPS a detailed chronology of study/research activities was recorded on Observation forms. In the forms was also space for the researchers to make observations on the research process, the collected data, or the cooperation extended by HEPS and HIVOS as related CFA.

Reasons for choice of mentioned methods

Organisational assessments regard essentially interactive processes between the evaluated organisation and the evaluators. Taking a baseline does not only concern the handling of measurement tools, but also the triangulation of collected findings in interviews/focus groups. The followed approach is thus a mixture of two perspectives. Firstly: the application of survey research and feedback, and secondly: the strong attention for people working in organisations that face changes. For that reason data gathering through a questionnaire and self-assessment went hand in hand.

Respecting the two perspectives simultaneously means that research techniques like Difference-in-Differences are not applicable in this assessment framework. Factors influencing organisational development are complex and multidimensional and cannot be captured in the 5C research within the timeframe given.

Organisational assessments combine different measuring and observation methods as mentioned above with assessment based on expertise in the area of organisational development. Difference-in-Differences and Randomized Controlled Trial (randomized assignment) for example can hardly be matched with such combination.

³⁹ The scores of the baseline study were in 2012 not made up by means of this tool; the final scores were then determined by putting up the Synthesis scores. For consistency sake the original 2012 scores were reviewed with the Excel tool, in order to get a comparison between the baseline and endline scores on the same basis; in a view cases baseline scores had to be adapted; these adaptations were in general marginal. Through the review of the baseline scores with the Excel tool, both baseline and endline scores are given with one decimal.

The choice for the mentioned methods has implications for type of evidence the endline study can generate and consequently in what terms effectiveness of interventions can be qualified. The next table (The Evidence Ladder) gives an overview of the 4 possible levels of evidence, the related parameters of evidence / types of research, and hence the qualifications of the effectiveness of interventions⁴⁰.

Table 6: The Evidence Ladder

Levels of evidence	Parameter of evidence	Types of research	Effectiveness of interventions
4. Causal	As in 1, 2, and 3, but there is now sound and substantial evidence that the outcome is caused by the intervention and/or clear evidence showing which ingredients of the intervention are responsible for the outcome.	<ul style="list-style-type: none"> • Randomised Control Trial • Repeated case studies (N=1 designs) 	Efficacious
3. Indicative	As in 1 and 2, but it has now been demonstrated that the intervention clearly leads to the desired outcomes (e.g. goals are attained, target problems decrease, competencies increase, clients are satisfied).	<ul style="list-style-type: none"> • Quasi-experimental studies • Theory of Change studies • Norm referenced approaches • Benchmark studies • Client satisfaction studies • Goal attainment studies • Quality assurance studies 	Functional
2. Theoretical	As in 1, but the intervention now has a plausible rationale (i.e. a program theory) to explain why it should work with whom	<ul style="list-style-type: none"> • Reviews • Meta-analysis • Expert knowledge studies 	Plausible
1. Descriptive	The essential elements of the intervention (e.g. goals, target group, methods and activities, requirements) have been made explicit	<ul style="list-style-type: none"> • Descriptive studies • Observation studies • Analysis of documents • Conduct of interviews 	Potential

⁴⁰ This overview is based on the various 'ladders of evidence' that are in use in health research; the overview takes the realities of developmental research into account.

The approach followed in the capacity development component of the MFS2 regarding the Capacity development of Southern partner organisations is mainly related to the evidence level 'theoretical'. So the effectiveness of the interventions can the best be qualified as 'plausible'. The types of research related to the levels of evidence 1 and 2 (Descriptive and Theoretical) corresponds with the described earlier in this chapter.

The use of the 5 Core capabilities conceptual framework made it possible to compare baseline and endline scores of core capabilities and thus to reach to a certain extend the level of evidence 'indicative'. One should however realise that for the determination of the final score and the qualifications of capability changes interviews, workshops, and core group discussions were vital, besides observation studies. Time constraints made it also not possible to carry out a profound Theory of Change study or client satisfaction studies. Hence the capacity development study can the best generate plausible explanations of the effectiveness of researched interventions.

5. RESULTS

This chapter gives a descriptive analysis of the findings collected during the follow-up assessment (endline study) following the approach described in the previous chapter. The endline study generated scores per core capability and their underlying aspects that are based on scores per indicator. The comparison between baseline and endline scores are here not given at indicator level, as the scores on aspects underlying the core capabilities give sufficient insight in the major changes per each core capability⁴¹ and thus on the organisation's capacity development over the period June 2012 - June 2014 (i.e. baseline scoring and endline scoring periods). Per each aspect an explanation given on the finally assigned change qualifications, based on the change qualifications given, stemming from the questionnaires used in the organisational self assessment. If the difference between the baseline and endline scores was between -0.25 and + 0.25, the aspect change was qualified as "stable", if the difference was more than + 0.25, then the qualification was "improved", and if the difference was less than -0.25, the aspect change was qualified as "worsened". The final change qualifications, as set by the evaluator, take into account what emerged in the workshops, interviews, focus group meetings and the final feedback meeting with HEPS⁴². The baseline and endline scores are given with one decimal to make clear how the Change qualifications stemming from the questionnaires were given. After the explanations of the change qualifications per aspect an explanation is given on the overall change qualifications per entire core capability.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
1 Capability to act and commit	3.2	3.3	Stable	Improved
1a Level of effective leadership	3.3	3.3	Stable	Stable
1b Level of realistic strategic planning	3.1	3.3	Stable	Stable
1c Level of translation of strategy into operations	3.2	3.5	Improved	Improved
1d Level of staff capacity and motivation	2.9	3.1	Stable	Improved
1e Level of financial resource security	3.4	3.4	Stable	Improved
<p>1a. <i>Stable</i>: A new management structure with related new delegation of responsibilities was put in place; new positions of deputy director, financial officer, and human resources officer were installed; this enhanced effectiveness of leadership ; in interviews (June 2014) after the workshop of 24 March 2014 confirmed that this meant improvement in the course of 2014; Recruitment of this staff was done in line with the mid-term review by GOAL (see 1e) recommended recruitment of more staff, i.e. deputy director, finance advisor, and human resources officer; these improvements are very recent; now situation qualified as stable with the expectation that made changes will soon lead to increased effective leadership .</p> <p>1b <i>Stable</i>: Organisation has a 5-year Strategic Plan 2011-2015, on which annual workplans are based;</p>				

⁴¹ Detailed data at indicator level are captured in the Excel scoring tool and can be made available.

⁴² Initial data collection started with an organisational self assessment workshop on 24 March 2014; interviews were held in June/July 2014

the strategic plan is however overambitious and more can be done on the level of realistic strategy formulation. In addition the organisation had a 4-year funding strategic plan 2013-2014/2017-2018 formulated⁴³.

1c. *Improved*: A GOAL (see 1e) mid-term review was carried out (2013) advises on planning practices; regular staff meetings (i.e. Monday meetings) started+ these meetings were considered as very relevant; increased staff involvement in activity planning, clear timelines established with more emphasis on results instead of on processes, and weekly updates about planning fulfillment (2013); computerization in the finance department was realised (2013).

1d. *Improved*: Staff motivation better, because more opportunities for staff upgrading ; staff has been trained in advocacy, and research. Internal capacity building by senior staff mentoring junior staff; more managerial responsibilities and increased staff pay created better conditions for strengthened staff's commitment (2013); already improvement on these issues perceived (2014).

1e. *Improved*: Since 2012, funding opportunities in the health sector worsened. Some international funding organizations have set up local offices in Uganda; they responded to calls for proposals together with local organizations. As a result, fundraising has become more competitive (2013). Due to limited staff firstly no new funds were acquired and in the last few years the funding level for HEPS remained the same. But since March 2014, HEPS has secured more funding and 3 projects were acquired (see Chapter 2 Profile of the of Southern Partner Organisation -SPO-). Hence HEPS' funding situation changed since the MFS2 evaluation workshop on 24 March 2014 and therefore the first collected data on Level of financial security are out-dated; HEPS succeeded establishing partnerships with new organisations, relevant for its mission. Also here recent improvements with potential to lead to further financial security. Collective fundraising within HEPS organisation is pursued.

Overall score of the endline of the core capability to act and commit was similar to the baseline, but recent developments (June-July 2014) justify qualification 'Improved'.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
2 Capability to adapt and self-renew	2.6	2.9	Improved	Improved
2a Level of effective application of M&E	2.3	2.7	Improved	Improved
2b Level of strategic use of M&E	2.3	2.6	Improved	Improved
2c Level of openness to strategic learning	2.8	3.1	Improved	Improved
2d Level of context awareness	3.1	3.3	Stable	Stable

2a. *Improved*: HEPS improved on M&E recently (now 2 GOAL staff members at HEPS office for mentoring M&E and organizational procedures for projects); the need to improve the M&E system is

⁴³ Fund Development Strategy 2013/14-2017/18, Denis Kibira, Kampala , Uganda , 5/2 8/2013

recognized and agreed; partnership with GOAL seen as essential for this upon by all HEPS staff (2014). Conditions for improvement clearly present, but need sound follow-up: qualification Improved has to prove itself in coming year.

2b. *Improved*: HEPS has entered a partnership with GOAL Uganda that has a very good M &E system; despite this more work is required to establish an effective and functional M&E system within HEPS. This person will go for orientation in M&E with EASUN⁴⁴ (2014). Conditions for improvement clearly present, but need sound follow-up: qualification Improved has to prove itself in coming year.

2c. *Improved*: Weekly monitoring and staff reflection meetings held to share weekly achievements and to structure/harmonise weekly workplans, to share ideas on the way forward, in which openness to learn is central (2013); exchanges of different tasks in the organisation; staff stimulated to open up more as a way of learning from mistakes resulting in improved ability to identify weak areas in the organisation (regarding finance system; accountability, resource utilization and prioritization of budget items (2013); M&E, and financial management still seen as areas for further improvement.

2d. *Stable*: There is a good link between key stakeholders & public, which is due to the clear awareness of the organisation; however more evidence is needed about the relationship between CSOs and government; for this documentation procedures for community activities are in progress (2014); HEPS staff was already trained in these procedures (2013).

Overall score of core capability to adapt and self renew is Improved, however the improvements in the aspects 2a, 2b and 2c are very recent and need to become an integral part of HEPS. Better conditions are created but should be materialised in improved M&E and financial management practices.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
3 Capability to deliver on development objectives	2.8	2.7	Stable	Stable
3a Extend to which organization delivers on planned products and services	2.8	2.8	Stable	Stable
3b Extent to which delivered products and services are relevant for target population in terms of the effect they have	2.6	2.9	Improved	Improved
3c Level of work efficiency	2.9	2.4	Worsened	Worsened

3a. *Stable*: Delivery on planned products and services improved, due to recovery from effects of lost funding for 2 projects (2012) that occurred in 2014 (see 1e); there was a drop in overall performance,

⁴⁴EASUN: a Tanzania (Arusha)-based organisation involved in Organisational Development (transformational leadership - leadership skills, intercultural skills, piloting with CBO's. (<http://www.easun-tz.org>)

due to the weak finance base that inhibited implementation of planned activities. HEPS has negotiated contribution from local stakeholders: with districts to provide resources like office space and land; the Kiboga and Mbarara districts have provided office space; one sub-county in Mbarara district has committed land to HEPS (2013). The of regional offices in Kiboga, Palisa and Lira districts were strengthening; a fourth office was opened in Mbarara (by March 2014).

3b. *Improved*: Not HEPS itself, but HEPS partners deliver directly to target groups; delivery depends much on the coordination between HEPS partners. HEPS does not fund its partners' activities itself; therefore HEPS cannot be held directly accountable for the quality of delivery, but HEPS is more accountable for strengthening these partnerships. Target population appreciates effects of products and services delivered by HEPS partners; HEPS' documentation on these effects was however weak during the baseline ; now documentation on outcomes in process of improvement (a/o through working with randomised control trials)(2014). In general HEPS has improved its sensitisation of communities for better access to essential medicines (focus on increased demand for better health services and more community participation - in Districts of Bugiri, Kamuli, Mbarara, Lira-, on increased demand for medicines from accredited drug shops -Kamuli District-, on misuse of medicines and on fair treatment of patients).

3c. *Worsened*: HEPS does not use input/output ratio for measuring efficiency, because HEPS considers itself as an advocacy organisation, for which efficiency measuring is per definition is problematic; hence HEPS did not give priority to develop a clear notion how to measure efficiency. The organisation claims however that changes in financial/accounting system were beneficial for efficiency. (shift from Tally to Quickbooks accounting Tool (software), because Quick books is more user friendly for handling of accounts for NGOs).

The improvements in the aspects 3a and 3b are very recent, and the level of working efficiency is lagging behind; therefore the overall qualification for core capability To deliver on development objectives is established at Stable; The recovery from a reduced staff situation is very recent and the improvement of outcome documentation underway; the organisation's efficiency deserves special attention.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
4 Capability to relate	3.7	3.7	Stable	Stable
4a Level of involving external parties in internal policy/strategy development	3.5	3.5	Stable	Stable
4b Level of engagement of organisation in networks, alliances and collaborative efforts	4.0	4.0	Stable	Improved
4c Extent to which organisation is actively engaging with target groups	3.5	3.5	Stable	Stable
4d Level of effective relationships within the organization	3.6	3.8	Stable	Stable

4a. *Stable*: HEPS maintains its scores on core capability to relate both in the baseline and endline, because HEPS as membership organisation represents a strong network in itself (2012); HEPS' membership is based on issues of common interest, such as for example the homosexuality bill, the industrial relations bill, and also access to medicine, or fair drugs prices.

4b. *Improved*: The baseline score looks at least 0.2 too high, therefore the qualification "improved" is justified; Since 2012, seven new organizations became members of HEPS and regional coalitions were set up. HEPS membership grew from 33 in 2012 to 40 in 2014 (2014)⁴⁵. Increased partnerships with national and international NGO's were also established (see also 1e). HEPS has partnerships with PATH, Reproductive Health Supplies Coalition, RTI-GAP, Research Triangle Institute (RTI), Clinton Foundation⁴⁶ and USAID (from 2013-2014 and on-going). Improved, as well as increased partnerships & collaborating activities with other organizations at national level were established, also due concerns related to controversial health bills (2012). HEPS convened 15 civil society coalition planning and strategizing meetings for the Uganda Coalition for Access to Essential Medicines (UCAEM) in 2013. For this a joint coalition advocacy and communication strategy was established (2013)⁴⁷.

4c. *Stable*: HEPS increased its communications within the network through the setup of Google groups. This made expansion of membership of the HEPS Network is possible; HEPS focuses on coordination of its partners, while the member organisations take the lead on specific issues of their interest. HEPS provides their partners information on study findings within the framework of its Health Policy Advocacy (HPA) Program (2013)⁴⁸, but is however not in direct contact with the primary target groups.

4d. *Stable*: Better is here to speak of "slightly improved", but not of "improved" : With the three new management positions internal organisational processes enhanced by improved effectiveness in HEPS role as coordinator of partner networks (2013-2014). HEPS has dedicated staff for advocacy & networking; this was enabled by promotion of some staff members (2013). The enlarged staff (2014) could better deal with the increased number of members; the recently enlarged staff and improved organisational setup (see 1a) both created good conditions for transparent internal relations; majority of the staff consider internal relations as effective.

Overall score of the core capability To relate is now established at Stable, but there are clear indications that the situation has slightly improved in the areas of the aspects 4a 4b, and 4d. It is expected that these improvements will lead to an increased capability to relate in the near future.

⁴⁵ The increased membership did not considerably strengthen HEPS' financial situation: in 2011 about € 480 was generated (see HEPS Annual Report 2011, p. 28) and in 2012 about € 435 (see HEPS Annual Report 2012, p. 18)

⁴⁶ <https://www.clintonfoundation.org/>

⁴⁷ HEPS UGANDA Coalition for Health Promotion and Social Development Annual Report 2013, Draft August 2014, p. 11

⁴⁸ 7 studies carried out within HEALTH POLICY ADVOCACY (HPA) PROGRAM; it concerned the themes: Cost and availability of medicines; Medicines access in hard to reach areas, disease specific studies included; Medicines and diagnostics for HIV/AIDS, TB, Malaria and Reproductive Health; Social determinants of health in urban health divide; Consumer satisfaction on services offered in public health facilities; and Analysis of human resource for health. See: HEPS UGANDA Coalition for Health Promotion and Social Development Annual Report 2013, Draft August 2014, p. 4

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
5 Capability to achieve coherence	3.7	3.5	Stable	Stable
5a Existence of mechanisms for coherence	3.9	3.5	Worsened	Stable
5b Level of coherence of various efforts of organization	3.5	3.6	Stable	Stable

5a. *Stable*: At the time of the baseline, HEPS has introduced their policy documents, including a Human Resource Manual, Gender Policy document and an e-system for financial management (see also 3c). A review of Staff ToRs and Internal Rules & Regulations was done (2012); Review of organization policy documents carried out and established and for membership guidelines and HEPS' constitution were developed (October 2013).

HEPS and their members have become more visible through coherent branding of the organisation, but there is still need for a marketing strategy for HEPS ; since HEPS is a coalition, all logos are put on all common documents (2012). Since the MFS2 evaluation workshop of 24 March 2014 changes occurred: within new communication strategy funded by HIVOS– HEPS website was upgraded, with Facebook page, Twitter, quarterly newsletter (mid-2014). The lower endline score does not reflect the actual situation (mid 2014).

5b. *Stable*: Here also the lower endline score does not reflect the actual situation (mid 2014) for the same reason. HEPS stated to hold regular staff meetings and to share information. All staff received financial training on how to use the electronic financial management system. Conditions for synergies have certainly improved, but clear examples of synergies within the organisation were not observed. Improved conditions for synergies are likely effective in near future (with support from GOAL)(mid 2014).

Part of the improvements in the aspects 5a and 5b are very recent; therefore the overall qualification for core capability To achieve coherence is established at Stable. The baseline score related to aspect 5a can be concerned as too high in retrospect after analysing what has happened in the organisation over the period 2012-2014. HEPS' staff was therefore understandingly not agreeing with the qualifications worsened for aspect 5a.

6. DISCUSSION

Followed CFA-SPO approach related to the findings

The general overview of the results shows that HEPS has made steps in its capacity development, but that these steps are better revealed at aspect level, as is shown in Chapter 5. The next core capability table shows only changes at core capability level.

Core capability	Baseline	Endline	Final change qualification
1 To act and commit	3.2	3.3	Improved
2 To adapt and self-renew	2.6	2.9	Improved
3 To deliver on development objectives	2.8	2.7	Stable
4 To relate	3.7	3.7	Stable
5 To achieve coherence	3.7	3.5	Stable

Especially for core capability 1 clear progress was observed, due the clear effects of the capacity development interventions by GOAL from the beginning of 2014 onwards (recruitment of new key personnel in 2014 -see Chapter 5 under core capability 1- 1a and 1e). In the baseline report was indicated that HEPS has a deliberate policy to improve its own capacities, which an integral part of the Strategic Plan 2011-2015 (see Chapter 3 under *Profile Southern Partner Organisation (SPO)*, especially Systems strengthening). The endline assessment showed that this orientation remained equally strong, in spite of the financial deficits in the 2012, and the then difficult funding situation of the organisation. In the meantime there were issues in the area of financial management to overcome, which were successfully tackled in the course of 2014.

The positive change in the core capabilities 1, and 2 look really present; for core capability 3 the picture is mixed under its general qualification of Stable; the score for core capability 4 looks realistic, as the organisation continued its practice in attracting new partnerships and also to increase its number of members from 33 (2012) to 40 (2014)(Chapter 5 under core capability 4- 4a, 4b, 4c, and 4d). The income from its membership remained however small, as compared to incomes from donor funding.

Especially in the course of the 2nd half of 2013 and 2014 HEPS' coherence remained stable, but with a clear indication that conditions have been established for further improvement (see Chapter 5 core capability 5 -5a).

The changes in the core capabilities 1, 2 and 3 could increasingly be attributed to GOAL's support and related interventions; the change in core capability 4 was mainly the result of HEPS' own efforts. HIVOS' support remained, but had even a lesser focus on capacity development than before. Its contribution has a clear focus on HEPS' involvement in UCAEM's secretariat, with now an explicit emphasis on the reduction of new HIV Infections.

Recommendations

For the remaining period of HIVOS' support to HEPS with MFS2 funds there are no signals that a change in focus on capacity development is expected. With GOAL's contributions in this area in place, a possible change would carry confusion.

HIVOS' current approach can thus be maintained, under the condition that possible capacity development interventions complement the contributions by GOAL in this respect. This requires clear exchanges between HEPS, HIVOS and GOAL on capacity development issues at hand.

The way HIVOS has supported HEPS since 2011, showed a decreased on capacity development. HEPS' organisational capacity already appears strengthened, and there is clear potential for an accelerated development. In the current setup with other development partners, *HIVOS is recommended to continue its involvement in HEPS, and is additionally recommended to seek how it can complement to capacity development efforts of other development partners besides GOAL (government, other donors, other CSO's).*

Remarks on evaluation approach

The evaluation of HEPS' capacity development itself, especially concerning the impact of HIVOS' support can benefit from more detailed budget and expenditures data (earmarked per focused capacity development activity), better recording of outputs and envisaged outcomes. HEPS' reporting on program/project activity progress needs to be further developed in line with new M&E tools to be introduced; hopefully the GOAL and EASUN (see Chapter 5 core capability 2 -2b) inputs will work beneficial for HEPS.

The chosen qualitative approach to assess the capacity development of SPO's, as described in Chapter 3, appeared to work well. The use of capability scoring require a careful approach: scores can serve a comparison between baseline and endline outcomes, but this comparison needs to be thoroughly triangulated through interviews, focus group discussions, or joint analysis and verification workshops with stakeholders. In the current evaluation setup triangulation was an integral part of the evaluation, but to honour fully the requirements triangulation require more research time was needed; then the qualification of effectiveness of interventions can then be firmly plausible and to a certain extend functional⁴⁹.

⁴⁹ See Chapter 4: Table of levels of evidence

7. CONCLUSION

In this chapter conclusions are drawn with respect to the 3 evaluation questions of the MFS2 Evaluation Study Capacity Development of Southern Partner Organisations - Uganda, e.g.:

1. *What are the changes in partner organisations' capacity during the 2012–2014 period?*
2. *To what degree are the changes identified in partner capacity attributable to development interventions undertaken by the MFS II consortia (i.e. measuring effectiveness)?*
3. *What factors explain the findings drawn from the questions above?*

Changes in HEPS' capacity during the 2012–2014 period

Overall HEPS' organisation is in June 2014 in a better shape than it was in June 2012 with clear potential for further improvement. Its abilities related to implementation started to improve (Core capabilities 1 and 3), for its strategic orientation and related use of monitoring counts the same (Core capability 2), and its relation networks became stronger, and its organisational coherence stable (Core capabilities 4 and 5).

HIVOS' influence on identified changes

Changes in HEPS' capacity since June 2012 can only be attributed very partially to HIVOS' interventions thereafter. HIVOS' capacity development support was not structurally present, especially since mid- 2013. HIVOS explicitly focused on HEPS' involvement in the functioning of the secretariat of UCAEM. HEPS' capacity development changes can be attributed in the first place to GOAL; based on this support HEPS' organisational potential became stronger. It should be noted that HIVOS' funding of the personnel costs of the UCAEM secretariat made HEPS' capacity development more robust. It is not clear what amount from HIVOS spent on capacity development during the period June 2012-2014 can be detected. The realisation of the capacity development results through GOAL's interventions (in accordance with their capacity development plan) are not part of this evaluation.

Explaining factors to identified changes

HIVOS' support to HEPS contributes certainly to the organisation's profile in the area of health policy advocacy; the fact that is concentrated on the occurrence of new HIV infections is important in this respect. Through this support HEPS is in a better position to attract new means for new operations within its mandate, as the Uganda Coalition for Access to Essential Medicines (UCAEM) provides valuable inroads for maintaining/strengthening relations with the government, (I)NGO's and the private sector.

Assessment project design

Previous considerations and observations normally result in an assessment of the project design. It should however be noted here again that HIVOS' interventions cannot be seen as a separate project; better is it to refer to programmatic interventions, which fall since 2013 under HIVOS' support to HEPS. *The assessment concerns this last type of support.* The next table serves for giving an assessment scores on 3 statements: The project was well designed , The project was implemented as designed , and The project reached all its objectives. As HIVOS did not specifically design an

intervention for HEPS' capacity development, and given GOAL's role in HEPS' capacity development, an assessment along the 3 statements, that concern only HIVOS' support, cannot be given.

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	n.a.
The project was implemented as designed	n.a.
The project reached all its objectives	n.a.

Capacity development of Southern partner organisations

TWAVEZA Uganda

Technical report on TWAVEZA Uganda's capacity development

1. INTRODUCTION

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Purpose and outline of technical report

The technical report about TWAVEZA regards one of the 8 studies on the capacity development of Southern Partner Organisations (SPOs) within the framework of the Joint MFSII evaluation at country level - Uganda; for the capacity development component of this evaluation 8 SPO's were selected. The report serves to give input to the overall joint evaluation report on MFSII funding to capacity development, in addition to the reporting on the other components of the joint evaluation i.e. Millennium Development Goals, and Civil Society Strengthening.

The technical report gives firstly, in Chapter 2 - Context, a description of the context, in which TWAVEZA operates, highlighting the main relevant political, economical, cultural and social issues with which the organisation has to deal in pursuance of its objectives; in these issues the East African perspective is leading. Chapter 3 - Project Description gives the profile of TWAVEZA e.g. its mission, vision, and strategic objectives, and budget indications; over the period 2009-2014 an estimated total amount of € 54,4 million (US\$ 68 million) is involved for the whole of TWAVEZA's organisation with a current staff of 42 persons (28 January 2015); for the Uganda Office there is the total of 10 staff member, of which 7 are junior and 3 senior (4 from TWAVEZA Uganda: 2 program staff and 2 supporting staff; from UWEZO Uganda: all 6 program staff, including the country coordinator).

The same chapter describes the development in the support of the Co-Funding Agency (CFA) e.g. HIVOS to TWAVEZA as well. The cooperation between HIVOS and TWAVEZA entails a long-term setup that started in 2009, in which HIVOS Tanzania hosts the TWAVEZA initiative for the years 2009 - 2014. Within this framework a roadmap for TWAVEZA's becoming independent is designed, in which HIVOS provides core funding for TWAVEZA with special attention to delegation and decentralisation within TWAVEZA's organisation, search for and appointment of TWAVEZA's new Head in 2014, addressing TWAVEZA's actual staff turnover and related needed human resources management, separation of roles between TWAVEZA and HIVOS Tanzania during the period of TWAVEZA starting with becoming an independent legal body in 2014 and ending with being a fully

regionalised/localised organisation with an independent Board in 2016, and HIVOS inputs to TWaweza's strategy beyond 2014.

Chapter 4 - Data collection and analytical approach gives attention to the methodological choice made: the capacity development study aims at giving plausible indications on the effectiveness of HIVOS' support to TWaweza, based on descriptive and theoretical evidence (the first two steps in the evidence ladder). Chapter 5 - Results gives the changes per core capability and their underlying aspects with explanations on the change qualifications per aspect. Chapter 6 - Discussion and Chapter 7 - Conclusion provide the findings of the analysis culminating in the conclusions with respect to the evaluation questions.

Brief summary of the analyses and the findings

In the study approach qualitative and quantitative research methods are combined. The approach is centred on the comparison between triangulated baseline data (2012) and triangulated follow-up (endline) data (2014). For this background documents were consulted, Focus groups/group interviews, workshops held, and organisational self assessments in 2012 and 2014 carried out, all resulting in 2 sets of capability scores. Endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, were qualified in terms of 'improved', 'stable', or 'worsened'. The qualifications and their reasons were peer reviewed in a workshop.

All core capabilities appeared to be stable since 2012, but at the level of aspects underlying each core capability changes did occur. HIVOS' heavy focus on Core capability To act and commit did essentially not change; this counts also for its focus on the core capabilities To adapt & self renew, To relate, and To achieve coherence. On Core capability To deliver on development objectives special concern is expressed, because over the years 2011, 2012, and 2013 mention is made of ambitious budgeting and low expenditure levels at the same time.

The choice made by HIVOS to focus on the roadmap towards TWaweza's independence is consistent, but a too limited approach in view of the mismatch between the organisation's ambitions, as translated in plans/budgets and its actual implementation/expenditures. *Given the organisation's sound donor base, it is strongly recommended to HIVOS Tanzania - TWaweza to put up a new Strategic Plan, in which the mismatch between ambitions and realisations is firmly addressed and hence will lead to an improvement of its Core capability To deliver on development objectives. This regards a common responsibility of HIVOS and TWaweza, given the long-term trajectory these organisations has entered since 2009.*

In the assessment of the project design¹ the statements The project was well designed , The project was implemented as designed , and The project reached all its objectives were rated respectively with 7, 7, and 5 (out of 10).

¹ See *Assessment project design* on pp. 28-29 of this report: 'HIVOS' contribution was not defined as a separate project, but the chosen governance setup and related roadmap to TWaweza's independence can very well be considered as a separate and original project, which cannot be defined in terms of a traditional donor recipient relationship'.

2. CONTEXT

In 1967 Uganda, Tanzania and Kenya founded the East African Community (EAC) with the intention to become a federation. Its objective was to strengthen economic, trade and industrial ties between the three countries. This included a common excise tariff, no internal tariffs, and the establishment of an East African development Bank. Intentional arrangements for the establishment of a common market were to come in operation as also a common assembly and various institutions for common public services (harbors, telecommunication, post, airways).² Little progress was made; the EAC collapsed in 1977, to general satisfaction of Kenya, which considered to carry the other two countries.

In 1999, however, the project was revived. In 2007 it even expanded to include Burundi and Rwanda. Actually many still doubt whether a such federation could be achieved in the region, despite the EAC's promise to create a single currency by 2015 and to have a customs union in place and working. As it looks now recent developments make further integration more likely. Tanzania looks more positively to the idea, whereas Kenya and Uganda were since longer time supporting East African integration. Local business communities are still skeptical. They argue that the EAC's dream of federation could be hampered by trade conflicts, tribal violence or obstructed by bureaucracy and political moves.³

The political systems of the two original EAC countries Tanzania and Uganda are since 2005 oriented on becoming multiparty democracies, each at its own speed. In Kenya the actual functioning multiparty system was experiencing heavy pressure during the post election violence of 2007. Nevertheless the East African Community (Burundi, Kenya, Rwanda, Tanzania, Uganda) has achieved strong economic growth since 2005. The EAC has grown noticeably faster than the rest of Sub Sahara Africa: an annual per capita growth averaging close to 4 percent over the past 6 years since 2011 meant an episode of growth acceleration.⁴ This boost in economic growth was a fulfilment of one the objectives of the EAC: "attainment of sustainable growth and development of the Partner States".⁵ With regard to another objective "the promotion of people-centred mutual development", the picture is less clear: questions regarding the place of citizens in their societies, their opportunities for advancement and participation in decisions in new developments still need answering. With this orientation civil society organisations unified themselves in 2006 under the East African Civil Society Organizations' Forum as umbrella body of all Non-Governmental Organizations (NGOs) and CSOs in East Africa. The primary objective of the organisation is to build a critical mass of knowledgeable and empowered civil society in the region, in order to foster their confidence and capacity in articulating grassroots needs and interests to the EAC, and its various organs, institutions and agencies.⁶

TWaweza and the Society for International Development (SID) released findings in a research brief titled 'Let's build one house! What Tanzanians think about the East African Community': Eight out of ten citizens (80%) think Tanzania should remain in the East African Community (EAC). In addition, nine out of ten (85%) approve (or strongly approve) of greater integration with Kenya and Uganda in

² Africa, A Modern History, Guy Arnold, pp. 264/265

³ The Economist, 3 September 2009 (<http://www.economist.com/node/14376512>)

⁴ IMF Regional Economic Outlook, Sub Sahara Africa, Recovery and New Risks, April 2011, p. 51

⁵ EAC Development Strategy (2011/12 – 2015/16), Deepening and accelerating Integration, August 2011, p. 14

⁶ <http://eacsof.net/>

particular. Six out of ten citizens also support increased integration with Rwanda (62%) and Burundi (59%).⁷

TWAVEZA as civil society organisation that attaches much importance to the voice of the citizen, shares this East African orientation with a clear focus on the countries Tanzania, Kenya and Uganda. The organisation has carried out country assessments in these countries and formulated in its situational analysis⁸ important issues regarding the possibilities for sustainable change driven by the actions of motivated citizens.⁹

According to the analysis citizens of all three countries do not view government as its representative voice –both at national and local levels – and rarely turn to it for practical help. In contrast, government appears to often be seen as corrupt, violent or uninterested. Low quality of governmental services and lacking accountability on this contributed to this disconnection, even in spite of a huge expansion of the size of these services. At the same time the growing demands on government performance have put a larger pressure on scrutiny of tax collection, the allocation and use of public funds. Increasingly attention is given to tracking the reach and use of revenues and expenditures, as well as their efficacy of utilisation and the question whether the citizen gets value for money.

The growth of mass media and fast spread of communication facilities (internet, mobile phones) opens up new opportunities for information gathering, for individual and group exchanges while establishing new networks simultaneously to tackle issues of socio-economic and political importance.¹⁰ This has become increasingly important in a political environment, where the credibility of political systems and their incumbents have come under more public pressure¹¹.

HIVOS supports TWAVEZA in its broad and East Africa oriented approach with MFS2 funds.

⁷ The brief is based on data from Sauti za Wananchi, Africa's first nationally representative high-frequency mobile phone survey that interviews households across Mainland Tanzania. Data were collected in August 2014; see also <http://www.twaweza.org/go/sauti-integration-en>

⁸ Country assessments were undertaken in Tanzania, Uganda and Kenya in early to mid 2008, jointly by the Hewlett Foundation, the International Budget Partnership (IBP) and HIVOS.

⁹ TWAVEZA Strategy 2011-2014, Revised draft 26 August 2011, pp. 3-9

¹⁰ "The power of these communications technologies can be most felt when the broad reach of mass media and the individualized versatility of mobile phones come together in forming a new 'media ecology'", see TWAVEZA Strategy 2011-2014, Revised draft 26 August 2011, p. 6

¹¹ TWAVEZA Strategy 2011-2014, Revised draft 26 August 2011, pp. 7-8

3. PROJECT DESCRIPTION

Profile Southern Partner Organisation (SPO)

TWAVEZA ('make it happen' in Kiswahili) was established in 2009 as a citizen-centred initiative, that focuses on large-scale change in East Africa through bottom-up action. In this the organisation aims at facilitating access to information for large amounts of people, that is relevant for them to make well-considered decisions. 'The principal activity of TWAVEZA is the promotion of access to information and expanded space for public action among citizens across East Africa, through information sharing, brokering new partnerships, learning and communication with a specific focus on improving service delivery.¹² Therefore TWAVEZA works to provide practical information to everyone, to foster quality independent media and citizen monitoring services.¹³ The organisation emphasises that citizens of East Africa can bring about change themselves, instead of waiting for actions by governments, politicians, donors, or NGO's¹⁴. TWAVEZA works to foster what it calls an 'ecosystem of change,' through building on, as well as triggering, the actions of citizens to make a difference. To this end TWAVEZA focuses on three core areas:

- Brokering partnerships,
- UWAZI, and
- Learning and communication.

TWAVEZA is active in Brokering partnerships in connection with regional integration i.e. East African Community (EAC), or in linking up with initiatives like the Open Government Partnership (OGP), which was launched in 2011¹⁵. Besides that TWAVEZA brokers partnerships within the countries of its operation (i.e. Tanzania, Kenya, Uganda) with teachers unions, religious organisations, media partners, and partners in the areas of education, water, and health.

UWAZI ('openness' in Kiswahili)¹⁶ aims at enabling key actors to have access to timely, reliable, relevant and easy to understand information and analyses which enhance public debate and accountability, and that contribute to citizen involvement and action ('a one-stop information shop'). UWAZI serves two primary audiences; i.e. it provides information and analytical support to TWAVEZA's partners in the country programs. And it serves to better inform key actors in society whose actions have a significant influence on public wellbeing (i.e. members of parliament, media editors and journalists, civil society leaders and academicians, and development partners).

TWAVEZA's core area *Learning and communication* seeks critical inquiry, reflection and adaptation within the initiative, informed by feedback between different components of the organisation's

¹² See HIVOS Tanzania - Twaweza Reports and Financial Statements 31 December 2013, p. 2; Financial Statements were audited by Ernst & Young, as was also the case for the years falling the evaluation period i.e. 2011 and 2012

¹³ See <http://twaweza.org/go/what-is-twaweza>

¹⁴ TWAVEZA departs from the ideal of the coming about of an open, just, and democratic society; the organisation's approach is based on the experiences of HakiElimu, a civil society organization that was established in 2001. Its vision is to see an open, just and democratic Tanzania, where all people enjoy the right to education that promotes equity, creativity and critical thinking. HakiElimu employs human-rights based approaches to education, emphasizing quality of learning, equity, governance and active citizen engagement (<http://www.hakielimu.org/>)

¹⁵ OGP has grown from eight to 65 participating countries, and from a handful of founding civil society leaders to hundreds of organizations engaged in OGP around the world. OGP countries have made over 2,000 open government reform commitments as part of 87 National Action Plans. See: <http://www.opengovpartnership.org/blog/open-government-partnership/2014/09/24/outcome-statement-ogp-high-level-event-citizen-action#sthash.qI8z7xc0.dpuf>

¹⁶ <http://twaweza.org/go/uwazi>

work, while pursuing effective communication externally as well as internally. Three main components are distinguished in this area: monitoring, independent evaluations, staff and partner learning¹⁷.

The *UWEZO* ('capability' in Kiswahili) initiative is part of the *TWAVEZA* organisation; *TWAVEZA*'s Strategic Plan 2011-2014 states that *UWEZO* will be established as an independent legal entity by 2014. It supports a 'citizen movement based' approach to assessing literacy and numeracy levels in East Africa. *UWEZO* is engaged in monitoring basic literacy and numeracy levels of children aged 5-16 years across at least 50% of the districts in Kenya, Tanzania and Uganda through a household-based surveys.¹⁸ It starts from the basic question: 'Are Our Children Learning?' *UWEZO* is now still an integral part of the *TWAVEZA* organisation; currently *TWAVEZA* strategic partnerships are shifted to *UWEZO*, where this is opportune, given *UWEZO*'s mandate.

TWAVEZA has country offices in Tanzania, Kenya, and Uganda; for the MFS2 evaluation the Uganda office is the focal unit of analysis and is strictly speaking the SPO under analysis. The organisation's head office operates from Dar-Es-Salaam, Tanzania and hosts the first layer of managers of the organisation. The organogram of *TWAVEZA* shows that its organisation is structured along its core areas i.e. (1) regional/country programs, (2) *UWAZI*, (3) Learning, monitoring & evaluation, and communications, and in addition to that the different areas/ services: (4) strategic engagement, (5) Research, (6) Operations & Finance, and (7) *UWEZO*; for each area a regional manager is responsible and operating under *TWAVEZA*'s Head, and *HIVOS*' Board of Directors that is advised by the Advisory Board, consisting of 8 persons nominated *à titre personnel*. Hence from Dar-es-Salaam operate 7 regional managers that have their own functional contacts with each country office (on programming, finance, research, *UWEZO*¹⁹, etc.)²⁰.

The Uganda program is the smallest of the three country programs, which is reflected in the size of the program (strategic partnerships), the budget as also number of staff members the organisation hosts: the head office in Tanzania employs in 2014 31 staff, the Kenya office 10 staff, and the Uganda office also 10 staff²¹. Out of these 10 staff members in the Uganda Office, 4 are from *TWAVEZA* and 6 from *UWEZO*. The *TWAVEZA* staff has 2 seniors and 2 juniors, and the *UWEZO* staff 2 seniors and 4 juniors. Currently the Uganda office has the following staffing profile: 1 Country coordinator (*UWEZO*), 1 Program Officer (*TWAVEZA*), 1 Country accountant (*TWAVEZA*), 2 Assistant Communications Officer / Program Assistant Communications (*UWEZO*), 1 Program Officer (*UWEZO*), 1 Assistant Programs Officer Research (*UWEZO*), 1 Program Assistant (*UWEZO*), 1 Assistant Officer Learning, Monitoring & Evaluation (*TWAVEZA*), and 1 Admin Assistant (*TWAVEZA*). The office works as an integrated unit, in spite of reporting to different regional managers in Dar-Es-Salaam.

¹⁷ <http://twaweza.org/go/learning>

¹⁸ <http://www.uwezo.net/>

¹⁹ For example: The *UWEZO* Country Coordinators in each of the three East African countries report to the Regional Manager of *UWEZO*, who in turn reports to the Head of *TWAVEZA*.

²⁰ <http://twaweza.org/uploads/files/Twaweza%20Organizational%20Chart-%20October%2011014gs.pdf>

²¹ The staff size of *TWAVEZA/UWEZO* is 10; 4 staff members are attached to *TWAVEZA* and 6 to *UWEZO*. *UWEZO* staff members are reporting to the *UWEZO* regional manager in Dar-Es-Salaam and *TWAVEZA* staff members to the Regional Programs Manager.

The next table gives an overview of the budgets for the entire TWAVEZA organisation for the years 2012, 2013, and 2014, which falls within the evaluation period of the MFS2 evaluation (June 2012 - June 2014).

Table 1: Budgets TWAVEZA 2012, 2013 & 2014 in €²²²³

	2012		2013		2014	
	€	%	€	%	€	%
Strategic partnerships						
Tanzania Core Programs	2,408,000	19%	3,188,600	24%	1,204,400	11%
Kenya Core Programs	2,664,000	21%	1,408,000	11%	688,800	7%
Uganda Core Programs	1,815,200	15%	1,039,200	8%	774,400	7%
Total strategic partnerships	6,887,200	55%	5,635,800	42%	2,667,600	25%
TWAVEZA Programs						
Experimental interventions	308,000	2%	2,123,120	16%	2,443,612	23%
Uwazi	1,190,160	10%	164,870	1%	294,272	3%
Strategic engagement	109,600	1%	335,600	3%	294,080	3%
Posit Deviance Lab/Stories of change			-		90,400	1%
Learning, Monitoring & Evaluation	1,198,400	10%	1,135,680	9%	1,366,400	13%
Communications/Public Engagement	256,800	2%	1,161,680	9%	631,369	6%
Temporary staff costs	48,000					
Governance and Management	394,400	3%	421,200	3%	523,120	5%
Total TWAVEZA Programs	10,392,000	83%	10,977,950	82%	8,310,853	78%
Staff and operations	1,905,855	15%	2,216,320	17%	1,761,256	17%
Assets/equipment	116,950	1%	74,000	1%	444,061	4%
Total operations and assets	2,022,815	16%	2,290,320	17%	2,205,317	21%
Contingency	80,000	1%	80,000	1%	80,000	1%
Totals	12,494,815	100%	13,348,270	100%	10,596,170	100%

The budgets over the years 2012, 2013, and 2014 show in the first place growth and then a clear reduction in the budget totals. Secondly is observed that a distinct shift from attention for country core programs to Experimental Interventions came about, and thirdly that the relative importance of Staff and operation costs increased up to 2013, as also fourthly the budget for Governance/ Management. And fifthly the budget for Learning, Monitoring & Evaluation has also relatively increased.

The next table displays TWAVEZA's actual expenditures over the years 2012, and 2013, based on TWAVEZA's Reporting and audited Financial statements for those years.

²² TWAVEZA Annual Plan 2012, p. 10; TWAVEZA Annual Plan 2013, p. 11, and TWAVEZA Annual Plan 2014, March 2014, p. 15; HIVOS Tanzania - TWAVEZA Reports and Financial Statement 31 December 2012, p. 20; HIVOS Tanzania - TWAVEZA Reports and Financial Statement 31 December 2013, p. 21; conversion rate US\$ 1.25 = € 1 applied by evaluator

²³ Please note that budget amounts in this table are for the years 2012 and 2013 based on the financial statements and not on the annual plans 2012 and 2013, because budgets were adapted in the course of each year of implementation; for the year 2014 no audited financial statement was published.

Table 2: TWaweza Budget against actual expenditures 2012 and 2013²⁴

Budget headings	2012			2013		
	Budget €	Expenditures €	%	Budget €	Expenditures €	%
Media Partners	1,472,800	875,286	59%	3,282,200	1,189,542	36%
Interaction ICT & Mobile phones	497,600	10,580	2%	448,000	14,357	3%
Fast Moving Consumer Goods Companies	588,000	39,686	7%	776,000	221,002	28%
Religious organisations	437,600	119	0%	408,000	51	0%
Teachers Unions	302,400	9,108	3%	200,000	5,451	3%
Monitoring acces to services	512,000	131,360	26%	152,000	61,050	40%
Education	400,000	330,008	83%	120,000	110,854	92%
Water	528,800	130,082	25%	122,400	133,955	109%
Health	712,000	379,226	53%	127,200	138,290	109%
Ni Sisi communication	1,436,000	1,224,130	85%			
Total Strategic partnerships (country programs)	6,887,200	3,129,586	45%	5,635,800	1,874,552	33%
Experimental intervention	308,000	262,444	85%	2,123,120	1,794,277	85%
Uwazi	1,189,600	423,614	36%	164,870	170,498	103%
Strategic engagement	109,600	68,816	63%	335,600	83,342	25%
Learning, monitoring and evaluation	1,198,400	344,582	29%	1,135,680	763,018	67%
Communication	256,800	47,027	18%	1,161,680	501,985	43%
Temporary staff costs	48,000	40,971	85%			
Governance/management	394,400	279,055	71%	421,200	346,588	82%
Total TWaweza program	10,392,000	4,596,094	44%	10,977,950	5,534,260	50%
Staff and operations	1,905,855	1,549,433	81%	2,216,320	1,774,544	80%
Asstes/equipment	116,960	79,448	68%	74,000	78,854	107%
Total operations and assets	2,022,815	1,628,881	81%	2,290,320	1,853,398	81%
Contingency	80,000	-	0%	80,000		0%
Gain on exchange		-35,302	-44%			
Grand total	12,494,815	6,189,673	50%	13,348,270	7,387,658	55%

US\$ 1.25= € 1

The overview shows that acquiring funding for TWaweza's programs was not a problem, but that the implementation of these programs was severely lagging behind, in spite of an increase in expenditures from 2012 to 2013. The trend of underspending was yet more visible in 2011, when the expenditures reached to 44% of the total budget for that year.²⁵ For the year 2011 was reported that

²⁴ HIVOS Tanzania - TWaweza Reports and Financial Statement 31 December 2012, p. 20; HIVOS Tanzania - TWaweza Reports and Financial Statement 31 December 2013, p. 21; conversion rate US\$ 1.25 = € 1

²⁵ HIVOS Tanzania - TWaweza Reports and Financial Statement 31 December 2011, p. 20

"2011 was a year of the glass half full and half empty".²⁶ This concerned mainly the contracting of less partners for program implementation and relations between partners ('ecosystem of partners').²⁷

For the Uganda Office this meant that in the course of 2013 less emphasis was given to strategic partnerships within Uganda in the areas of education, water, and health. Brokering partnerships in so many different areas exceeded the then existing staff capacity of the office. It was decided to concentrate on new partnerships and deepening of existing partnerships with media organisations. This implied that the budget for the Uganda Core Program was drastically reduced in absolute terms, but also relative to the total TWAVEZA yearly budgets.

The number of TWAVEZA staff was reduced from 5 staff members; 3 program staff and 2 supporting staff members in 2012 to 4 staff members in 2014 (2 program staff and 2 supporting staff members), without a TWAVEZA Country Coordinator. As UWEZO was running its own country office in Uganda as well, it was decided to merge the 2 offices under the responsibility of the Country Coordinator of UWEZO. This merging process was completed in the beginning of 2014; this has implications for assessing the outcomes of the capacity development endline, which is described in Chapter 5.

Support Co-funding Organisation (CFA) to SPO

The relation between HIVOS and TWAVEZA cannot be described in terms of a traditional donor-recipient relationship which is mostly occurring within the MFS2 program. HIVOS and TWAVEZA have set up a cooperation relationship, in which both organisations have agreed with each other to set out a path of development, where reciprocity is a keyword: TWAVEZA searches for new civil society initiatives and HIVOS for developing new roles as donor. To facilitate this intensive relation between HIVOS and TWAVEZA, it was agreed that HIVOS Tanzania would host the TWAVEZA initiative over the period 2009 - 2014. HIVOS Tanzania is a not for profit making company by guarantee and not having a share capital, registered under the Companies Act, 2002.

Since 2009 HIVOS Tanzania provided thus time and space for TWAVEZA's development; it actually continues housing the initiative, before it becomes fully independent by 2014. HIVOS Tanzania is thus the hosting company for TWAVEZA, as a ten year initiative to promote citizen involvement and public accountability in East Africa. For the period of the first five years (2009-2013) a budget of € 54.4 million (US\$ 68 million) would be available. This period was budget neutrally extended with one year: 2009-2014.²⁸ TWAVEZA employs per 28 January 2015 in total 42 staff members (i.e. in Tanzania -24-, Kenya -8-, and Uganda -10-).²⁹

The TWAVEZA initiative has funding agreements in place with HIVOS Netherlands³⁰, SNV Netherlands³¹, The Hewlett Foundation USA³², DFID Tanzania³³, Irish Aid³⁴, and SIDA Tanzania³⁵; the

²⁶ TWAVEZA Annual Report 2011, p. 2

²⁷ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. 471

²⁸ See HIVOS Tanzania - TWAVEZA Reports and Financial Statement 31 December 2011, p. 22 and HIVOS Tanzania - TWAVEZA Reports and Financial Statement 31 December 2013, p. 2

²⁹ <http://twaweza.org/go/staff>

³⁰ <http://www.hivos.nl/>

UWEZO initiative is not included in this arrangement. The following table shows the disbursements from these donors over the period 2010 - 2013. From 2012 AJWS³⁶ joined as a sixth donor to TWAVEZA.

Table 3: TWAVEZA: Funds from specific donors 2010 - 2013 in €³⁷

	2010		2011		2012		2013		All	
	€	%	€	%	€	%	€	%	€	%
DFID Tanzania	712,416	10%	2,378,768	27%	-	-	1,298,582	17%	4,389,766	16%
Hewlett Foundation	2,240,000	31%	-	-	800,000	22%	1,600,000	21%	4,640,000	17%
HIVOS Netherlands	762,600	11%	1,092,000	12%	1,031,600	28%	1,584,000	20%	4,470,200	16%
SNV Netherlands	1,680,000	23%	780,000	9%	1,560,000	42%	-	-	4,020,000	15%
Irish Aid	-	-	1,041,520	12%	-	-	-	-	1,041,520	4%
SIDA Tanzania	1,845,120	25%	3,591,600	40%	-	-	3,034,000	39%	8,470,720	31%
AJWS	-	-	-	-	280,000	8%	280,000	4%	560,000	2%
Totals	7,240,136	100%	8,883,888	100%	3,671,600	100%	7,796,582	100%	27,592,206	100%

US\$ 1.25 = € 1

The overview shows that a total of € 27,592,206 has been disbursed over the period 2010 - 2013. For the years 2012 and 2013 the total expenditures amount to € 13,577,331, against the funds transfers over the same years of € 11,468,182. The expenditures over this period could be covered with built up balances from previous donor transfers, on which an exchange gain of € 35,302 was realised in 2012 (see Table 3 in previous paragraph).

Over the period 2010 - 2013 SIDA Tanzania proved to be the largest donor, with the Hewlett Foundation in second place. HIVOS provides also substantial funds, but plays at the same time a key partner role in TWAVEZA's development. The next table shows the assessment of HIVOS' focus on TWAVEZA's capacity development done in the baseline for the MFS2 evaluation.³⁸

HIVOS' targeting capacity development- Baseline report measurement

(1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	5
Participation in board TWAVEZA, funding of salaries, improvement implementation capacity	
2. Adapt and self-renew	2
TWAVEZA took care of M&E and studies itself; little focus from HIVOS	
3. Deliver on development objectives	1
Strong focus organisation on capability; mutual learning TWAVEZA - HIVOS; no unilateral relationship	
4. Relate to external stakeholders	4
Budget priority to relate to external stakeholders; joint effort TWAVEZA and HIVOS	
5. Achieve coherence	3
Administrative/financial policies and accountability joint effort TWAVEZA and HIVOS	

³¹ <http://www.snvworld.org/>

³² <http://www.hewlett.org/>

³³ <https://www.gov.uk/government/world/organisations/dfid-tanzania>

³⁴ <https://www.irishaid.ie/>

³⁵ <http://www.sida.se/English/where-we-work/Africa/Tanzania/Our-work-in-Tanzania/>

³⁶ <http://ajws.org/>

³⁷ See HIVOS Tanzania - TWAVEZA Reports and Financial Statement 31 December 2011, p. 18, HIVOS Tanzania - TWAVEZA Reports and Financial Statement 31 December 2013, p. 19

³⁸ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. 470

During the period June 2012 - June 2014 this focus appears not to be profoundly changed. Core capability 1 To act and commit still remains the most focused. For Core capability 2 To adapt and self renew HIVOS' focus has not changed either, because here TWAVEZA is clearly leading in its Learning, monitoring and evaluation activities/studies. This is a continuation of TWAVEZA's practice that existed since the time of the baseline study³⁹. The same counts for Core capability 3 To deliver on development objectives, but here TWAVEZA seems to struggle seriously getting its ambitions realised. Underspensing seems to be endemic at least since 2011. In 2012 HIVOS and TWAVEZA addressed Core Capability 4 To relate intensively in their common relation building, with TWAVEZA in the lead. In 2014 HIVOS' focus on this core capability decreased, because TWAVEZA's Head and his staff realised further successful initiatives in building international partnerships (i.e. recent contribution to Open Government Partnership (OGP)). Especially with regard to the Core Capability 5 To achieve coherence, HIVOS made clear inputs, as is described here below. The ratings in the next table reflects the above explanations.

HIVOS' targeting capacity development Endline report measurement

(1-5: 1 - not targeted, 5 - intensively targeted)

1. Act and commit	5
Participation HIVOS in board TWAVEZA, funding of salaries, sustaining implementation capacity	
2. Adapt and self-renew	1
TWAVEZA took mainly care of M&E and studies itself; no distinct focus from HIVOS	
3. Deliver on development objectives	1
Focus TWAVEZA on capability; hardly from HIVOS; relationship TWAVEZA - HIVOS remains not unilateral	
4. Relate to external stakeholders	3
Still attention HIVOS to relate to external stakeholders, but TWAVEZA more in the lead	
5. Achieve coherence	4
Road map for TWAVEZA's becoming independent joint effort TWAVEZA and HIVOS	

The described set-up regarding HIVOS Tanzania hosting the TWAVEZA initiative went on⁴⁰. HIVOS has continued the kind of capacity development interventions that were mentioned in the baseline report through:

- HIVOS provides Core funding for TWAVEZA (most of HIVOS' funding is still serving that purpose)
- HIVOS Director Programs and Projects is a member of TWAVEZA's Advisory Board
- HIVOS' Executive Board acts formally as the Board of TWAVEZA (TWAVEZA is not yet a separate legal entity).

The interventions are targeted at TWAVEZA's overall leadership, based in its office in Tanzania. HIVOS has no direct interventions towards TWAVEZA-Uganda; they follow directly and logically from the role HIVOS has accepted to play, when TWAVEZA was established. HIVOS agreed to provide, on a temporary basis, an 'institutional home' for TWAVEZA (hosting TWAVEZA see above in this paragraph), without directly interfering in the management of the organisation. In its capacity of

³⁹ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. 473

⁴⁰ The following description is derived from direct contacts with HIVOS Netherlands; information was provided in a specific questionnaire; see: 5C endline – support sheet CFA: HIVOS-TWAVEZA, June 2014

member of the advisory board the HIVOS Director Programs and Projects has made suggestions to TWaweza's management concerning a number of organisational development issues:

- Human Resources management
- Staff turnover
- Delegation and decentralisation
- Separation of roles

The Advisory Board has also made suggestions concerning the strategy and the programme, emphasising the importance of realistic ambitions. In terms of HR management a stabilisation was achieved (less staff changes, less top-down management, more balanced top-down and bottom-up organisational culture). Regarding TWaweza's strategy/programme, recent discussions in the organisation have led to a shift in geographical focus (i.e. more on Tanzania, and less on Uganda and Kenya), as well as to a clear thematical orientation (more on Education and much less on Health and Water). HIVOS has not steered these discussions, but its inputs intended to contribute to balanced choices.

The expectation on the long-term that TWaweza becomes a fully independent organisation by 2018. Intermediate steps in this process will be:

- By the end of 2014 TWaweza will become a legal entity, with HIVOS Board still acting as its board.
- By the end of 2016 the TWaweza Board will be regionalised/localised.

By 2015 the founding director, currently Head of TWaweza, will step down. The Advisory Board has formed a committee with the assignment to find a successor; HIVOS' Director Programs and Projects will be a member of the recruitment committee.

Three members of the HIVOS Netherlands management are key in the described interventions in TWaweza, i.e. HIVOS' Executive Director, HIVOS' Director Programmes and Projects, and HIVOS' Head of Bureau Culture, ICT & Media (CIM). The mentioned three HIVOS actors estimate that their intervention involves 10 working days per year together. For these days a specific budget is not charged. Within the HIVOS Netherlands organisation there is no specific documentation describing the level of their involvement.

Key features project

Within the framework of HIVOS Tanzania hosting the TWaweza Initiative continues during the period June 2012 - 2014 to provide core funding for TWaweza with special attention to:

- Delegation and decentralisation within TWaweza's organisation
- Search for and appointment of TWaweza's new Head in 2014
- Addressing TWaweza's actual staff turnover and related needed human Resources management
- Separation of roles between TWaweza and HIVOS Tanzania during the period of TWaweza starting with becoming an independent legal body in 2014 and ending with being a fully regionalised/localised organisation with an independent Board in 2016.

- HIVOS inputs to TWAVEZA's strategy beyond 2014, as the current Strategic Plan 2011 - 2014 comes to its close

The indicated intervention areas aim at serving TWAVEZA becoming a fully independent and regionalised East African organisation. For this a timeframe has been agreed upon between HIVOS and TWAVEZA, but a roadmap detailing orientations and related actions was not formulated by HIVOS as a specific project. How this roadmap will look like, depends on TAWWEZA's strategy formulation for the period beyond 2014 (2015 - 2019). The intervention areas are not specifically addressing TWAVEZA Uganda, which is in the MFS2 evaluation the unit of analysis. TWAVEZA Uganda's capacity development analysis will therefore be done within this wider context.

4. DATA COLLECTION AND ANALYTICAL APPROACH

For putting up the baseline on capacity development for the SPO TWAVEZA Uganda the evaluation tools are briefly explained. For the field research for the baseline and endline (follow up assessment) studies two special Research Manuals were written.⁴¹

Background documents

For both the baseline and the endline documents on strategy, context and activities were studied and verified with concerned SPO (TWAVEZA Uganda) and related CFA (HIVOS Tanzania). To these documents is referred in footnotes in this technical report.

Focus groups/group interviews

Focus group interviews were held with TWAVEZA Uganda 's staff members and UWEZO's management, staff and stakeholder organisations for getting data on the organisations development and its working environment. In these interviews attention was given to the organisation's *Timeline* until the baseline year 2012, its *Theory of Change*, and the *Results Chain CFA - SPO - Target groups / stakeholders*. *Observation* of the SPO's office and working environment gives additional information about the SPO.

A complementary approach was followed in the fieldwork of the endline study that has taken place in June 2014; herein interview formats were used emphasising *key changes and wished changes* within the SPO, as seen by interviewees from the SPO personnel, from externals and from the supporting CFA.

Organisational self assessment

In the baseline as well as the endline organisational self assessments were done with respondents of the SPO; in the endline assessment was aimed at a participation of 30% of the respondents present in the baseline assessment; for TWAVEZA Uganda this was 25%⁴²; the endline workshop has taken place on 22 May 2014. The same questionnaire covering 5 Core Capabilities and connected indicators with prompting questions was used, in order to facilitate comparability between the baseline and endline outcomes.

The outcomes of the self assessment in the baseline were related to all elements of *Focus groups/group interviews* for making up a *Synthesis scoring form*. This form was the basis for the evaluation of each core capability and its underlying aspects, as described in the Research Manual Baseline (see above). After processing the *Synthesis scoring form* a debriefing feedback meeting with TWAVEZA-Uganda has taken place on 1 October 2012 to discuss determining factors for the given scores. After this debriefing additional *self reporting* was requested from the respondents; they were asked to issue their remarks/comments on the synthesis scoring form. Final scoring and related

⁴¹ Research Manual, Evaluation Study *Capacity development* of Southern partner organisations -Baseline - Uganda, Eric Kamphuis, Molenrij/Kampala: June/July 2012

Research Manual, Evaluation Study *Capacity development* of Southern partner organisations - Uganda -Endline, Eric Kamphuis Molenrij/Kampala: March /April 2014

⁴² The workshop was attended by 4 TWAVEZA Uganda staff, of which one has attended in the baseline workshop. The workshop was also attended by 3 OWEZO Uganda staff members (including its Country Coordinator); they did not participate in the baseline workshop.

explanations were given by the evaluators and peer reviewed, and served as input for the evaluator's final assessment.

Outcomes in the endline were related to interview findings (with TWAVEZA Uganda and UWEZO Uganda personnel, externals, and HIVOS Netherlands and HIVOS Tanzania). Then endline scores were compared with baseline scores per each core capability and their underlying aspects. Differences between these scores, reflecting changes in core capabilities and their underlying aspects over the period June 2012- June 2014, were qualified in terms of 'improved', 'stable', or 'worsened'. These qualifications were generated by an Excel tool that was specially developed for this purpose; the tool generated endline scores per core capability and their underlying aspects, based on multiple choice answers on 64 questions; the other 18 questions regarded open requests for additional comments per different aspect/core capability and did not influence the scoring. The tool thus firstly determined endline scores per core capability and their underlying aspects and these scores were then related with the scores of the baseline study for getting the change qualifications⁴³. The change qualifications of the core capabilities and their underlying aspects were linked with an inventory of determining factors for these changes. This inventory was done in workshop sessions and interviews; for TWAVEZA Uganda change qualifications, determining factors and open comments provided in the questionnaire were captured in a workshop report and interview reports. The workshop report was reviewed in a special feedback meeting with TWAVEZA Uganda on 29 August 2014; subsequently the workshop report was reviewed by UWEZO Uganda's Executive Director; TWAVEZA Head Office in Dar-es-Salaam left the commenting on the workshop report to the UWEZO/TWAVEZA Uganda Office. Finally the report was peer reviewed by the capacity development researchers.

Observation forms

Regarding TWAVEZA Uganda a detailed chronology of study/research activities was recorded on Observation forms. In the forms was also space for the researchers to make observations on the research process, the collected data, or the cooperation extended by TWAVEZA Uganda and HIVOS Netherlands/HIVOS Tanzania as related CFA.

Reasons for choice of mentioned methods

Organisational assessments regard essentially interactive processes between the evaluated organisation and the evaluators. Taking a baseline does not only concern the handling of measurement tools, but also the triangulation of collected findings in interviews/focus groups. The followed approach hosts therefore a mixture of two perspectives. Firstly: the application of survey research and feedback, and secondly: attending to people working in organisations that are frequently confronted with changes.

Respecting the two perspectives simultaneously means that research techniques like Difference-in-Differences are less applicable in this assessment framework, as factors influencing organisational development are complex and multidimensional. Moreover: these factors cannot be captured in the 5C research within the timeframe given in the MFS2 evaluation.

⁴³ The scores of the baseline study were in 2012 not made up by means of this tool; the final scores were then determined by putting up the Synthesis scores. For consistency sake the original 2012 scores were reviewed with the Excel tool, in order to get a comparison between the baseline and endline scores on the same basis; in a few cases baseline scores had to be adapted; these adaptations were in general marginal. Through the review of the baseline scores with the Excel tool, baseline and endline scores are given with one decimal.

Organisational assessments combine different measuring and observation methods as mentioned above with assessment based on expertise in the area of organisational development. Difference-in-Differences and Randomized Controlled Trial (randomized assignment) for example can hardly be matched with such combination.

The choice for the mentioned methods has implications for type of evidence the endline study can generate and consequently in what terms effectiveness of interventions can be qualified. The next table, the Evidence Ladder gives an overview of the 4 possible levels of evidence, the related parameters of evidence / types of research, and hence the qualifications of the effectiveness of interventions⁴⁴.

Table 4: The Evidence Ladder

Levels of evidence	Parameter of evidence	Types of research	Effectiveness of interventions
4. Causal	As in 1, 2, and 3, but there is now sound and substantial evidence that the outcome is caused by the intervention and/or clear evidence showing which ingredients of the intervention are responsible for the outcome.	<ul style="list-style-type: none"> • Randomised Control Trial • Repeated case studies (N=1 designs) 	Efficacious
3. Indicative	As in 1 and 2, but it has now been demonstrated that the intervention clearly leads to the desired outcomes (e.g. goals are attained, target problems decrease, competencies increase, clients are satisfied).	<ul style="list-style-type: none"> • Quasi-experimental studies • Theory of Change studies • Norm referenced approaches • Benchmark studies • Client satisfaction studies • Goal attainment studies • Quality assurance studies 	Functional
2. Theoretical	As in 1, but the intervention now has a plausible rationale (i.e. a program theory) to explain why it should work with whom	<ul style="list-style-type: none"> • Reviews • Meta-analysis • Expert knowledge studies 	Plausible
1. Descriptive	The essential elements of the intervention (e.g.	<ul style="list-style-type: none"> • Descriptive studies 	Potential

⁴⁴ This overview is based on the various 'ladders of evidence' that are in use in health research; the overview takes the realities of developmental research into account.

	goals, target group, methods and activities, requirements) have been made explicit	<ul style="list-style-type: none"> • Observation studies • Analysis of documents • Conduct of interviews 	
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The approach followed in the capacity development component of the MFS2 regarding the Capacity development of Southern partner organisations is mainly related to the evidence level 'theoretical'. So the effectiveness of the interventions can the best be qualified as 'plausible'. The types of research related to the levels of evidence 1 and 2 (Descriptive and Theoretical) correspond with the described earlier in this chapter.

The use of the 5 Core capabilities conceptual framework made it possible to compare baseline and endline scores of core capabilities and thus to reach to a certain extent the level of evidence 'indicative'. One should however realise that for the determination of the final score and the qualifications of capability changes interviews, workshops, and core group discussions were vital, besides observation studies. Time constraints made it also not possible to carry out a profound Theory of Change study or client satisfaction studies. Hence the capacity development study can at best generate plausible explanations of the effectiveness of researched interventions.

5. RESULTS

This chapter gives a descriptive analysis of the findings collected during the follow-up assessment (endline study) following the approach described in the previous chapter. The endline study generated scores per core capability and their underlying aspects that are based on the average of the scores per indicator. The comparison between baseline and endline scores are here not given at indicator level, as the scores on aspects underlying the core capabilities give sufficient insight in the major changes per each core capability⁴⁵ and thus on the organisation's capacity development over the period June 2012 - June 2014 (i.e. baseline scoring and endline scoring periods). Per each aspect an explanation is given on the finally assigned change qualifications, based on the given change qualifications, stemming from the questionnaires used in the organisational self assessment. If the difference between the baseline and endline scores was between -0.25 and + 0.25, the aspect change was qualified as "stable", if the difference was more than + 0.25, then the qualification was "improved", and if the difference was less than -0.25, the aspect change was qualified as "worsened". The final change qualifications, set by the evaluator, take into account what emerged in the workshops, interviews, focus group meetings and the final feedback meeting with TWaweza Uganda. The baseline and endline scores are given with one decimal to make clear how the Change qualifications stemming from the questionnaires were given. After the explanations of the change qualifications per aspect an explanation is given on the overall change qualifications per entire core capability.

It should be noted that in the endline assessment 4 staff members from TWaweza Uganda and 3 staff members from Uwezo participated. Uwezo was not involved in the baseline assessment, but now the Uganda offices of both organisations are merged. This circumstance will be reflected in the evaluator's observations/comments per aspect per each core capability in *italics*.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
1 Capability to act and commit	3.5	3.6	Stable	Stable
1a Level of effective leadership	3.5	3.5	Stable	Stable
1b Level of realistic strategic planning	3.7	3.6	Stable	Stable
1c Level of translation of strategy into operations	3.8	3.6	Stable	Stable
1d Level of staff capacity and motivation	3.3	3.6	Improved	Stable
1e Level of financial resource security	3.3	3.7	Improved	Stable
<p>1a. <i>Stable</i>: Level of effective leadership stable, as staff members are consulted at all levels; planning, implementation and review. Joint decision making exercised during management and staff meetings; this was to learn from one another, have everyone updated and involved, increase ownership of decisions and strengthen each other's capacity to offer quality service (2013).The organisational website enables communication among the 3 country offices; Uganda, Kenya and Tanzania; through the sales' force</p>				

⁴⁵ Detailed data at indicator level are captured in the Excel scoring tool and can be made available.

platform, XERO, organizational information can be accessed (March 2013). *The TWAVEZA Uganda and UWEZO Uganda offices were recently fully merged with the country coordinator UWEZO as office head; this process needed its time (mid 2013).*

1b. *Stable:* When the MFS2 baseline was undertaken there were only 2 UWEZO staff: UWEZO had no accountant, no program assistant, so one person was doing everything. By the MFS2 endline study all is in place, roles are complementary and clearly defined; each one's capacity is fully maximised. In 2012, UWEZO was being hosted by national NGO forum so the vacancy of positions was not felt; NGO forum's staff could cover some gaps. Recruitment of competent staff members, i.e. Learning, Monitoring & Evaluation (LME) assistant, assistant communications' officer, communications' manager, administrator, research, and country accountant were recruited. These positions existed on the organogram, but were not filled. Country accountant was recruited to ensure compliance with regulatory bodies and to ensure compliance with financial policies by both staff and partners (2013).

Therefore TWAVEZA-UWEZO Uganda office claims improved level of realistic strategic planning; only activities are planned that can be really achieved. Commitments to staff's or partners' targets done on what can be achieved and controlled. 'Ideas hurdle' is helpful tool (i.e. refining definition activities, their monitoring, their success criteria and the money needed) for the TWAVEZA-UWEZO Uganda office to set realistic outputs (2013).

The programmatic baseline assessments started from mid-2013 onwards (collection of relevant initial data for program formulation and for defining start situation). Restructuring of TWAVEZA Uganda program with major refocus on media only (one network instead of three sectoral networks before 2013, i.e. health care, drinking water and education); this meant downscaling, and hence no TWAVEZA Country Coordinator anymore). TWAVEZA Uganda left NGO Forum; now UWEZO has taken this position. *TWAVEZA Uganda's program priorities became thus more focused in 2013. Realistic planning should however be questioned in the light of large unspent budgets in 2013⁴⁶. Also there is the question about the TWAVEZA-UWEZO Uganda office as a unit, where TWAVEZA people report to their Dar-Es-Salaam-based regional manager, as also UWEZO people report to their regional manager.*

1c. *Stable:* To translate strategy into operations, every TWAVEZA country adapts the plan to its context since similar ideas work differently in different contexts. Annual plans are derived from strategic plans. The strategy document has been printed and distributed amongst all staff for reference. The plans are discussed among staff before implementation. *The translation of strategy into operation did partially result in the realisation of operations (and hence in unspent budgets).*

1d. *Stable:* TWAVEZA-UWEZO Uganda office reports that the level of staff capacity and motivation improved since all positions are now filled with competent personnel. Regular learning sessions were seen as a form of training. The greater delegation training has contributed to improvement in level of staff capacity and motivation; the staff have attended trainings both directly and indirectly related to their work. Annual performance assessment of each staff member to achievements as per the annual

⁴⁶ HIVOS' Evaluation Manager Karel Chambille commented on 26 January 2015 in this respect: "the budget you show (...) for 2013 was still part of the TWAVEZA's ambitious mode, as it was drawn up before 2013". This observation is correct. The evaluator consulted for the budget analysis the Reports and Financial Statements for the years 2011, 2012 en 2013, as put up by the auditors of HIVOS Tanzania Deloitte & Touche (2011, 2012) en Ernst & Young (2013). In the report for 2013 no mention is made of budget modifications during the year 2013.

plan and TOR's takes place (2012). Staff appraisals are more consistent (2012).

1e. *Stable*: Stability was reported in the level of financial resource security, because the TWaweza Uganda staff members are not involved in fund-raising. This is mainly done at the regional office. Regarding financial resource security, the senior assistant to the head of TWaweza is specifically mandated to explore funding opportunities. *Funding situation is indeed in the hands of TWaweza's Head Office in Dar-Es-Salaam. General funding situation looks stable for the coming years, but not for a full 5-years period beyond 2014.*

Overall score core capability To act and commit is Stable, because various improvements observed in TWaweza-Uwezo Uganda office are actually counteracted by discrepancy between budgeted amounts for activities and realised expenditures related to these activities. The TWaweza/Uwezo Uganda office looks in good shape, but realisation of activities in connection to those planned now awaited in 2014.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
2 Capability to adapt and self-renew	3.5	3.4	Stable	Stable
2a Level of effective application of M&E	3.6	3.3	Worsened	Stable
2b Level of strategic use of M&E	3.0	3.4	Improved	Improved
2c Level of openness to strategic learning	3.7	3.6	Stable	Stable
2d Level of context awareness	3.7	3.6	Stable	Stable

2a. *Stable*: Level of effective application of M&E was stable, since there is a country and regional full-time M & E personnel. Level of effective application of M&E improved since the M & E team labours to guide staff through LME procedures. M&E is a fully-fledged department in TWaweza with its own budget for its activities.

2b. *Improved*: Level of strategic use of M&E improved since M & E is implemented at every point. It is a condition that every activity should have a strong M&E component in consultation with the LME manager prior to implementation. The organization has had TWaweza Head Mr Rakesh Rajani from regional office to clarify issues that were not clear to staff in 2014 through a strategic planning meeting.

2c. *Stable*: Level of openness to strategic learning remained stable. Staff learning and participation in other countries' activities take place (2012). The learning/reflection meetings are compulsory to all staff and are managed by the regional M & E unit. The exchanges of ideas are every Wednesdays and Thursdays, where staff present implementation ideas to management (skills labs, learning sessions, food for thought sessions, reading club); there is opportunity to reflect / critique on staffs' work/service in these sessions (mid 2013).

2d. *Stable*: Level of context awareness remained stable since the organisation's work involves engaging

a lot with public through partners. The organisation's work targets the citizens; providing them with information needed to take action. The public is aware of the organization and its activities. The organization has a communication strategy that serves the purpose of linking with the general public; it is more keen on the political environment while designing key messages and program activities to influence policies (late 2013). One of the key qualifications for different media partners (Citizen Agency research, activate citizens; 3-4 partnerships at the same time) framework agreement is a target audience of at least 2 million people (2013). The organization is more focused; it has narrowed down the theory of change. TWAVEZA and UWEZO's theories of change are both rooted in the context and understanding that it is the citizens who would bring about change. It was the same thinking as in the baseline, and it continues to be. Since then more partnerships are brokered. Also the fact that UWEZO now deals directly with partners gives fuller understanding of the contexts in which they operate.

Overall score core capability To adapt and self renew is Stable. Improvements were realised in the TWAVEZA Head Office on M & E structures, rules, and practices, of which TWAVEZA-UWEZO Uganda's office could benefit; based on that M & E was implemented. The TWAVEZA-UWEZO Uganda office staff perceived the visit of TWAVEZA's Head Rakesh Rajani in 2014 as useful for clarifying issues of strategic planning; the improvement coming this intervention is still fresh, its sustainability can only be assessed later.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
3 Capability to deliver on development objectives	3.2	3.2	Stable	Stable
3a Extent to which organization delivers on planned products and services	3.5	3.4	Stable	Stable
3b Extent to which delivered products and services are relevant for target population in terms of the effect they have	2.8	3.1	Improved	Improved
3c Level of work efficiency	3.3	3.2	Stable	Stable

3a. *Stable*: The organization's delivery on planned products and services has become more focused, since its strategic planning is more realistic. There are quarterly reports to check progress against the annual work plan. TWAVEZA's sectoral scope was narrowed down, due to the too wide orientation of the organisation that was observed recently. The organization has a manual with standards of output assessment for partners. The staff became more result-oriented (2013). *Organisational conditions for better delivery are improved, but on actual improvements in the delivery itself is not reported.*

3b. *Improved*: The organization also has an output analysis tool to ensure that outputs are delivered as planned. The relevance and effectiveness of delivered products and services by media have improved since the organization has more targeted messages that are pretested and approved before they are sent

out to the audience; related needs assessments and beneficiary appreciations are done through surveys on a national representative sample. TWAVEZA succeeded doing work that is now known to the public⁴⁷; the UWEZO education assessment impressed the general public. Increased number of implementing partners realised, e.g. rock point radio drama, partnership with artists e.g. Bobi Wine in a reality show, partnerships with comedians, and video *jokies* Increased public awareness on children's learning levels. *Organisational conditions for more relevant and effective delivery are improved, but on actual improvements in relevance and effectiveness itself is partially reported; this makes assessment of these improvements difficult.*

3c. *Stable*: Planned outputs are always assessed e.g. for partners and consultants, outputs are checked for quality before payments are being made. Efficiency measuring takes place in the cases of contracting output-based assessments; on outputs is agreed upon upfront and value (in monetary terms) is attached to each output. When outputs are delivered, payment is made against delivered outputs. Output ratios are here applied and serve as inputs for comparison. *In efficiency measuring the current focus is thus on contracting external parties; this certainly economised mobilisation of external inputs. Efficiency measurement at the level of the entire organisation deserves more attention.*

Overall score core capability To deliver on development objectives is qualified as stable, because there were improvements in the conditions for better delivery of relevant and effective products and services. At the same time should be noted that at input level the entire TWAVEZA organisation is in better shape (look at the core capabilities To act & commit and To adapt & self renew), but that its ability to serve its target audiences/groups qualitatively, relevantly, and with effectiveness (Core capability To deliver on development objectives) is less known. This made TWAVEZA's translation of ambitions into plans and related budgets not yet realistic over the years 2011, 2012, and 2013. The scaling down of TWAVEZA-UWEZO Uganda's programs was needed and adequate; in TWAVEZA's workplan 2014 this is a substantial lower budget for Uganda-related activities (see Chapter 3, Profile of the SPO).

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
4 Capability to relate	3.7	3.8	Stable	Stable
4a Level of involving external parties in internal policy/strategy development	3.6	3.7	Stable	Stable
4b Level of engagement of organisation in networks, alliances and collaborative efforts	3.6	4.0	Improved	Improved
4c Extent to which organisation is actively engaging with target groups	3.8	3.7	Stable	Stable
4d Level of effective relationships within the organization	3.8	3.9	Stable	Stable

⁴⁷ Participants Endline Workshop TWAVEZA-UWEZO Uganda: "The Ni Sisi Campaign media work (TV, radio, print, Minibuzz) stimulates the Ugandan people 'to make it happen'(2012)"

4a. *Stable*: The organization involves external parties in strategy development for their contribution. The organization holds meetings with external stakeholders during strategy development and keeps records of proceedings. Stakeholders include those from Uganda, Kenya, Tanzania and beyond. For example: UWEZO Uganda has a 9-member Advisory committee that sits quarterly and is consulted on key strategic developments. Membership on the committee includes representatives from Ministry of Education and Sports, Uganda National Curriculum Development Centre, Uganda Bureau of statistics, Uganda National NGO Forum, other NGOs and University-based academics; TWaweza is now part of the national NGO Forum.

4b. *Improved*: Level of engagement of organisation in networks, alliances and collaborative efforts improved since the networks/alliances increased in number, kind (category) and level (national and international). The organization maintains strategic partnerships with key actors in government, media, teachers' unions, and civil society. Relations are now more limited in sectoral scope: there is still attention for education, but not much for drinking and health care anymore. There is participation in networks like Uganda National Teachers Union (UNATU), Ministry of Education & Sports (MOES), UMTA (Uganda Moslems' Teachers' Association). TWaweza has been able to build and maintain these relationships (2013). Also the relationship with partner organizations at local, district and national levels became closer (Local level in 2014, national level in 2013, and district level in 2010). Additionally there are strengthened relationships with other organisations in same area as TWaweza, like the citizen-led assessment movements in the countries India, Pakistan, Kenya, Tanzania, Mali, Senegal, Senegal and Nigeria, the Post-2015 development actors, joint assessment of learning outcomes, and international workshops, once hosted by TWaweza in May 2014. *The engagement of the organisation in networks, alliances and collaborative efforts shows clear improvement, but also a huge variation in initiatives; priority setting in these initiatives has taken place in TWaweza-Uganda; question is how extensive international networking should be.*

4c. *Stable*: Extent to which TWaweza-UWEZO is actively engaging with target groups remained stable as the organization developed new ideas to reach out to the target audiences e.g the use of media. The organisation builds partnerships that cut across government-private sector and civil society (2013). New ways of reaching target audiences were sought e.g. using popular artists/celebrities e.g. Bobi Wine and comedians. From 2014, TWaweza networks directly with district-based civil-society organizations without going through UNNGOF as before (NGOs in Uganda can subscribe to UNNGOF they can also relate to other parties individually; they are not legally obliged to transact business through UNNGOF). UWEZO experienced a shift from engaging with district-based partners through an intermediary to engaging with them directly; therefore there has been a reduction in the number of UWEZO's partners in 2014 from 80 to 28.

4d. *Stable*: Level of effective relationships within the organisation has improved; staff has lunch together; the organization organises for staff birthdays, outings and end of year parties; it also encourages staff to work together. A change in office premises was made; now there is availability of almost all equipment that staff require to do their work (2013).

Overall score core capability To relate remained stable, but development in networking and office

facilities carries promise for effective functioning in the near future, provided that priority setting in the organisation's international engagements becomes more clear.

Indicator	Baseline score	Endline score	Change qualification-questionnaire	Evaluator's change qualification after workshops/interviews
5 Capability to achieve coherence	3.7	3.7	Stable	Stable
5a Existence of mechanisms for coherence	3.6	3.8	Stable	Stable
5b Level of coherence of various efforts of organization	3.8	3.6	Stable	Stable

5a. *Stable*: The organisation is in the process of fine-tuning its Theory of Change (ToC) in relation to its vision, mission, and strategy. When complete, the new ToC will guide decision-making and increase ownership. The merging process between TWAVEZA and UWEZO looks further advanced. Mechanisms for coherence improved to the extent that the differences between the organisations allow. A common organisational climate is pursued, but not yet fully reached. Documents outlining operational processes, like technical instructions (contracting, procurement), administration, human resource management, research, and communication were all realised in 2012/2013. These are shared with all staff electronically and consequently workflow processes were updated; the same counts for the policy of the organisation. Now the organisation has standardised principles that give guidance to what it does. Timely payments and disbursements to partners, suppliers, and staff are now effectuated; this motivates staff and contributes to internal and external transparency and accountability.

5b. *Stable*: By the time the MFS2 baseline was done in 2012, UWEZO had just come under the full management of TWAVEZA. Improvement in synergies between TWAVEZA media partnerships and UWEZO's program on education is achieved. Level of coherence between various efforts of the organisation has improved, since most of the work between TWAVEZA and UWEZO became better related. TWAVEZA's communications and program work (such as Mini Buzz, Bobi Wine show, Rock Point) are fed by UWEZO. During the weekly TWAVEZA-UWEZO staff meetings, members report on their programmes that need support from TWAVEZA units. But also in the UWEZO Annual learning assessment, TWAVEZA staff participates for monitoring support and cross-unit learning. Synergies are mostly sought at activity level (data collection and implementation of findings). Internal relations within TWAVEZA Uganda and UWEZO office are now frequent, due to sharing the office; the search for synergy between TWAVEZA en UWEZO is still going on. *The pursuit for synergies may suffer from the difference in reporting channels individual staff members have to follow.*

Overall score core capability To achieve coherence is Stable, because the organisation's ToC is being fine tuned; building synergies and coherence among UWEZO and TWAVEZA programs has been gradual and is progressing over time with perspective for improvement, provided that lack of clarity, due to different reporting channels, is avoided.

6. DISCUSSION

Followed CFA-SPO approach related to the findings

The overview of the results shows that TWAVEZA's capacity remained stable overall. The following core capability table illustrates this:

Core capability	Baseline	Endline	Final change qualification
1 To act and commit	3.5	3.6	Stable
2 To adapt and self-renew	3.5	3.4	Stable
3 To deliver on development objectives	3.2	3.2	Stable
4 To relate	3.7	3.8	Stable
5 To achieve coherence	3.7	3.7	Stable

Under this general picture however changes within the core capabilities have taken place, as was explained in Chapter 5. For the unit of analysis the TWAVEZA Uganda Office this concerns its merging with the UWEZO Uganda Office mid-2013 and this affected certainly at aspects level the Core capabilities 1, 2, 4, and 5. The merger of the offices was mainly the result of decision making within the TWAVEZA organisation, and not so much induced only by HIVOS as the organisation's key donor. The relationship between HIVOS and TWAVEZA cannot be described in terms of a traditional donor recipient relationship, as was indicated in Chapter 3 in the paragraph *Support Co-funding Organisation (CFA) to SPO*. The set-up, in which HIVOS Tanzania was hosting the TWAVEZA initiative went on during the period June 2012 - June 2014: TWAVEZA will become fully independent in 2016.

Related to the mentioned Core capabilities 1, 2, 4, and 5 was stated that improvements at aspects level have taken place, and that improvements at core capability level are expected, provided that the current observed developments will continue.

However regarding Core capability 3 special concern is expressed, because over the years 2011, 2012, and 2013 earlier in this report mention is made of ambitious budgeting and low expenditure levels at the same time. Could it be considered at the time of the Baseline of the MFS2 evaluation as a temporary concern⁴⁸, now after the completion of the endline assessment, one can speak of a structural issue. The TWAVEZA organisation has not been able to put up plans and related budgets that have a realistic base in what the organisation can implement, in spite of observed recent improvements in the delivery of products and services.

HIVOS' approach towards TWAVEZA has from 2012 onwards not been essentially changed. As was shown in Chapter 3 Project Description under *Support CFA to SPO*, HIVOS aims at serving TWAVEZA becoming a fully independent and regionalised East African organisation. For this on a timeframe has been agreed upon between HIVOS and TWAVEZA, but a roadmap detailing orientations and related actions were not formulated by HIVOS as a specific project. How this roadmap will look like, depends on TAVEZA's strategy formulation for the period beyond 2014 (2015 - 2019). The intervention areas

⁴⁸ See MFS-II UGANDA BASELINE REPORTS, Erwin Bulte (WUR), Jeroen Klomp (WUR), Jan Duchoslav (WUR), Eric Kamphuis (ETC), Bert Lof (ETC), February 2013, p. 471

are not specifically addressing TWaweza Uganda, which is in the MFS2 evaluation the unit of analysis.

HIVOS considers the lack of correspondence between planning/budgeting and implementation/expending as an essential problem⁴⁹, besides the attention to the roadmap TWaweza will follow:

- Delegation and decentralisation within TWaweza's organisation
- Search for and appointment of TWaweza's new Head in 2014
- Addressing TWaweza's actual staff turnover and related needed human Resources management
- Separation of roles between TWaweza and HIVOS Tanzania during the period of TWaweza starting with becoming an independent legal body in 2014 and ending with being a fully regionalised/localised organisation with an independent Board in 2016.
- HIVOS inputs to TWaweza's strategy beyond 2014, as the current Strategic Plan 2011 - 2014 comes to its close⁵⁰

The roadmap is important for TWaweza's development, but a sole concentration on this may carry the risk that the currently involved donors will increasingly question the reasons behind the situation of the organisation's underspending. This would be unfortunate for the organisation's goals setting dynamics, like forced expenditures, opportunistic planning, or worsened cost consciousness, for example. Thus far there is no Strategic Plan 2015 - 2019 that will follow up the Strategic Plan 2011 - 2014 that soon comes to an end.

Recommendations

The choice made by HIVOS to focus on the roadmap towards TWaweza's independence is consistent, but a too limited approach in view of the mismatch between the organisation's ambitions, as translated in plans/budgets and its actual implementation/expenditures.

Given the organisation's sound donor base, it is strongly recommended to HIVOS Tanzania - TWaweza to pursue the completion of its new Strategic Plan, which' elaboration started in 2014. Herein the match between ambitions and realisations should be firmly addressed for further improving its Core capability To deliver on development objectives. This regards a common responsibility of HIVOS and TWaweza, given the long-term trajectory these organisations has entered since 2009.

Remarks on evaluation approach

The evaluation of TWaweza's capacity development itself, especially with respect to the organisation's planning/budgeting and implementation/expenditures could be done with much care, thanks to all documentation that the organisation has made available on its website, in addition to the information provided by HIVOS' head office. Further should be noted that TWaweza's

⁴⁹ See page 12 of this report where reference is made to the Advisory Board's suggestions concerning the strategy and the programme, emphasising the importance of realistic ambitions.

⁵⁰ See Chapter 3, Paragraph *Support Co-funding Organisation (CFA) to SPO*

Monitoring, Documenting and Reporting practices are in a good shape, which facilitated the capacity development endline study, in addition to the information provided in workshops and interviews.

The chosen qualitative approach to assess the capacity development of SPO's, as described in Chapter 3, appeared to work well. The use of capability scoring require a careful approach: scores can serve a comparison between baseline and endline outcomes, but this comparison needs to be thoroughly triangulated through interviews, focus group discussions, or joint analysis and verification workshops with stakeholders. In the current evaluation setup triangulation was an integral part of the evaluation, but to honour fully the requirements triangulation require more research time was needed; then the qualification of effectiveness of interventions can then be firmly plausible and to a certain extent functional⁵¹.

⁵¹ See Chapter 4: Table of levels of evidence

7. CONCLUSION

In this chapter conclusions are drawn with respect to the 3 evaluation questions of the MFS2 Evaluation Study Capacity Development of Southern Partner Organisations - Uganda, e.g.:

1. *What are the changes in partner organisations' capacity during the 2012–2014 period?*
2. *To what degree are the changes identified in partner capacity attributable to development interventions undertaken by the MFS II consortia (i.e. measuring effectiveness)?*
3. *What factors explain the findings drawn from the questions above?*

Changes in TWAVEZA's capacity during the 2012–2014 period

Overall TWAVEZA's capacity in June 2014 remained stable as compared to June 2012. At aspect level there were improvement within the core capabilities 1, 2, 4, and 5. Its ability however to deliver on development objectives remained problematic, when looked at the organisation's ambitions at the one hand and realisations at the other.

HIVOS' influence on identified changes

Changes in TWAVEZA's capacity since June 2012 can be attributed to the close cooperation between HIVOS Tanzania and TWAVEZA. Within this cooperation changes on aspect level of the core capabilities 1, 2, 4, and 5 have taken place, but HIVOS did not specifically attend to TWAVEZA's capability to deliver on development objectives: i.e. the observed tension between ambitions and realisations. HIVOS support to TWAVEZA was considerable and long term, as is also the case for other donor organisations (DFID Tanzania, Hewlett Foundation, SNV Netherlands, Irish Aid, SIDA Tanzania, and AJWS) . HIVOS was instrumental in addressing the core capabilities 1, 2, 4, and 5; regarding the attention to Core capability 3 (i.e. budgeting vs expenditures) this was less the case.

Explaining factors to identified changes

TWAVEZA has support of a number of donors, but HIVOS was from the outset of TWAVEZA's existence essential in its development. For this a special governance setup, in which HIVOS Tanzania hosts the TWAVEZA initiative, was arranged. In this setup the main focus was on core capability To act and commit, as HIVOS provides essential core funding in connection with the chosen governance setup. This setup made it possible to contribute to the streamlining of TWAVEZA's organisation and the merger between TWAVEZA and UWEZO, aside attracting other donors to the TWAVEZA initiative that provide considerable support. During the long-term of HIVOS so far, relatively less attention was given to TWAVEZA's core capability To deliver on development objective.

Assessment project design

Previous observations result in an assessment of the project design. HIVOS' contribution was not defined as a separate project, but the chosen governance setup and related roadmap to TWAVEZA's independence can very well be considered as a separate and original project, which cannot be defined in terms of a traditional donor recipient relationship. The project appears to be well designed, thus far the steps of its road map are on track, but the realisation of core capability To

deliver on development objectives looks not fulfilled. The next table gives assessment scores on 3 statements: The project was well designed , The project was implemented as designed , and The project reached all its objectives.

Statements	Scores : 'Not at all' (1) - 'Completely' (10)
The project was well designed	7
The project was implemented as designed	7
The project reached all its objectives	5

Joint MFS II Evaluation: Civil Society Strengthening –Uganda

Kabarole Research and Resource Centre (KRC)

Technical report on KRC's Civil Society Strengthening

1. Introduction : organisation

Organisation	Kabarole Research and Resource Centre (KRC)
Contact Person	Julius Mwanga, Executive Director Email: jmwanga@krcug.org Phone: +256-772-305521
Address	Kabarole Research and Resource Centre Plot 28 Mugurusi Road P O Box 782 Fort Portal
Phone number	+256-382-274438
Website	www.krc.co.ug
MDG	1 (poverty reduction)

2. Context

KRC operates in the Rwenzori region in Western Uganda which is made up of 7 districts. The Region has an estimated population of about 2.5 million people. Over the past years there has been a substantial growth of the population thus exerting more pressure on land and other social services. A study by KRC estimated that by 2003, there were 340,000 households (KRC, 2003).

The region has vast natural resources comprised of fertile volcanic soils, ample and reliable rainfall, huge tourism potential, water bodies, rich forest cover, reasonable mineral deposits ranging from copper and cobalt in Kasese, limestone in Kamwenge to oil deposits in the Albertine region around Lake Albert. The discovery of oil and drilling has potential to stimulate infrastructure development and increase business volume in the region. Queen Elizabeth, Mt. Rwenzori and Kibaale National Parks make the region the leading tourist destination in the country.

Despite its potential and progress, Rwenzori region is still below the national average on a number of social economic indicators. By 2010, 25.1% of the people in the region lived below the poverty. Poverty levels per district are as follows: Kasese 48.3%; Bundibugyo 43.3%; Kamwenge 37.6%; Kyenjojo 35.5% and Kabarole 28.8%; implying that five out of the seven districts of the Rwenzori Region are well above the national average of 24.5% (UBOS, 2008 cited in KRC Regional Framework 2012).

Agriculture is the major economic activity with the majority of the population practising subsistence agriculture. It is estimated that 80% of the regions population entirely depend on agriculture. Cocoa, coffee, vanilla and tea are grown on a wide scale for export. Over reliance on cash crop production in for instance Bundibugyo districts has been identified as going against the need to ensure household food security. Smallholder agriculture production is hampered by challenges related to marketing, climate change, lack of agricultural financing, slow adoption of agricultural technologies and practices, and an increasing nutritional challenge among children.

Uganda has been implementing a decentralisation policy since 1992, a mechanism aimed at getting resources to reach the people at the grassroots and to have their voices reach decision makers. The decentralisation system provides an opportunity for the citizens to be made aware of key development processes such as planning, implementation and monitoring of services. However, the implementation of the policy has encountered many challenges including lack of resources due to the abolition of graduated tax, increased corruption, late disbursement of funds from central government and dysfunctional lower Local Government structures such as Local Council 1 and the Parish Development Committees.

The region has a vibrant civil society movement organised around district NGO networks. A number of CSOs in the region are offshoots of KRC which continues to provide leadership and strategic direction to the CSO movement in the region. Eight NGOs in the region have organized themselves in the Rwenzori Information Centers Network establishing information centers to track service delivery. This is especially done for the agricultural, education and health sectors. The information centers have improved the relationship between the communities and the lower local government structures but has also improved service delivery in some of the districts.

The region is endowed with two universities (Mountains of the Moon and Uganda Pentecostal University) and a number of learning centres for other leading universities in the country. The universities provide a unique opportunity to the region to access university education at a lower cost. The region has a vibrant media spearheaded by about 10 local FM radio stations which further

provides opportunities for easy access to information and potential to mobilise the population on development issues.

According to the recent CIVICUS report State of Civil Society 2013, Uganda is enlisted amongst countries with strained relationships and growing distrust between CSOs and government. This put severe constraints on civil society organisations to take action on for instance theft of public goods and resources and to lobby for citizen empowerment. In particular the Public Order Management Bill which passed parliament in August 2013, substantially hinders civil society activities and the enjoyment of fundamental freedoms (source: CIVICUS 2013)

Besides, the Rwenzori Region has its history of violence in the past decades in particular in the 1990s. Recently, in July 2014, almost 100 people were killed in clashes between Uganda's security forces and a tribal militia. The attacks took place in Kasese, Ntoroko and Bundibugyo, districts which have a history of anti-government insurgency and tensions among rival tribes competing for limited natural resources in the mountainous region, especially farmland. It has also been claimed to be a "protest against perceived historical marginalization by the central government" (source: Human Right Watch website).

Based on the CSO experiences and their development efforts over the last two decades in the Rwenzori Region, the initiative was taken to develop a Regional Development Framework in 2010. The regional CSOs started questioning themselves of what had gone wrong in their determination to contribute to regional development and what could be done in a different way to address development in a more coordinated manner. The Rwenzori Regional Framework is an attempt by these CSOs to provide an overarching guide to development efforts. KRC has been one of the most important initiators and facilitators of this process.

3. Project description

History

Kabarole Research and Resource Centre (KRC) is an indigenous NGO in Western Uganda that has been operating in the predominantly agricultural Rwenzori Region since its inception in 1996. KRC strives to improve the quality of life of poor people in the Rwenzori region. The organisation targets the rural communities and in particular the very poor in the seven districts of Kabarole, Kasese, Kamwenge, Kyenjojo, Kyegegwa , Ntoroko and Bundibugyo. Some of KRC's programmes target specific communities within these districts, depending on local conditions and needs. KRC has been a HIVOS partner since 1998 (source: KRC website).

Project history

In the period of the MFS II review which englobes 2011-2014 there have been three separate HIVOS funding arrangements (core funding and project funding) been made available to KRC. The three HIVOS-funded projects during the study period 2011-2014 have been the following:

1. Organisational funding for the period Jul 2010 - Dec 2012 Budget € 650,000
2. Building leadership research capacity programme; for 36 months up to March 2012 Budget € 360,000
3. Unlocking small holder farmers' potential for improved production, household food security and market access. Jan 2013 – Dec 2014. Budget € 185,577

The latter project is part of KRC's contribution to Cluster 1 of the Regional Framework that focuses on increasing production, food security, access to markets and income for both men and women in the Rwenzori Region. In this project KRC plans to enhance household food security as the main component with improving access to better markets as complementary.

Food Security and Income

The latter project "*Unlocking small holder farmers' potential..*" (2013-2014) has been developed under Cluster 1 of the Regional Framework that focuses on increasing production, food security, access to markets and income for both men and women in the Rwenzori Region. The overall objective of the project is to "increase household agricultural production and productivity for improved household food security, access to better markets and increased incomes by 2014". The project has three components: 1. Food Security, 2. Gender responsive interventions and technologies for FS, 3. Action research for evidence-based alternative approaches, and 4. Marketing.

The KRC food security component is being implemented in different sub-counties and focusing on various agricultural sub-sectors, including a) Food security in cocoa growing community in Bundibugyo District b) food security in grazing community in Ntoroko District c) Food security in a fishing community in Kasese District and d) food security in the maize farming community in Kabarole District. In complex situations, KRC will apply the evidence-based search for alternative development approaches to enhance food security. Moreover, the HIVOS-funded project includes a marketing component focusing on the further development of coffee, maize and banana value chains. KRC also envisages to strengthen the linkages with the private sector providing services as input supply, credit and market access (source: KRC project proposal to HIVOS 2012).

Civil Society Strengthening

KRC has played a major role in the development of a Regional Framework in which CSOs, local and district government representatives and institutions, research institutes and private sector will cooperate in a concerted and coordinated framework to bring Rwenzori region at a higher level of development based on more own responsibility and sustainability. Increased civic competence and consciousness of the rural farmers and citizenry to make informed choices and advocate for pro poor development policies are part of the realization of this strategy. KRC strategic conceptual framework is presented in annex 3 (source KRC Strategic Plan 2010-2015).

The earlier projects of KRC and supported by HIVOS intended to build stronger local development structures with two interventions. The first organisational funding (July 2010 – Dec 2012) was a programme (core) funding supporting the KRC programme as a whole on the basis of its Strategic Plan 2010-2015 called "Increasing Household incomes and Civic Competence for improved livelihoods".

The second HIVOS funding comprised the component 'building leadership research capacity' which in the first place involved the setting up of a 'think tank' that brings together local leaders and other key stakeholders from the region to engage in research for development, based on local needs and priorities. The programme proposes to subsequently feed these research results into local governance processes. Expected outputs include research papers, publications as well as knowledge events such as conferences and seminars.

Another initiative under this project was called the 'Face the Citizens – Let them ask' Campaign which intends to create meaningful dialogue and feedback between citizens and their elected leaders. The Face the Citizens initiative is a social and political accountability initiative originated KRC in collaboration with a number of other NGOs to facilitate platforms where leaders interact with citizens to give feedback and account for the time and resources in their political offices.

4. Data collection and analytical approach

The methodology applied during the baseline in 2012 and follow-up assessment in 2014 is a general one which is described in the methodological annex 1 (*note: still to be added*).

Key Outcomes selected for the contribution analysis

The key outcomes for the contribution analysis for all twelve CSOs under review during the endline in 2014 have been one related to Civil Society Strengthening and one related to advocacy and lobbying of policy makers.

In the case of KRC only one key outcome has been selected for the contribution analysis: the follow-up assessment focuses on the contribution of KRC to the development and implementation of the Rwenzori Regional Development Framework in the period (2010-) 2012-2014. The Rwenzori Development Framework has been selected because it is the overall guiding framework for the interventions of KRC in the region. As KRC had indicated it would have been difficult to pick out one isolated activity without considering the comprehensive Development Framework under which it has been formulated.

The KRC contribution analysis case study *“Contribution analysis of KRC to guiding regional development efforts through the Rwenzori Regional Development Framework”* is presented in the chapter 5.2.

5. Results

5.1 Relative changes 2012-2014

The assessment of changes was done against the indicators used in the baseline; the descriptive part for the endline is provided in detail in Annex . The scores of relative changes are given in the following table. The table further below presents a short description of the highlights on which the assessment of the Endline relative changes is based including the score given in the endline.

Criterion	1a	1b	2a	2b	2c	3a	3b	3c	4a	4b	4c	Total
Baseline	2	3	3	3	2	3	3	3	2	2	3	2,64
Endline	+1	=	+2	+1	+1	=	=	+1	+1	+1	=	+8

Score: Baseline 0-3 with 0 lowest score and 3 highest

Endline: = no change; + or – 1 little change better resp worse; + or – 2 substantial change better resp worse

Short description of the highlights explaining the relative score of relative change

Evaluation Criterion	Explanation of score relative of relative change 2012-2014
I. Civic Engagement	Positive development: +1 overall
1a- social engagement	KRC has included gender mainstreaming in programming - including planning and utilisation of resources - income at household level and how activities benefit women. KRC's planning is taking into account the social roles of women and their views and relationship between women and men. Use of the Gender Action Learning Systems (GALS). For this purpose KRC has developed a training manual for gender mainstreaming. KRC's research and advocacy interventions bring women on board by having views from them and their active participation.
1b- political engagement	Consolidated change
II. Level of organisation	Very positive development: +4 overall
2a-organisational level	KRC is the lead agency on the Rwenzori Regional Development Framework, a unique CSO initiative to bring all stakeholders of both Government, non-Government and private sector on board for a joint and comprehensive Regional Development Plan. KRC is hosting Cluster 3 on Leadership and Governance. It is a member of Clusters 1, 2 and 4. KRC is further an active member of many national CSO networks such as Civil Society Coalition on Oil and Gas, the Uganda Governance Monitoring Platform (UGMP), the Civil Society Network on Environment and Natural Resources, the Rwenzori Forum for Peace and Justice (RFPJ), the Netherlands Academy on Land Governance (LANDac), etc
2b-dialogue and communication	KRC has set up a Communication Centre with a radio station, a mobile communication centre and an information shelf with interactive talk shows and debates on various issues for information sharing. The Think Tank it had established is now mainstreamed under the Regional Development Framework. In collaboration with the RFPJ, KRC facilitated the production of a contextual analysis of the conflicts in the Rwenzori Region and how to solve the conflicts.
2c-financial and human resources	Dependency on external funding is still high but is expected to go down because of income-generating activities such as their coffee farm and radio station. Funding by HIVOS has been reduced from 48% in the period 2009-11 to about 15% in 2014. Further diversification of donors has taken place.
III. Practice of values	Positive change:+1 overall
3a-internal governance	Situation consolidated: from 2010 onwards the Board supervising the KRC has not changed. It has only been expanded by one person. This is according to the KRC constitution.
3b-transparency	Financial manual has been reviewed in order to be according international standards.

3c-internal management	Other manuals were reviewed as well. Conditions of labour improved for staff with regard to annual leave and post maternity leave
IV. Perception of Impact	<i>Positive relative change: +2 overall</i>
4a-Responsiveness	KRC continues to show a high response to specific needs and requirements; in the past years it has responded to the rolling out of the Social Assistance Grants for Empowerment (SAGE) Programme in 3 districts in the region by Government, for which KRC provided learning for the government implementation process. KRC is also participating in the interpretation of the Oil and Gas Sector laws, policies and bills and provided local leaders with information to enable them to demand for the prudent management of the Oil and Gas Sector.
4b-social impact	From the information provided by KRC there is substantial anecdotal evidence as well as initial quantitative evidence of the results (outcome level) of their activities for the local population. The M&E system developed does provide substantial quantitative information on project outcome and impact for all beneficiaries supported
4c-policy impact	KRC continues to lobby and advocate on a wide area of topics which are all by itself of relevance. However, given the wide array of topics included such as HIV/AIDS, Oil and Gas, Climate Change, Agricultural Extension, Public Order Management Bill, it may be asked whether KRC is not diluting its attention away from its goal of to expand "Livelihood Choices for the Poor"

5.2 Contribution Analysis

Case study:

KRC guiding regional development efforts through the Rwenzori Regional Development Framework

1.0 Case Background

What is the Regional Framework?

The Rwenzori Regional Development Framework is a deliberate effort by actors of both Civil Society, Local Government and the private sector to provide an overarching guide to development efforts in the Rwenzori. The process to formulate the Regional Framework started in late 2009 when an open-space meeting brought together more than 100 individuals from different sectors and organisations.

Through a series of consecutive consultations and discussions, it was noted that the programmes that were being implemented by the various actors and organisations did not specifically target impact at household level or promote grassroots linkages. They also lacked a regional perspective and were not guided by evidence of the real household needs. Many development programmes that were being implemented in the region did not take sufficient effort to understand the real needs of the people. As a result, the various programmes failed to have a real impact on the lives of so many grassroots communities and households.

The Regional Framework intends to emphasize realisation of impact at household level, promotion of grassroots linkages, taking a regional perspective and putting action research and reflective learning at the centre of all programmes. It aims at promoting value driven households that are skilled with a stable economic activity and can meet their basic needs. It also aims at supporting people initiated ideas. Thus, it seeks to capture knowledge and promote locally generated solutions within the development process taking into consideration the cultural values of society. Moreover, the framework provides an opportunity to actors of government, civil society and the private sector to harmonize their conduct and to measure results of their work against the commonly agreed objectives and priorities

Objectives of the framework

In this perspective the objectives of the formulation of the Rwenzori Regional Development Framework were formulated as follows:

- To provide an overarching framework to guide development in the Rwenzori.
- To provide an opportunity for collective action against agreed regional priorities
- To provide a code of practice to guide behaviour and practice by willing actors.
- Provide a new outlook to development through emphasis on “people initiated and people owned” initiatives.

From these objectives the different principles of the formulation of the framework stand out: a comprehensive frame guiding all development-oriented stakeholders for collective action according to common values of behaviour and practice and based on a bottom-up approach. All stakeholders contributing to the formulation of the Framework agreed on a number of points of departure, such evidence-based action, promotion of linkages and learning, developing rural business, and integrated planning and implementation with a regional perspective

The regional framework process was facilitated by KRC and SNV with financial support from Hivos.

2.0 Theory of Change

The result chain of the KRC has been presented in its Strategic Conceptual Framework as presented in its Strategic Plan 2010-2015 (see Annex 3). The Conceptual Framework builds on two major pillars of development action:

1. Farmer Enterprise Development, and
2. Human Rights and Good governance

Final Outcomes	Improved household livelihoods, Food security, Freedom of choice, Private sector development, and Civic competence	
Pillars	Farmer Enterprise Development	Human Rights and Good Governance
Intermediate Outcomes	<ul style="list-style-type: none"> - Increased household incomes - Increased savings and re-investment - Farmers’ access to credit increased - Farmers acquire entrepreneurial skills 	<ul style="list-style-type: none"> - Increased civic engagement - Improvement in governance structures (Local Government, Marketing Associations, Micro-finance Associations) - Increased participation of the community in the Local Government planning processes - Political and economic empowerment of women - Active civic participation in the electoral processes
Outputs	<ul style="list-style-type: none"> - Access to Markets - Climate change adaptation technologies - Entrepreneurship development - Credit access and management - Microfinance Advisory Services 	<ul style="list-style-type: none"> - Civic education - Enhanced leadership and governance - Social accountability - Rights promotion - Think Tank, Open Space and Knowledge Building
Assumptions	<ul style="list-style-type: none"> - Peace prevails in the region - Women take part in decision making at household and community levels - Elimination of corruption and diversion of resources in the Region - Increased agricultural financing - Citizens access information on their political rights and responsibilities - Citizens willingly advocate for their rights - Citizens willing to participate in planning processes - Women willingly engage with social accountability actors 	

Cross-cutting issues for both development pillars are identified to be : Climate Change, Leadership, Women and Youth Empowerment, HIV/ AIDS prevention, Environment and Regional Development.

The Regional Development Framework englobes both components of the KRC theory of change and is therefore considered by KRC to be a comprehensive framework to which its activities are to contribute. Hence KRC's interest to advocate and lobby for the development of such a Framework for Regional Development.

The theory of change in the Framework reads as follows: "The overriding assumption of the regional framework is that once households are economically viable with a stable source of income, they will be able to access other basic services such as education, health and water. Therefore, the regional framework will have an economic backbone with a particular emphasis on agriculture." (source: Rwenzori Regional Framework 2012).

3.0 Relevance and effectiveness

The Rwenzori Regional Framework was developed after the realisation that the different partners in the region were using different approaches and had various interventions with no coordination which resulted in duplication hence the need for harmonised approaches. There was also the realisation that coordination would enable the region to leverage on the capacities of the different organisations hence the need for them to partner and work together. In addition, there was also a change in the donor environment which necessitated the different actors to establish partnerships for joint activities. In order to strengthen Private Sector capacity for effective policy advocacy and market competitiveness, a symposium was conducted in March 2011 that brought on board Private Sector players to explore business opportunities and enhancing partnerships.

Given the enormous agricultural potential of the Rwenzori Region and its capacity to stimulate development in other aspects of human development, the Regional Framework prioritises agriculture for increasing household production, incomes and employment thus addressing income poverty and meeting household food security requirements.

In addition to agriculture, the framework aims at promoting youth and women empowerment and employment, environmental sustainability, good governance and leadership. As a result, the Rwenzori Regional Framework has four pillars: (1) production, food security, access to markets and household incomes; (2) women and youth empowerment and employment opportunities; (3) governance and leadership; and environmental sustainability. Through an agreed Code of Practice, the framework provides an opportunity to actors to standardise their conduct and to measure results of their work.

4.0 Results

In terms of results of the implementation of the Rwenzori Regional Development Framework, an assessment is made of what has been achieved under the different pillars in particular the pillars to which KRC is actively contributing.

Realisation: pillars and clusters

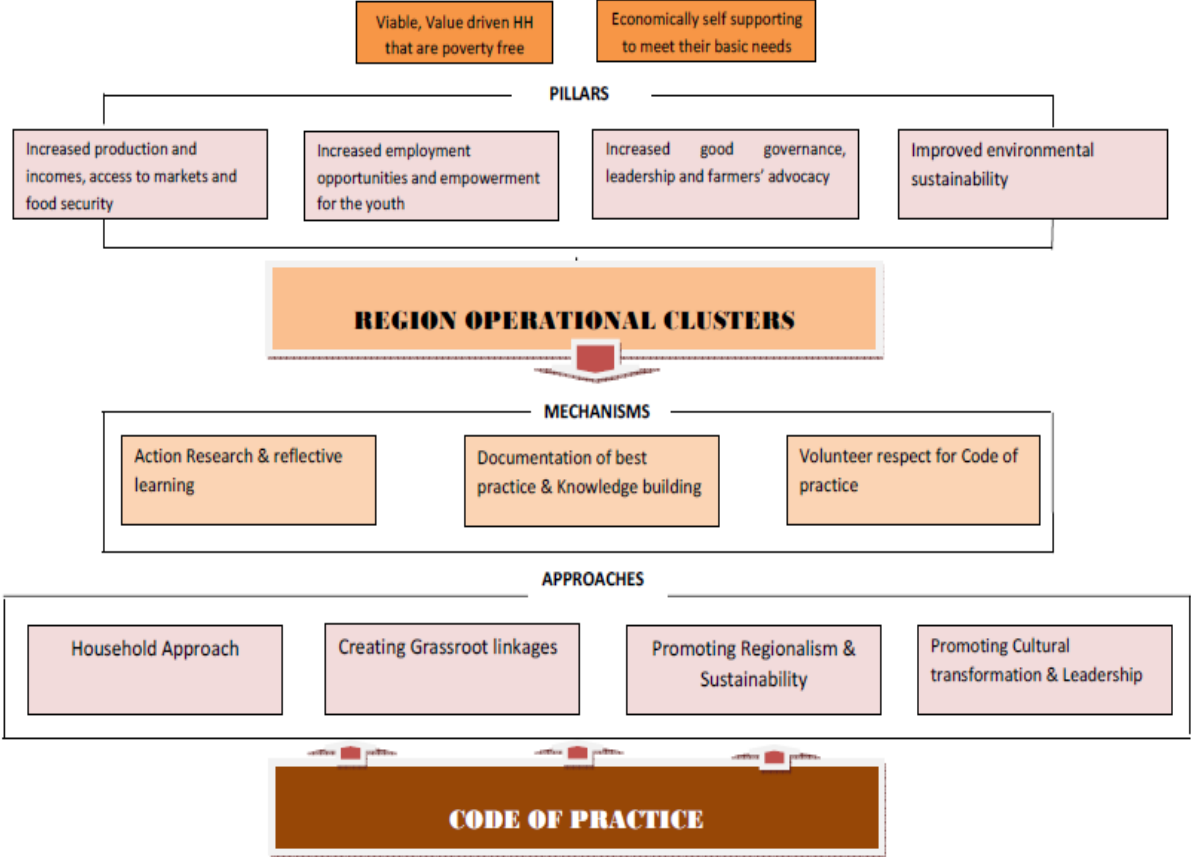
After a period of about two years of preparations and meetings, the Rwenzori Regional Development Framework was officially launched in 2012 and was, subsequently adopted as a planning tool for the various districts in the Rwenzori Region.

The regional framework has been anchored on 4 pillars:

- Pillar 1: Increased production, food security, access to markets and household Incomes
- Pillar 2: Increased women and youth empowerment and employment opportunities
- Pillar 3: Improved governance and leadership
- Pillar 4: Environmental sustainability

Based on these pillars of the Regional Framework, clusters of civil society organisations were organized with a particular interest and experience in the pillar: Food Security Cluster, Youth and Women Empowerment Cluster, Governance Cluster and the Environment Cluster. Through these different clusters, the organisations partner to address one goal with each organisation focusing on what it can do best. The organisations in a cluster develop joint proposals and jointly fundraise for a programme. In order to meet the different needs of their beneficiaries, the different Clusters also work together. For example, to be able to address gender issues in income generating projects, the Youth and Women Empowerment Cluster, the 6 Broederlijk Delen (BD) partners namely Community Agro-Business Capacity Services (CABCS), Community Sustainable Link (COSIL), Kiima Foods, Joint Efforts to Save the Environment (JESE), KRC and Sustainable Agriculture Trainers Network (SATNET) are involved in a joint project that promotes Gender Action Learning Systems (GALS) in value chain development in Kabarole, Kasese and Kamwenge Districts.

Figure: Conceptual Framework for Regional Development Framework



Source: Rwenzore Regional Development Framework 2012-2016

In terms of coordination it had been agreed that KRC was to become the overall Lead Agency by providing leadership in the operationalization of the Regional Framework. At the level of the operational Clusters for each Cluster a Host Organisation has been identified responsible for the convening of all actors in that particular Cluster. The Host Organisations are: Community Agri-Business Capacity Services (CABCs) for Cluster 1: Food Security and Income; the Rwenzori Women’s Forum for Cluster 2: Youth and Women’s Empowerment; KRC for Cluster 3: Leadership and

Governance; and Joint Efforts to Save the Environment (JESE) for Cluster 4: Environmental Sustainability.

Implementing the Framework

Upon the launch of the Framework several activities have taken place. In the first place for each of the four pillars conceptual documents have been prepared for the period 2013-2017.

The 7 District Local Governments took part in the designing of the Regional Framework which led to ownership of the various development interventions. The Regional Framework has, therefore, enabled the various stakeholders and the 7 districts in the region to work together. The Rwenzori Regional Framework has been adopted as a planning document for the districts of the Rwenzori Region – and most of them ratified the document in their respective councils.

The Regional Framework has brought in the focus on the household approach. As previously District plans were being made without surveys to bring out the household needs the focus on households was rather missing. Meanwhile KRC has implemented household surveys and shared the information with the Districts.

Cluster 1: Food Security and Income

The programme under the Food Security and Income Cluster is targeting 500,000 smallholder farmers (52% women) organized in over 100 Farmer Marketing Associations / Cooperatives in all seven districts of operation. Fifteen member organisations have been identified to contribute to the Cluster programme expected outcomes. The Cluster document includes a proposed budget of around EUR 1,5M (source: Cluster 1 2013-2017 concept).

Under the same Cluster 1, the KRC activities have been focused on Food and Nutrition Security, Gender, Action Research and Marketing. The KRC Food Security project activities are implemented by the Farmer Enterprise Development Unit (FEDU) which will work closely with other cluster members promoting similar interventions to reflect and enrich the implementation processes (source: KRC project document 2013-2014)

The preliminary results of the KRC activities are being presented in Annex 5. These results refer to the month of November 2013, the latest report made available to the MFS II research team. As the Food Security project only started in the beginning of 2013 a direct assessment of outcomes in terms of Improved household livelihoods, Food security and Private sector development is difficult to make. Though anecdotal information (see box on SACCO) indicates on positive results of KRC activities under this Cluster 1.

“As a Savings and Credit Cooperative (SACCO) we have established a store for maize and beans which we are able to sell at a good price. Because we use the right spacing and also plant in lines, we now harvest 15 bags of maize from an acre instead of the 5 which we used to harvest from one acre. We used to sell bananas at Shs 3,000 a bunch. Because of the training in banana management, we now have bigger bunches which we sell at Shs 30,000. Our SACCO gives us loans for paying school fees and for other household needs”.

Iruhuru United Organic Farmers members.

From the available KRC project document, annual reports, project report and monitoring data, it is not clear how KRC has integrated the project activities in the Regional Framework. Whereas the project document makes reference to the Regional Framework in general terms (“*The Project shall be implemented by Farmer Enterprise Development Unit (FEDU) mandated under the food security Cluster of the Regional Framework*”), it is not clarified how the activities and results are contributing to the Cluster 1 programme and in particular the expected outcomes. Nor is there mention of any collaboration with the partners from Cluster 1. Only external parties are being mentioned.

With regard to the District Local Government it has been assessed that as a result of improved knowledge on farm household needs and requirements, their support and that one of other stakeholders is now much more focusing on the household priorities and needs. In response to this attention, people have become motivated to set up SACCOs for accessing credit, and to set up income generating activities.

Cluster 2: Women and Youth Empowerment

The Women and Youth Empowerment and Employment programme under Cluster 2 has several sub-components such Women & Youth in Agriculture; W&Y in Reproductive Health; and Youth in Education. The different components are targeting different grouping but in the first place young people between the age of 10 and 24 and women of reproductive age. Fifteen member organisations have been identified to contribute to the Cluster programme expected outcomes. The Cluster document includes a proposed budget of around EUR 0,35M (source: Cluster 2 2013-2017 concept).

KRC is part of this cluster and detailed reports are available on the contribution of KRC to this specific Cluster. In case the gender related activities (objective 2 and 6) of the KRC HIVOS-funded 2013-14 project are taken into consideration, the first results are available in Annex 5. One of the most significant results is the introduction of the labour and wood-saving stoves, which according to monitoring figures saves 29% of time and reduces firewood consumption from 13 to 7 pieces and firewood expenditure from 4,174 Uganda shillings to 2,655 Uganda shillings per day (Source KRC annual report 2013 and KRC website).

Under Cluster 2 HIVOS is also separately funding the Women and Youth Empowerment project from May 2014 till October 2015 (budget € 69,700).

Cluster 3: Governance and Leadership

The programme under the Governance and Leadership Cluster is targeting 300,000 people directly including District Authorities, women and youth groups, professional associations, farmer groups and citizens. In particular Face the Citizen Campaigns and Village Meetings are important events to engage with the target population. Awareness raising and advocacy are important strategies under this Cluster. Nine organisations are member of this Cluster and intend to contribute to the Cluster 3 expected outcomes. The Cluster document includes a proposed budget of around EUR 0,88M (source: Cluster 4 2013-2017 concept). During the contribution analysis study, a number of specific campaigns and engagement platforms under Cluster 3 were mentioned:

Campaigns

- *Face the Citizens Campaigns*

Two districts have organised a “Face the Citizens Campaigns” on their own and have, therefore, taken it on as a practice. To enable effective civic engagement, KRC does research and disseminates reports and policy briefs. For example, in the three Districts of Kasese, Kabarole and Kamwenge, KRC conducted in partnership with the NGO Forum, an audit on the ruling party’s manifesto to be able to establish the performance of the NRM Government. The audit involved meetings with leaders and use of questionnaires and focus group discussions to establish how NRM was fairing in relation to her Manifesto. KRC is going to disseminate a report and a policy brief of the findings of this research.

“The Regional Framework enables the 7 districts to engage government as one region and work as one block. This has given us many opportunities including engaging with the Office the Prime Minister which led to increased funding from US\$ 200 billion to 600 billion from the Luwero-Rwenzori Fund.”
Hon. Richard Rwabihunga, District Chairperson, Kabarole District.

Platforms for collaboration and engagement

KRC has established various platforms for collaboration between partners and through which communities have constructive engagement with leaders at all levels through public debates. These include the Rwenzori Think Tank, Kasungu Leaders' Retreats, the Face the Citizens Campaign, the District Leadership Groups (DLGs) and the Members of Parliament and the Speakers Forums.

- *Rwenzori Think Tank*

In the first place the mainstreaming concerns the Rwenzori Think Tank spearheaded by KRC and the Mountains of the Moon University (MMU) The Think Tank which was first established in 2008 plays an important role in analysing development issues in the Rwenzori Region. It brings together all development stakeholders in the region thus enabling actors to work together as a regional bloc rather than pursuing individual constituency interests. The Think Tank provides a platform where regional leaders focus on discussing regional interests. The Think Tank, therefore, is a development platform for incubating development ideas and generating knowledge to enhance practical and evidence based decision making at planning, implementation and policy making levels.

The major focus of the Think Tank is (periodic or continuous) regional contextual analysis and updates, action oriented research, policy analysis and advocacy as well as facilitation of regular debates and dialogues on regional development, innovations and development initiatives. Through the Technical Team of the Think Tank, research was done on climate change and adaption and on maize value chain, soil fertility and management of bananas with the research results being disseminated to the different stakeholders in the region for uptake.

In a report on food security released in 2013 by the Rwenzori Think Tank, it appeared that Bundibugyo district has the highest number of children below 5 years with stunted growth in the Rwenzori region with more than 600 children suffering from malnutrition. Most farmers have abandoned growing food crops such as bananas, potatoes, cassava, and switched to cocoa, a move that has contributed to food insecurity in the district. As a result of the research the district has set-up a nutrition unit where malnourished children can be treated and where mothers are provided with skills and knowledge how to improve the nutritional status of their children.

- *Regional MPs Forum*

The Regional MPs Forum comprising of all members of parliament from the Rwenzori Region, is playing an advocacy role at national level by influencing sector committees of parliament and line ministries. For instance, the MPs Forum played a key role in organising the Climate Change Week which climaxed with the handing over of a petition on the state of the environment, Climate Change adaptation and food security to the Speaker of Parliament.

“Two years after the elections, the Face the Citizens Campaign enabled citizens to engage with the district leaders. These forums not only avoid leaders being their own bosses, they enable the leaders and those affected by various issues to agree what to do in future. These forums create awareness among the citizens on various development issues and are also used by the citizens to condemn corruption”.

Hon. Herbert Mugisa, LC3 Chairperson, East Division, Fort Portal Municipality.

- *Kasungu Leaders' Retreat*

On the other hand, the Kasungu Leaders' Retreats bring together political, religious, civil society, cultural and private sector leaders from across the Rwenzori Region to discuss regional development challenges. One such retreat focused on peace building, an area that is important given the cultural conflicts in the region. It is the Kasungu Leaders' Retreats that recommended the formation of the Rwenzori Regional Think Tank and the Regional MP Forum. A workshop on the Oil Bill helped to educate the citizens on the Oil Bill and also enabled the citizens to engage with the MPs through the Regional MPs Forum and give their views on the Bill.

- *Citizens Platforms*

In addition to the leaders' platforms, there are platforms that bring citizens together. These platforms have been instrumental in getting the citizens to engage with their leaders and demand for accountability. The Face the Citizens Campaign platforms which are held in the various parts of the region enable leaders to give accountability in relation to their various manifestos and to explain to the citizens what the DLGs have done in the various sectors including education, water, roads and health facilities. The platforms not only enable the electorate to engage with their leaders, they expose the inefficiencies in the service delivery system leading to citizens demanding leaders to act. The platforms have, therefore, closed the gap between the leaders and the communities and also bring out people's priorities which inform the district plans. Although DLGs are controlled by national and donor policies, citizens' engagements with leaders to demand for accountability has made the leaders conscious of their responsibilities.

Through the Regional Framework therefore, there has been sensitisation of citizens on their roles and the responsibilities of leaders. Through radio talk shows, there is engagement with leaders and technical personnel on issues which affect the citizens such as having no drugs or health workers in health units thus enabling communities to hold leaders and service providers accountable.

"We now know about our rights. We know about government programmes and how people can benefit from them. Our sub-county had poor services because people did not know their rights and did not know where to go. We now interact with the leaders including the LC5 Chairperson and with the technical teams. Because people know their rights, they attend the various meetings that are held to talk about development. People who are living near the National Park were being punished for collecting firewood from the Park. Animals from the Park were destroying our crops. There is now dialogue with those managing the National Park. There is revenue sharing with the Sub-county which has led to the construction of a trench which has stopped animals from destroying our crops."

Change Agents of Nyabweyo Parish, Kasende Sub-County.

The Regional Framework, has therefore, resulted into the monitoring of the implementation of various government programmes including the National Agricultural Advisory Services (NAADS) and Universal Primary Education. Through Issues Papers, an analysis of the various government programmes are done. These papers give evidence from beneficiaries and are used to engage with the DLGs on the various development programmes. In addition, through sensitisation done using village meetings and sub-county rallies, communities get issues of concern which are brought to the attention of the various leaders including LCs, Sub-county and district leaders and MPs. Through such awareness, Kyabweire Youth Brick Making Project in Karungura Sub-County received a grant Ush 3,450,000 from the District's Livelihood Programme to boost their brick laying project. The Disabled, who were mobilised by the Change Agent to form a SACCO also received Ush 2,000,000 from the District Disability Grant. In addition, People with Disabilities (PWDs) are also being taken to school which was not the case before. The Regional Framework has attracted organisations from other regions such as Northern Uganda to come and learn from the experiences of the Rwenzori Region in regard to organisations working together, harmonising strategies and not competing for resources.

- *Cross-Cluster communication*

There is also information sharing through the various Clusters and Cluster members. For example, KRC has information on the regional activities on its website while Rwenzori Information Centre Network (RICNET) has information for farmers on food security. Through collaboration between the Mountain of the Moon University and Makerere University, they provide market information. The Cluster partners also participate in the Annual Civil Society Fair which is being held on rotational basis in the 7 districts in the region. The Fair functions as an outreach programme while the Mobile

Cinema shows films on various development initiatives including agriculture, governance, HIV/AIDS and Climate Change.

Cluster 4: Environment and Sustainability

The programme under the Environment and Sustainability Cluster is aiming at an accelerated community response and adoption to appropriate environmental management practices through research, development of alternative livelihoods, awareness creation and advocacy, and knowledge management. Twelve organisations are member of this Cluster and intend to contribute to the Cluster 4 programme expected outcomes. The Cluster document includes a proposed budget of around EUR 1,11M (source: Cluster 4 2013-2017 concept). Specific activities realized under Cluster 4 are:

- *Climate Change Week*

The Environment Cluster leads the Climate Change Week which aims at creating awareness on the effects of Climate Change and its impact on development. Through photography, mobile cinema and art, communities which have little knowledge on Climate Change get to know about Climate Change and the various ways of Climate Change adaptation.

- *Community dialogue for the environment*

In the Rwenzori Regional Framework with regard to Environment and Climate Change, advocacy interventions on the environment and climate change focus on conducting public and community dialogues to ensure effective participation of civil society, local communities and indigenous peoples' in national programmes/processes on environmental and biodiversity conservation so that they are afforded the opportunities to influence decisions that impact their livelihoods. There is also focus on documentation and dissemination of best practices and policy briefs and reports. A Climate Change week was organised with substantial inputs from KRC, and with the Rwenzori Think Tank and elders an agreement was reached on the way forward including taking on irrigation beginning with model villages in Kabarole. The Annual Street Art exhibition on climate change, an initiative of KRC and Jabulani Africa, communicates climate change in simple ways. The 2012 event organized under the theme "Communicating Climate Change through Art", was attended by over 500 people. In 2013, the event became bigger in terms of participation and audience coverage, with a specific message on "Clean and Efficient Energy" with the aim of promoting alternative energy technologies that reduce energy costs, pressure on forestry resources and ensure health environments.

- *Mpanga River Catchment Consortium*

Reflecting the need for enhanced collaboration as identified in the Regional Framework the Mpanga River Catchment Consortium (MRCC) was created. Following the Climate Change Week in 2011, JESE, KRC, Toro Botanical Garden (TBG), Mpanga Tea Growers Company and Care International formed the MRCC after realising that the River Mpanga Catchment Area was threatened by Climate Change. The aim of the Consortium is to protect River Mpanga from pollution and destruction. It is thus a concerted approach to conserve the water and forest resources lying within the Mpanga River Catchment area.

RMCC is growing to implement joint actions that stimulate farming communities and leaders into wholesome consciousness of natural resources management and climate change. To begin with, the Annual Street Art Climate Change Exhibition and on-going training of members to effectively engage in issues

"Through the Environment Cluster, CARE International developed a Master Plan for the protection of the Kilanga Wetland. In addition, CARE International and JESE are involved in forest tracking to avoid illegal activities being carried out in forests." *District Chairperson, Kamwenge District.*

climate change, environment and natural resource management.

Member organizations are also using different tools to promote integrated water resource management (IWRM) including the Mpanga Game, Planting Indigenous Tree species, Mobile Cinema, 3Rs (retention, recharge & reuse) Approach and Ecosystem Based Approach

- *Oil and Gas in Rwenzori*

With regard to Oil and Gas development in the Region, a conflict analysis report done in 2012 linked tribal clashes and the emergency of three cultural institutions (Basongora, Bamba/Babwisi and Banyabindi) to the excitement on the Oil and Gas sector. The report concluded that both the old and new cultural institutions were readying themselves to benefit from the sector. KRC organised a regional dialogue with Tullow-Uganda where the Government of Uganda and Oil Companies updated stakeholders in the Rwenzori region on the Oil and Gas sector. Through talk shows, radio, magazines and puppet theatre, KRC made communities aware of emerging issues in the sector. As a result, KRC organised community dialogues at village, district and regional levels which gave the communities and leaders a chance to actively participate and demand for the prudent management of the Oil and Gas Sector.

5.0 Contribution Analysis

KRC as initiator, lead and host

In terms of contribution to the realisation of the Rwenzori Regional Development Framework, it has become quite clear that the role of KRC as initiator and incubator of the idea to bring together many different actors, has been significant. On the basis of their experience of about 15 years of dealing with all kinds of different development approaches (open space methodology, action research, information and communication strategies, citizen engagement and promotion of transparency and accountability, etc) KRC has been able to initiate and co-facilitate the process of the formulation of the Rwenzori Development Framework. Building upon its strength and reputation as an solid, creative and dynamic civil society organisation which it has developed overtime, KRC has been able to bring together about more than 100 individuals interested in reflecting on the development challenges of the Region and to contribute to the Framework formulation.

- *Information and Communication*

One of the main strategies of KRC to influence the debate on Regional Development and formulating a Framework for Development, has been the implementation of research in order to be able to analyze the livelihood situation and context of rural households in the Rwenzori Region, and to disseminate information about the findings, either through reports, radio, awareness sessions or policy briefs. One of the important conclusions of many studies indicated at the overall lack of impact of development organisations at the household level. KRC has actively contributed to the reversal of the orientation of – in particular government programmes – to be more focused on households needs and requirements.

Research done by KRC has pointed out where the weaknesses in the various government programmes are. Besides, by availing agricultural information to farmers through radio programmes, KRC has contributed to building capacity of farmers to enable them to benefit effectively from the various government programmes including NAADS, which has been a total failure in other parts of the country. Sensitisation on the Budget Conference at parish level has led to citizens participating the in the parish Budget Conferences with the outcomes feeding into the Sub-County/Division, then into District/Municipality and then into the national budget. As a result of the sensitisation on governance and accountability, there are development centred programmes supported by DLGs which are focusing on household incomes.

Access to information has played a key role in the success of the various engagement platforms and in particular during the formulation process of the Regional Development Framework. Through radio programmes, there is sensitisation of people on their rights and the need for them to demand for accountability. In addition to the community sensitisation on governance and accountability done through radio, there has also been sensitisation through drama. KRC re-packages the different information which is used by Change Agents in their sensitisation sessions. The Change Agents who were interviewed by the Evaluation Team confirmed that they empower the people by giving them information on their rights and responsibilities.

- *Platforms for collaboration and engagement*

Under the Leadership and Governance Cluster of the Regional Framework – hosted by KRC - the above mentioned platforms for collaboration and engagement have been mainstreamed as one of the mechanisms for dialogue between different stakeholders including civil society and government organisations. This concerns the Rwenzori Think Tank as well as other platforms that bring different stakeholders together such as the Regional MPs Forum, the Kasunga Leaders’ Retreats as well Citizen Platforms.

KRC has played a very active role in promoting these different platforms which have proven to be able to stimulate debate, mutual learning and civic engagement with local government.

- *KRC as lead and host*

However, to initiate and finalize the process of Framework formulation is another issue as to lead the implementation of the same. Despite the fact that budgeted concept programmes for each of the Clusters have been prepared, the implementation of the activities is not very visible and well-documented. The study team did not reveal any of the quarterly Cluster progress reports nor a Framework Annual report as was being proposed in the Framework document. Hence the progress of the implementation of the Framework could only be understood from individual interviews. The role of KRC as a lead agency and host of Cluster Three is therefore less visible.

The intention to develop joint projects and find joint funding has hardly materialized. Joint planning of activities has only been the case in the Mpanga River Catchment Consortium. Fundraising in partnership with other CSOs in order to work in harmony has only been reported to be the case with the HIVOS-funded Women and Youth Empowerment project 2013-2014.

Negative Factors influencing the realisation of the Framework

- *Partnership with financial institutions*

Currently, some farmers in the Rwenzori Region are not able to access loans for agricultural activities from formal financial institutions such as Housing Finance Bank as they do not have securities including land titles and vehicles. The financial institutions are invited to the various platforms of the Regional Framework in which they showcase their various products. Though there is a formal collaboration as an MOU has been signed between KRC/ Cluster on Food Security, Production and Markets to enable individuals/ farmers associations to access loans from the formal financial institutions, apparently not all problems related to access to credit have been solved.

- *Alignment of the Regional Framework with the National Development Plan*

CSOs operating in the Rwenzori Region are addressing a very small component of the development needs of the region and are, therefore, reaching a very low population. Since the government has an obligation to address the social and economic development needs of the population, it is important that citizens engage with the government to ensure that it meets its obligations. In the Rwenzori

region, citizens have engaged with the LGs on the various government programmes including NAADS, the non-functional health facilities, the functioning of the Universal Primary Education (UPE) and the budgetary allocation to the agricultural sector which is too low to meet the development needs of the sector. However, the Regional Framework is currently not aligned with the National Development Plan which means that the DLGs cannot support the Cluster activities.

5.3 Relevance of results

The Rwenzori Regional Framework has played a key role in strengthening the different NGOs in the region and to enabling the different stakeholders to focus on common issues. It has increased the visibility of the region and also played a role in getting the citizens to influence district programmes and to have an input in some bills and policies including the Oil Bill. However, due to lack of resources, only a few members of the various Clusters participate in the Cluster activities. There is also a challenge related to capacity as members of some Clusters are weak. For example, the Youth and Women Empowerment Cluster which is comprised mostly of Community Based Organisations (CBOs) needs interventions aimed at building their capacity in organisational development so as to be able to function effectively.

KRC which is the Lead Agency in the Regional Framework has an active Board, qualified staff and is respected by the various stakeholders in the Region. As a result, the various stakeholders are willing to work with KRC to operationalize the Regional Framework.

Sensitisation of the citizens on their rights and their leaders' responsibilities through the mass media and various platforms has led to their engagement with DLG leaders which has led to the LGs addressing citizens' needs. The Regional MPs Forum presents an opportunity for the people of Rwenzori Region to influence the contents of the various Bills before they passed into Law. This opportunity should be utilised so that the people of the Rwenzori region influence the content of most Bills before they are passed into Law.

The various successes achieved including holding leaders accountable and monitoring various government programmes needs to be widely shared in the country to enable other regions to learn from the Rwenzori experience of holding DLG leaders accountable and having government programmes benefit the citizens. Secondly, the idea of the Regional Framework also needs to be shared widely so that the DLGs and other stakeholders in the various regions in the country work together so as to ensure that there is coordination and harmonised approaches and that the different development interventions leverage on the capacities of the different stakeholders.

While the various DLGs acknowledge that the Regional Framework has been instrumental in improving the development interventions in the Rwenzori Region and have gone ahead to ratify it, they are yet to use it as a planning tool and therefore to align it to the DLG development plans. There is, therefore need for KRC to engage with the DLGs to ensure that future DLG development plans use the Regional Framework as their planning tool.

The Kasunga Retreats which are held annually have no follow-up mechanisms at district and sub-county levels. For the Regional Framework to be able to effectively address community needs, there is need to have district and sub-county follow-up meetings so as to have the issues agreed upon in the Retreats to be taken on at the district and sub-county levels.

With regard to the funding of the Clusters: The Food Security Cluster is supported by Broederlijk Delen in addition to Hivos funding to KRC, Youth and Women Cluster under the Rwenzori Women

Forum is supported by Hivos and as pointed out earlier, the Leadership and Governance Cluster is being supported by DGF under the RASA programme and RFP. The Cluster Host, however, takes the lead in mobilising resources for the Cluster which is not an easy task given the fact that major donors such as USAID continue to fund projects and not providing funding to the NGOs through the Regional Framework.

6. Discussion

1. The three HIVOS-funded KRC projects implemented over the period 2011-2014 (Core funding for the KRC strategic programme; the Leadership Building project through the Think Tank approach; and the Unlocking Farmers potential) were all well-designed and suitable for the local, regional and national context in which they had to be implemented. KRC has been able to formulate these programmes on the basis of their long-standing experience in the area of Farm Household Development and Civic Engagement, Lobbying and Advocacy. Through their research and information component KRC has developed a problem-oriented knowledge base on which the programme proposals have been written. Besides KRC has been able to engage with Local Government on a critical but affirmative way, thus making collaboration with different levels of Government possible.

2. The very interesting experiences with the development of the Rwenzori Regional Development Framework engaging so many civil society organisations, local government, university and private sector has created a concerted reflection of the development needs of the Region. Moreover, the development of platforms for reflection and communication such as the Rwenzori Think Tank, the Regional MPs Forum, the Kasunga Leaders' Retreats as well as the Face the Citizen Campaign, are creative and innovative examples of Civic Engagement and promoting Leadership and Governance. It would be recommended to HIVOS or likewise donors to continue funding a solid, dynamic and creative organisation like KRC.

3. However, the implementation of the Rwenzori Regional Development Framework poses problems. Though the reasons for this were not thoroughly investigated during the study – the process was still at its beginning, there seems to be a need to get a better alignment with local development planning processes feeding into the national planning process; secondly the potential donors of the identified and prioritised projects should already have engaged right from the beginning in order to have a better outlook towards funding; and lastly there should be a better system with regard to progress monitoring and communication within Clusters and between Clusters. This is a major role.

4. The impact evaluation could be improved by implementing the assessment over a longer period of time. And given the limited time available making information available by the different stakeholders involved should be given a priority. A single time evaluation could be sufficient for this type of impact evaluations.

5. The mechanism of co-creation by bringing into the process different stakeholders (multi-stakeholder approach) appears to be more effective than to focus on just one single intervention.

7. Conclusion

Changes in Civil Society Strengthening 2012-2014 for KRC (See 5.1 and annex 2 for more detail)

- Dimension 1: Civic Engagement: Positive change of social engagement by giving more attention to gender mainstreaming of their engagement with the farm households; Policy engagement has remained at a similar level, but this was already at a very high level.
- Dimension 2: Level of organisation: Very positive changes. A well organized organisation as KRC has been able to make improvements for all three identified criteria: engagement with other civil society organisations, communication and dialogue and financial dependency. For these criteria KRC has developed very clear strategies which have given rise to concrete and positive outcomes.
- Dimension 3: Practice of values: at this dimension no major changes have occurred. The highest score of 3 for the baseline in 2012 has remained though not equally for all three criteria. The main concern here is position of the Board which has remained the same over the past four years. On the other hand transparency is still very good and the internal management has improved by the positive changes in labour conditions of staff in particular for women.
- Dimension 4: Perception of impact: This dimension has slightly improved from the high level already achieved during the baseline. KRC has proven to be an organisation responsive to new challenges and emerging issues both at regional as well national levels. It has also continued to be a very relevant actor in terms of lobbying and advocacy through its well elaborated and creative approach to political engagement. When it comes to social impact KRC has set up an M&E system in 2013 which will deliver the facts that its ultimate beneficiaries of farm households are able to grasp the benefits of its actions.

Attribution of changes

- KRC has played a pivotal, innovative and solid role by initiating and leading the process of the formulation of a Development Framework for the Rwenzori Region in close collaboration with many stakeholders from civil society, local government, academe, and the private sector.
- KRC has not claimed ownership of the process but has given space to others to be part of it, to participate and to contribute. This is reflected both in the document itself, the strategies developed for the different pillars and to a lesser extent during implementation.
- KRC as overall lead and co-host of Cluster 3 has so far been able to keep the momentum of the formulation process during the implementation of the Development Framework. As a lead organisation it has contributed to develop a strategy to bring donors on board at an early stage, to align and mainstream the formulated priorities and activities into the district development planning process, to bring on board relevant players such as agricultural finance institutions, and to keep communication and reporting on progress by participating actors at a required level. It appears that upon approval and launch of the Framework, partners have had a tendency to go back to their own business.

Relevance of the changes

- The development of the Regional Framework has been very relevant as it is based on the analysis that different partners in the region were using different approaches and had various interventions with no coordination which resulted in duplication of efforts. There was also the realisation that coordination would enable the region to leverage on the capacities of the different organisations. Thirdly it was realized that the impact at beneficiary level – farm households – was relatively low, with poverty levels remaining well above national average.
- With regard to political engagement the involvement of local government and the acceptance by various councils of the Framework has been relevant for the potential of Regional Development. In particular the momentum created by the Face the Citizens Campaign has made the Local Government more sensitive to the delivery of appropriate services to its population.

- Through well-informed communication messages on the basis of action research and social engagement, partners have been able to shift the focus to the household approach as the main unit for identification of needs and requirements for joint action.

Explaining factors to identified changes

- The lead and pivotal role of KRC as initiator and co-facilitator of the process to formulate the Regional Development Framework on the basis of their capability to undertake problem-oriented action research, their capability to engage with both the local population as beneficiaries, and the to engage with political actors, to convene so many different actors in the development process and their capability to communicate and make relevant information available to a wide array of actors.
- The shared analysis that harmonized and joint action is a necessity in order to be able to have impact.
- The political will of local government, local MPs to engage with the local population in order to identify gaps in service delivery and to be able to formulate commonly agreed actions to overcome the deficiencies.

Assessment of project design

Statements	Scores
The project was well designed	9 (10/10/7)*
The project was implemented as designed	8
The project reached all its objectives	8
The observed results are attributable to the project interventions	9
The observed results are relevant to the project beneficiaries	7

Scale of Scores: 'Not at all' (1) - 'Completely' (10)

* Note: there are three projects involved in the period under study (see Chapter 2)

Annexes

- 1. *Short description of the MFS II CSS baseline and endline methodology applied***
- 2. Table with the Description and scoring of relative changes CSS 2012-2014**
- 3. List of people interviewed**
- 4. KRC Strategic Conceptual Framework**
- 5. KRC project outputs per Nov 2013**
- 6. List of documents consulted**

Annex 1: Brief overview of the methodology applied

Introduction

During the baseline 2012 and the endline 2014 a general methodology has been developed for the Civil Society Strengthening SPO studies in Uganda which has been applied to all SPOs in more or less the same way. This methodology has followed the Civil Society Index methodology with a major focus on the perception of social and political impacts as a result of the activities of the SPO under review. A methodological guide has been developed based on the earlier developed Baseline Methodological Guide and discussions with the Wageningen University CDI studies for Civil Society Strengthening, in particular contribution analysis (*see Methodological Guide Endline 2014*). As has been described in the Baseline report, the Uganda study intends to make a comparison of the changes of the five Civil Society Index (CSI) dimensions over the period 2011-2014. In 2012 the Evaluation Framework has been developed on the basis of the Civil Society Strengthening Assessment Framework also known as the CSI as developed by Civicus. The five pillars as prescribed by the MFS II evaluation framework has been elaborated into a set of 25 indicators (excluding the context description). The CSS Evaluation Framework for Uganda has been applied unchanged in both the baseline phase as well as the endline.

In the endline of 2014 the focus has been on the dimensions of Civic Engagement (social engagement and political engagement; dimension I) and the Realised (or perceived) Impact of their social and political engagement (dimension IV). But the scoring and description of relative changes has been done for all 25 indicators including dimensions II (Level of Organisation) and III (Practice of Values).

No monitoring has been undertaken in 2013 as there was no budget available. Furthermore, the period between the baseline and the endline was already relatively short to assess impact.

Endline 2014 SPO selection and reporting

In the baseline 2012, 17 SPOs had been randomly selected from the long list of about 120 SPOs being supported by the Dutch MFS consortia. In addition the 8 SPOs under the 5C study have also been addressed with regard to their Civil Society Strengthening. From the original 17 SPOs under the CSS study, 13 have been retained for the endline study at the start of the endline.

The Criteria which have been used for the selection of the SPOs to be included in the endline were:

- a) Selecting the SPOs that will be part of the process tracing exercise (before fieldwork).
- b) Selecting the specific outcomes that will be analyzed using the process tracing methodology.

From the 13 SPOs retained for the endline, finally 3 organisations have not been included. It appeared to be too complicated and time-consuming to include the two SPOs of the Capacity Building exercise. They could only be included towards the end of the endline exercise as the Uganda CapDev ETC team was still working with these organisations. A third SPO was left out as they did not wish to collaborate during the endline exercise also for reasons of being included in the MDG evaluation. Finally only eight out of ten remaining organisations have been reported upon for the endline 2014 as the lack of data consistency for the two remaining made it impossible to sufficiently address the evaluation questions.

Methods/ techniques

During the baseline 2012 and the endline 2014 the following methods have been used:

1. Before/ after comparison

Upon completion of the 2012 CS baseline study a clear picture of the Civil Society Strengthening efforts by the individual SPOs both in terms of Civil Society engagement as well as lobbying and

advocacy (political engagement) had been made. This was realized by taking stock of what was the situation in 2012 since the start of the individual projects one or two years earlier on the basis of the indicators as formulated for the baseline.

A similar assessment has been made in 2014 during the endline analysis when a description has been made of the changes in the period since the baseline 2012. On the basis of these changes a score has been given for positive/ negative changes or no change at all. The relative changes 2012-2014 have been further analysed to understand what has contributed to these changes in the

2. Case studies

The case studies are described in most of the studies on the basis of the “stories” of the beneficiaries and / or partner organisations as well as representatives of the “lobbying targets”. The 2012 baseline include descriptions of specific cases which have identified and described to illustrate the activities, outputs and outcomes of the SPO in question. In 2014, these cases have been further elaborated to assess the contribution of the SPO to the realization of the achieved outcomes through an contribution analysis.

3. Focus Group Discussions

Focus Group Discussions have been used to interview several stakeholders in order to capture the opinion or meaning of various persons at a time. FGDs have been held in the first place with the staff of the partner organisations in order to address the issue of relative changes 2012-2014 (including timeline analysis) as well as the theory of change which was being applied by the SPO.

Secondly, FGD have been held with groups of the beneficiaries of the SPO in order to assess their opinion on the changes in their organisation and/ or communities.

4. Individual interviews

Both during the 2012 Baseline and the 2014 Endline Individual interviews have been held with selected stakeholders on the basis of the research questions as formulated in the CS research guide. These interviews have been used for the assessment of the relative changes 2012-2014 in the contribution analysis.

5. Timeline analysis

In both the baseline 2012 as well as the endline 2014 and timeline analysis has been done in order to understand the development of the organisation over time in the face of both internal and external developments. The latter timeline analysis has been used to understand better the relative changes, the implementation of concrete activities based on the theory of change as well as to assess the contribution of the SPO to the realization of the intended outcomes.

Sampling of beneficiaries/ informants

During the baseline 2012 and endline 2014 a similar approach to the sampling of beneficiaries and informants has been applied. The sample of the beneficiaries to be interviewed was done by the Ugandan consultants. It was agreed in the Baseline Methodological guide that a wide range of stakeholders would be interviewed, either during the ‘staff analytical workshop’ with the attendance of as many staff member relevant for management, programme implementation and financial management. A similar approach has been used during the endline 2014.

Moreover, focus group interviews were held with beneficiaries at their location, or with responsible staff of beneficiary organisations (eg primary schools teachers, cooperative board members, health workers, extension workers). In a few instances board members have been contacted and interviewed on their role and vision on the organisation. Other stakeholders from government agencies such as local government staff or ministerial staff have been interviewed on an individual basis.

The selection of groups/ individuals to be interviewed was often made on the basis of the availability, relative proximity (most research was done during the rainy season and in regions with very poor transport infrastructure).

Annex 2: Table with the Description and scoring of relative changes CSS 2012-2014

Indicator	Assessment (baseline)	Score	Endline assessment
Dimension 1: Civic Engagement			
1a – diversity of socially based engagement		2	Change : +1
<p>1. Degree to which the needs of beneficiaries / target groups are included in SPOs analysis, planning and implementation.</p> <p>2. Degree of participation of target groups in analysis and planning of SPOs.</p>	<p>KRC's strategic planning process begins with a strategic thinking process which includes a review of the outcomes of external evaluations, annual reflections, unit reflections and the contextual framework; consultations with partners, representatives of Micro-Finance Institutions, Information Centres and Community Processes Facilitators; a leaders' retreat including MPs, representatives of local governments, cultural leaders, NGOs, religious leaders, academia, opinion leaders, the elders, women and youth is held to get their input in the strategic plan. KRC has gender focal persons at community level who make sure that women participate in the planning processes and in implementation of the (farmer) group activities.</p> <p>Through a team of 10 model farmers, KRC involves smallholder farmers in the initial review process of developing the strategic plan and also involves them in a review retreat that comes up with the areas to focus on in the strategic plan. KRC staff attend their monthly meetings in which decisions for joint action are agreed upon. It was also indicated that critical issues affecting the beneficiaries, particularly the most disadvantaged, are discussed and necessary actions agreed upon (eg access to planting materials for bananas).</p>		<p>KRC has started the process of developing a new Strategic Plan in June 2014. It will be a consultative process involving the partner households and groups and other key stakeholders and will review the achievements, changes in strategies and the context in order to come up with the way forward. The review and planning process will, therefore involve consultations with all participating partners.</p> <p>Before 2012, KRC's focus was on the number of women participating in the various interventions supported by KRC. Since 2012, KRC has been looking at gender mainstreaming in their programming and planning and to assess utilisation of resources and income at household level and how activities such as energy saving (Iorena) stoves benefit women. KRC's planning is, therefore, taking into account the social roles of women and their views and relationship between women and men. Planning utilises participatory tools that involve both women and men. Using the Gender Action Learning Systems (GALS), households define priorities for their focus. KRC has developed a training manual for the gender mainstreaming. During annual assessments, planning vis-à-vis the use of household resources is taken into account. KRC's information materials are also emphasizing the roles of women and men and other gender issues at household levels.</p> <p>The 10-household and model-household approaches utilised by KRC have champions who take lead in the various activities. They also train other community members both men and women and also ensure their active participation in planning and project implementation.</p> <p>KRC's research and advocacy interventions bring women on board by having views from women and their active participation while, through the Child Protection and Learning Network, and through the HIV/AIDS research and advocacy work, KRC is able to bring those affected in the planning process and to integrate them in the project interventions.</p>
1b – diversity of political engagement		3	Change: =

Indicator	Assessment (baseline)	Score	Endline assessment
3. Number of dialogue platforms with local or national government that SPO is participating in.	KRC is an active member of District NGO Forums in several districts where it operates.		KRC convenes and facilitates information sharing in the Mpanga River Catchment Consortium which brings together NGOs, Private sector players and Kabarole Local Government to enhance and strengthen processes aimed at protecting and preserving the River Mpanga and ecosystems from pollution and destruction.
4. What is the intensity of involvement in dialogue platforms or sectoral networks?	KRC is organising the Kasunga Regional Retreat on an annual basis, bringing MPs of the Rwenzori Region together to discuss the development processes of the region. Other forums are the Development Leadership Group (DLG), the Rwenzori Regional MPs Forum and the Think Tank which provide spaces for leaders to think as a team on the development priorities for the region. In partnership with the National NGO Forum, KRC is using a Public Private Expenditure Monitoring Tool which captures public expenditure vis-à-vis service delivery. KRC engages with the Ministry of Water and Environment on environmental issues.		
Dimension 2: Level of organization			
2a – Organisational level of civil society		3	Change:
5. Degree of participation of the SPO (and possibly CFAs) in sectoral networks of civil society organisations.	KRC is actively contributing to various platforms. At sub-regional level (Rwenzori) it is active in the Rwenzori Association of NGO Networks (RANNET). Moreover, it has founded the Rwenzori Anti-Corruption Coalition (RAC), participates in Rwenzori Forum for Peace and Justice, in the Sustainable Agriculture Trainers Network (SATNET), in the Federation of Rwenzori Micro-Finance Associations (FORMA) and it is involved in providing information and data for evidence based advocacy through the Rwenzori Information Centre Network (RICNET). At national level it is a prominent member of CSO-based interest networks such as NGO Forum and Deniva and specialized networks that promote organic farming, micro-finance and child protection.		At the sub-regional level, KRC is the lead agency on the Rwenzori Regional Development Framework and is hosting Cluster 3 on Leadership and Governance. It is a member of Clusters 1, 2 and 4 on Food Security and Markets, Environmental Sustainability, Youth and Women Empowerment and Environmental Sustainability respectively.
6. Nature of the relationship between the SPO (and possibly CFAs) and sectoral networks/umbrella organisations in the MDG/theme.			KRC is a member of the Agro ProFocus/Agrihub a platform for NGOs and individuals on the market information, agro financing and value addition sub-themes. As a member of the Working Group on market information, KRC organizes annual regional events for Agro ProFocus members. KRC is a member of the Civil Society Coalition on Oil and Gas (CSCO) which brings together CSOs that are engaged in facilitating, information sharing, monitoring climate change, e-revenue management and in policy influencing on Oil and Gas in Uganda. In this network, KRC facilitates information sharing and capacity building for partners and communities in the Rwenzori region. KRC is also a member and former Chairperson of the Uganda Governance Monitoring Platform (UGMP) for organisations involved in governance and leadership work and facilitates research, policy review and influence and advocacy in the Albertine region. KRC is also a member of the Civil Society Network on Environment and Natural Resources which brings together organisations working on the environment. In this network, KRC shares information on

Indicator	Assessment (baseline)	Score	Endline assessment
			<p>forest governance and sits on the committee at sub-regional level.</p> <p>At the international level, KRC is a member of the Netherlands Academy on Land Governance (LANDac) bringing together researchers, practitioners and private sector players involved in land investment in the South for information sharing on land issues. In this network, KRC participates in different researches focusing on land issues in Uganda.</p>
2b – Dialogue and communication		3	Change:
7. Degree to which a shared analysis of situation in society exists	<p>One of the important ways that KRC shares information with other NGOs is through the Think Tank which is a development platform for incubating development ideas, generating knowledge that informs reflections amongst development actors, the community, and provides tangible evidence for decision making, planning and policy influencing. KRC also has made a good number of publications. These publications are shared with many stakeholders.</p> <p>KRC is working with other NGOs in the region on various campaigns on the basis of the analysis made and evidence presented. Under the leadership of KRC, NGOs and networks in the Rwenzori Region jointly mobilise resources and organise the “Face the Citizens Campaign” and also have joint radio programmes. Under the auspices of the Rwenzori Forum for Peace and Justice (RFPJ) KRC collaborates with other NGOs on peace building.</p> <p>KRC produces a monthly newsletter “KRC News”, training manuals, and brochures. KRC’s publications are considered of good quality. Furthermore, KRC has a toll free line which is used by communities and other stakeholders to give comments to the organisation and has a list of 4,000 individuals to whom information on various issues is sent when the need arises. Videos done on various issues are translated into the local language. KRC has 15 Information Centres which are run by the communities and have an Information Officer who plays the coordination role. Women are the majority users. KRC has weekly radio talk shows on various issues and radio drama series which were started in November 2011 on various issues including food security and post-harvest handling. KRC has a website www.krc.or.ug and is on facebook and twitter too.</p>		<p>The Think Tank is now not project driven as was the case before but is the mainstream of the Regional Development Framework.</p> <p>KRC has set up a Communication Centre with a radio station, a mobile communication centre and an information shelf. There are interactive talk shows and debates on various issues for information sharing. The KRC household survey revealed that 84.6% of households sampled from across the Rwenzori region owned a radio, while 95% indicated that they had access to radio information.</p> <p>In the Rwenzori Forum for Peace and Justice (RFPJ), a regional platform on peace, KRC facilitates information sharing on adherence on social accountability. In collaboration with the Rwenzori Forum for Peace and Justice (RFPJ), KRC facilitated the production of ‘Stuck in the Mist’ which gives a contextual analysis of the conflicts in the Rwenzori Region and how to solve the conflicts.</p> <p>Through the production of various reports and Issues Papers that provide policy recommendations, KRC facilitates citizens’ engagement with policy makers and local leaders. KRC has a new website www.krcuganda.org, a toll free line and software for monitoring visitors on its social media.</p>
8. Degree of joint activity as a result of joint analysis			
9. Mode, nature and quality of dialogue / communication			
2c – financial and human resources		2	Change:

Indicator	Assessment (baseline)	Score	Endline assessment
10. Composition of current financial resource base of SPO	KRC depends for 95% on (international) donor funding. HIVOS provides both program and project funding totalling 48% of all income received during the last 3 years. KRC has a diverse donor base for the other half of donor funding. KRC generated on average 5% of its total income from rent, and doing research and consultancy work over the last 3 years. KRC has 23 staff members of which 15 hold a Bachelor degree.		HIVOS' contribution to KRC's funding decreased from 43% in 2012 to 24% in 2013 and will be about 15% in 2014. During the last 2.5 years, KRC has received funding from new donors including the Democratic Governance Facility (DGF), the Civil Society Fund and GOAL Uganda. Locally generated funds were 0% in 2012, 5% in 2013 but are expected to increase significantly in 2014 given the Radio Station and the Coffee farm which are generating income for the organisation. KRC has 19 technical staff and 6 support staff. Three of the 19 technical staff have Masters Degrees.
11. Degree of dependency of external funding			
12. Human resources management by the SPO			
Dimension 3: Practice of Values			
3.a - Internal Governance		3	Change: -1
13. Degree to which organisational structures are involved in strategic management of the SPO	In accordance with its constitution, KRC's Board of Directors is the major decision making body of the organisation. It reviews and approves the organisation's policies, participates in recruiting senior management and participates in the strategic planning and annual reviews. The Senior management team, led by the Executive Director, is responsible for policy development, donor relations and contract negotiations and reports to the Board of Directors. All staff meet every Monday to discuss internal issues and program related issues such as government budgets and the shrinking CSO space. Once a month, there are agenda based meetings linked to the reporting schedule. An e-newsletter is used for internal and external reporting.		The Board had its mandate renewed in accordance with KRC's constitution. It meets quarterly. The Board has not changed since 2010 with the exception of one additional new member. Whereas this contributes to continuity of its members, it also creates the risk of becoming less critical and too involved.
14. Degree of sharing of information to staff (structured and regular)			
3b- Transparency		3	Change: =
15. Independent external (financial) auditing being done	Audits are done annually. A consolidated organisational audit is done but specific audits are done for specific donors. However, the organisation's financial management manual is silent about audits and the audit process. KRC produces an annual report which gives detailed information on the activities accomplished during the year under review. KRC radio programs as well as the quarterly newsletters inform beneficiaries regularly in the local language on the implementation of KRC's programs. KRC's annual and audited reports are also circulated to the beneficiaries through the Information Centres which signifies a remarkable degree of transparency. However, KRC has not been able to translate the documents into local languages as it		The financial manual was reviewed and now includes the audit process. To ensure that the new manual complies with international accounting standards, it was reviewed by a consultant who gave KRC guidance accordingly.
16. Degree of transparency towards beneficiaries			
17. Extent of upward and downward accountability by SPO			

Indicator	Assessment (baseline)	Score	Endline assessment
	is expensive to do so. KRC submits progress reports to the Board of Directors for review in their quarterly meetings. The supported CBOs receive not only newsletters but annual reports as well and through their participation in the review and planning meetings receive KRC's reports.		
3c – Internal financial and human resources management		3	Change: +1
18. Extent to which internal written procedures for financial and human resource management are being respected	KRC has a financial manual with a detailed description of procedures and processes. It is reported that procedures are followed. KRC also disposes of a personnel manual.		The personnel manual was revised. Annual leave days were increased from 15 working days to 30 days. Long term service awards which are well defined were also introduced while the notice of termination of services was reduced from 3 to 1 month. On completion of maternity leave, female staff can report 15 minutes later than other staff. The procurement manual too was revised.
Dimension 4: Perception of Impact			
4a –Responsiveness		2	Change: +1
19. Degree of incorporation of priorities of target groups in plans and activities	The mechanism to include priorities of target groups is during the strategic and annual planning, whereas KRC interacts on a monthly basis with Farmer groups. KRC facilitates farmers to engage in various activities in particular in savings and credit. During these monthly meetings which are attended by the staff of KRC, the workplans are shared with the staff of KRC. As a result, KRC picks out those issues that are within its jurisdiction while others are forwarded to other players on the advice of KRC. In subsequent meetings, reports on progress are also exchanged and the necessary follow up action agreed upon. KRC has a regional program focusing on empowerment of youth and creation of employment opportunities. At the sub-regional level, there is a Pillar on youths who are given vocational skills.		<p>Baseline surveys are done to establish the status before any interventions are done. The results of the baseline are used as the benchmark to measure performance through annual assessments at the household level in different areas of economic development. Through the 10-Houses approach, staff interact with the households which enables KRC to get to know some of the sensitive issues which are usually not discussed by communities in group meetings. These issues are then discussed in the monthly meetings with the beneficiary communities. Through the 10-Houses and Community Process Facilitators models, KRC trains leaders as trainers in various livelihood aspects after which they train other community members. When government was rolling out the Social Assistance Grants for Empowerment (SAGE) Programme in 3 districts in the region, KRC's Very Poor Individual Project provided learning for the government implementation process.</p> <p>KRC is participating in the interpretation of the Oil and Gas Sector laws, policies and bills and provides local leaders with information to enable them to demand for the prudent management of the Oil and Gas Sector. Through the Speakers' Forum, the only one in Uganda, KRC has built the capacity of Speakers in the Rwenzori region to be able to make contributions to the Oil and Gas Bills and policies.</p>
20. Degree of alignment with government policies (planned and implemented)			

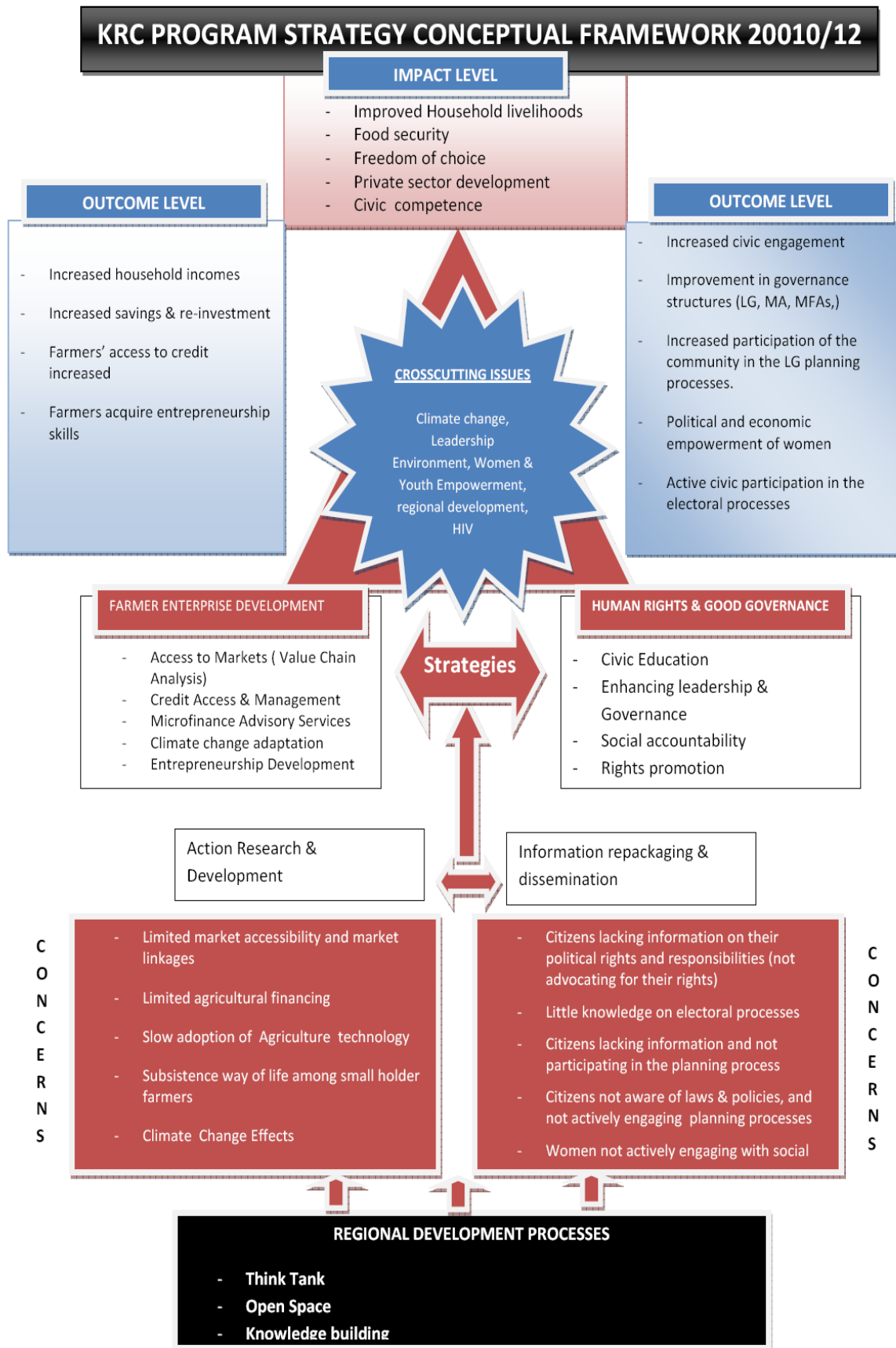
Indicator	Assessment (baseline)	Score	Endline assessment
4b – Social impact		2	Change: -1
21. Target group satisfaction regarding fulfilment of their primary social and/ or personal concern	KRC claims to have substantial impact on the lives of their target groups, the rural population of the Rwenzori Region. However, most of the impact is anecdotal with relatively little documented data of improved livelihoods. One of the claimed outcomes of KRC's interventions is the self-confidence and ability of the communities to engage in economic activities. There are various groups of smallholder farmers who were only involved in subsistence farming that are now involved in collective marketing and have therefore become commercial farmers. Regarding gender equality and women empowerment, men have been integrated in the micro-finance while women have been integrated in the value chains and in land issues for co-ownership. Another outcome of KRC's interventions is the ability of the communities to engage with leaders and hold them accountable. Communities are now able to demand for accountability on issues related to education, infrastructure, and maternal and children's health.		KRC set up an M&E system and is now able to capture the improvements made on livelihoods. KRC also does evaluations to capture changes at household and community levels while documentation of the most significant stories that are published in the annual report bring out cases of change that KRC shares with other partners. A number of examples of social impact: 1. Rural women in the Rwenzori sub region of western Uganda, reduced households firewood consumption from 13 to 7 pieces and expenditure from 4,174 Uganda shillings to 2,655 Uganda shillings per day using lorena stove against the traditional three (3) stone cooking stove. 2. KRC is building the capacity of the change agents to take over the development process supported by KRC. For example, in the banana value chain, it was realised that there was a lot of waste. There are now efforts to turn banana waste into bricks, handicraft and fibre bangles. Using its networks and the capacity built, the change agents will advocate and support development processes beyond KRC. Annex 5 refers for more detail on progress towards achievement of outcomes.
22. Degree to which empowerment of target groups towards public and/ or private sectors have been enhanced			
23. Degree of sustainability of the social impact			
4c policy impact		3	Change:
24. Level of influence of SPOs towards major policy changes	KRC has influenced the following government and private sector activities, plans and programmes: KRC has brought in MPs and other stakeholders to formulate the Rwenzori Development Framework which has been approved by a number of District Councils. It has contributed to improvements in the health services in Rwenzori region; KRC engaged with the Ministry of Water and Environment on the environmental issues based on the evidence from the Think Tank. As a result, the Ministry now closely collaborates with the Think Tank in monitoring the Ministry's projects and programs in the Rwenzori region. Also with regard to the Oil and Gas Sector KRC has contributed to communities claiming their rights by demanding the oil exploration company to cover up the pits that they had dug during oil exploration which was done.		KRC conducted research on the factors contributing to poor adherence to HIV/AIDS prevention education messages. The research made recommendations that were popularised during radio interactive talk shows and community dialogues. Policy briefs were prepared and distributed widely to Members of Parliament and the technical and political leaders in the region. Presentations were also made during district based health sector meetings. These efforts contributed knowledge/information in the debate of the HIV/AIDS Control Bill and a number of recommendations were considered in the law. KRC used the research findings of the Climate Change Study done in December 2013 in consultative meetings with the Ministry of Environment and the Belgian Embassy. As a result, the Belgian Embassy has established a climate change adaptation project which incorporated issues highlighted in the research. As is outlined below, KRC is playing a critical role in civic education and
25. Degree to which SPOs are holding government (national and local) and private sector accountable			

Indicator	Assessment (baseline)	Score	Endline assessment
			<p>ensuring accountability by local governments and in policy formulation in the Oil and Gas Sector.</p> <p>To be able to carry out evidence-based advocacy, KRC conducted an assessment of the performance of the Government’s NAADS and UPE agricultural extension programs to assess their effectiveness and the extent to which they have achieved their policy objectives. Policy briefs on NAADS and UPE policy were produced.</p> <p>Regarding the Public Order Management Bill, KRC works with Police and local leaders to ensure that they follow the Law. Regarding sustainability, there has been a buy-in in the Leadership Conferences initiated by KRC. They are now taken over and organised by local governments as accountability initiatives.</p> <p>Kasunga Retreats</p>

Annex 3. List of people interviewed

List of Participants - MFS II Uganda Endline Workshop					
Organisation: Kabarole Research & Resource Centre (KRC)					
Location: Fort Portal				Date: 26 th May 2014	
No.	F / M	Name	Position	Signed	2012 Present
1	<input type="checkbox"/> <input checked="" type="checkbox"/>	Julius Mwanga	Executive Director		<input checked="" type="checkbox"/>
2	<input type="checkbox"/> <input checked="" type="checkbox"/>	Mohammed Ahmed Shariff	Deputy Director		<input checked="" type="checkbox"/>
3	<input type="checkbox"/> <input checked="" type="checkbox"/>	Christopher Busiinge	Head of Information Unit		<input checked="" type="checkbox"/>
4	<input checked="" type="checkbox"/> <input type="checkbox"/>	Medius Bihunirwa	Head of Farmer Enterprise Development Unit		<input checked="" type="checkbox"/>
5	<input type="checkbox"/> <input checked="" type="checkbox"/>	Patrick Muzinduki	Head of Research and Advocacy Unit		<input checked="" type="checkbox"/>
6	<input checked="" type="checkbox"/> <input type="checkbox"/>	Lillian Kabanura	Head of Finance Unit		<input checked="" type="checkbox"/>
7	<input type="checkbox"/> <input checked="" type="checkbox"/>	Godfrey Kakande	Accountant		<input type="checkbox"/>
8	<input type="checkbox"/> <input checked="" type="checkbox"/>	Geofrey Hyeroba	Project Officer, HIV Prevention		<input checked="" type="checkbox"/>
9	<input checked="" type="checkbox"/> <input type="checkbox"/>	Deborah Baguma	Program Officer, Information Unit		<input type="checkbox"/>
10	<input type="checkbox"/> <input checked="" type="checkbox"/>	Primus B Atukwatse	Research and Advocacy Officer		<input type="checkbox"/>
11	<input type="checkbox"/> <input checked="" type="checkbox"/>	Francis Musinguzi	Information and Communication Officer		<input type="checkbox"/>
12	<input type="checkbox"/> <input checked="" type="checkbox"/>	Henry Kamanyire	Specialized Data Analyst		<input type="checkbox"/>
13	<input checked="" type="checkbox"/> <input type="checkbox"/>	Christine Vicky Kahunde	Accounts Assistant		<input type="checkbox"/>
14	<input checked="" type="checkbox"/> <input type="checkbox"/>	Alice Kabajegya	Volunteer, Civic Education		<input type="checkbox"/>
15	<input type="checkbox"/> <input checked="" type="checkbox"/>	Joseph Kabyanga	Volunteer		<input type="checkbox"/>

Annex 4: KRC Strategic Conceptual Framework



Annex 5. KRC project outputs per Nov 2013

Outcome	Indicators	April 2013 Baseline	Progress Nov 2013
Objective 1: To promote household based food security evidence oriented actions and practices amongst 500 cocoa and maize growing farmers of Bundibugyo and Kabarole districts.			
Improved household food security situation for 500 farmers in the 2 cocoa and maize priority sub-counties by 2014	At least 30% of the supported households in the 2 sub-counties achieve food security	70.4% were food insecure amongst the 300 households in the cocoa growing community of Bundibugyo	300 households with knowledge in food security practices
Increased adoption of nutrition food security interventions	At least 40% of households adopting to nutrition and food security practices	94% of the 300 households in the cocoa growing community of Bundibugyo do not consume foods rich in micro nutrients (Vegetables)	270 farmers establish kitchen gardens at household level in Bundibugyo
Increased integration of nutrition in health education program at health centre level	At least 50% reduction of health centre recorded cases of malnutrition among children in the selected sub-counties	0	2 health centre gender based nutrition gardens established in two health centres 124 expecting mothers sensitized on the importance of nutrition and practically trained on the kitchen gardening at the 2 health centre gardens
Reduction in food wastage and improved food management practices at household level	60% of the farmers reporting reduced wastage and improved food management		497 people sensitized on food preparation, amount of food prepared versus the number of people, how much food is wasted per meal Registered 77, 504 Kgs from 43, 202kgs of maize grain storage for household food security amongst Iruhura farmers.
Improved private sector interventions in food security within the cocoa growing community of Bundibugyo	At least 3 interventions developed by the PS to promote food security in the cocoa growing community	0	4 reflection meetings conducted for 3 ¹ cocoa companies in about the food security situation for the cocoa growing community Bundibugyo 1 concept developed on the possible partnership between KRC and ESCO- Uganda
Objective 2: To promote gender responsive interventions and technologies in food security that lessen the workload of women			
Reduced workload of women in household of 500 farmers in interventions for food security	At least 30% farmers with reported evidence of reduced workload for women	Focus on cooking energy technologies On average 75.5 minutes spent on cooking one meal using 3 cooking stones 20.9% male participation in cooking using the Lorena stove	On averaged 53.6 minutes spent on cooking one meal with use of lorena stoves accounting for 29% time saved 14.5% increase in male participation in cooking after introduction of the lorena stoves On average 7.15 pieces of fuel wood used per day after

¹ ICAM Chocolate, OLAM and ESCO – Uganda ltd

		On average 12.4 pieces of fuel wood used for cooking meals per day using 3 cooking stones	<p>introduction of lorena stoves accounting for 42% reduction in amount of fuel wood used per day</p> <p>5.2 pieces of fuel wood saved per day per household is equivalent to 1,154.4 UGX approximately USD 0.5 There was 14% increment in households having 2 meals to 3 per day. This could partly be explained by the amount of money saved on wood that could be used for food</p> <p>In addition saving 5.26 pieces of fuel wood per day is equivalent to saving 3 trees at the age of 3 years per day by 100 households</p> <p>74% of the supported households acknowledged reduction in physical effort used in cooking with a lorena stove Vs the 3 cooking stones</p>
Objective 4: To Improve market oriented production and quality enhancement amongst 1800 small holder farmers involved in coffee (600), maize (1000)and banana (200) Value chains for access to better market opportunities and improved household incomes			
Increased production of 1500 farmers in the selected value chains by 2014	<p>At least 15% increment in production by the households in selected Value chains</p> <p>At least 70% of the farmers with knowledge and skills in Agronomy</p>	<p>Maize Average production 344 Kilograms per household per season</p> <p>Coffee Average production 437.2 Kgs per household per season</p> <p>Banana 92 bunches per farmer per household per season where 48% is consumed at home</p>	<p>Maize 366 kilograms per household representing a 6% increment</p> <p>Coffee 526 kilograms of clean coffee in Kabarole District representing a 20.3% increment Analysis for Kasese will be done by march 2014</p> <p>Banana The average production is 218 and 81 bunches per household per season for Kasenda and Kichwamba Sub-Counties respectively. And 47.5% is consumes at household</p> <p>702 farmers (400 females and 302males) with knowledge and skills in maize and banana agronomy</p>
Increased access to market opportunities of 1500 small holder farmers by 2014	At least 30% of the household have accessed better market opportunities		63 banana, 194 coffee and 253 maize households accessed better market opportunities

<p>Increased annual incomes of supported 1800 farmers in selected value chains</p>	<p>At least 20% increment of household income in selected value chains</p>	<p>Maize 240,800 UGX Coffee 1,836,240 UGX Banana Average for Rwenzori Region 224,862 UGX</p>	<p>Maize 256,200UGX representing 6.4% increment Coffee 1,998,800 representing 8.9 % increment Banana The average for Kasenda is 478,512 UGX and 254,526 for Kicwamba</p>
<p>Objective 5: To promote and strengthen small holder farmer – private sector business relations for improved access to agro input supplies, value addition, processing, markets and agricultural financing in the coffee, maize and banana value chains</p>			
<p>Improved smallholder farmer-private sector collaborations in the area of inputs, technology, markets and agricultural finance</p>	<p>At least 60% of MAs with developed business relationship with PS</p> <p>At least 50% of farmers accessing services from the PS</p>		<p>2 business meetings conducted for coffee MAs with 2² coffee exporters</p> <p>1 exposure visit conducted for banana farmers to bushenyi and excel hort consults in Mbarara on the value addition to the banana</p> <p>2 farmers already start making charcoal briquettes from banana and hair bands due to the exposure visit knowledge gained</p> <p>3³ coffee groups registered with Great lakes coffee for business partnership</p> <p>1 market survey to map out agro input dealers conducted in Rwenzori and central Region</p> <p>62 representatives of MAs and MFAs participated in the Agro Profocus market place event for farmers and Micro finance institutions in the Rwenzori Region for business information exchange</p>

² Great lakes coffee and Bukonzo joint farmers marketing cooperative ltd

³ Nyabuswa, Rwenzori Link and Kanyamurwa

Objective 6: To promote gender responsive interventions and technologies in the value chains processes that lessen the workload of women amongst 1800 farmers			
Reduced workload of women in the households of 1800 farmers in the value chains	At least 50% of farmer with reported evidence of reduced workload for women in the value		Consultations conducted with agro- input dealers and manufactures on technologies with potential for reduction of women workload in maize, coffee and banana value chains.
Objective 7: To strengthen producer Organisation's capacity to reflect and respond to the need and priorities of their members in the changing context of markets and policy environment			
Functional platform that stimulates farmer reflections to take charge of their own development processes and raise their voices for own advocacy	At least 10 producer groups subscribed to a loose farmer forum A desk established to coordinate the operation of the farmers forum in the region	0	12 farmer groups sensitized on their civic rights and need for joint action on advocacy 1 farmer group mobilized other farmers and demonstrated on the state of the poor road in Kichwamba Sub-county, Kabarole District that was affecting the marketing of their agricultural produce that attracted the attention of the district and Hiima cement factory

Annex 6: List of documents consulted

1. Rwenzori Regional Development Framework (2012-2017)
2. Stuck in the Mist: Contextual Analysis of the Conflicts in the Rwenzori Region
3. End of Project Evaluation Report for the Local Government Empowerment Project
4. Evaluation Report for the Peace and PRMT Project (2005-2007)
5. FEDU Output and Indicators Matrix: Annual Reflection 2014
6. Regional Framework Annual Report 2012
7. Regional Framework Annual Report 2013

Joint MFS II Evaluation: Civil Society Strengthening –Uganda

Southern and Eastern African Trade, Information and Negotiations Institute

Technical report on SEATINI's Civil Society Strengthening

1. Introduction

Organisation	Southern and Eastern African Trade, Information and Negotiations Institute (SEATINI)
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Address	Plot 69, Bukoto Street, Kamwokya Kampala, Uganda Email: seatini@infocom.co.ug Phone number +256-414-540856
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MDG	1 (poverty reduction)

Purpose and outline of technical report

SEATINI is a regional lobbying and advocacy organisation with a strong base in Uganda through its regional office for East Africa. Its advocacy work focuses on the Economic Partnership Agreements (EPA), Regional Integration, WTO Trade Negotiations, Tax Justice and Linking Global Economic Issues to Rural Livelihoods. SEATINI analyses policies, simplifies them and shares them with partners in the form of policy briefs and studies. Research done by SEATINI on various policies and treaties focuses on how they impact the citizens' rights including smallholder farmers' rights to seed, the right to food, right to health among others. SEATINI wants to ensure that the multilateral negotiations and other global processes generate favourable rules and frameworks that are supportive to the development efforts of Uganda, East African Community and Africa in general.

In this report the findings are presented of the major changes in Civil Society Strengthening between 2012 and 2014 according to the indicators based on the five CSS dimensions. Thereafter two analyses are being made of the contribution by SEATINI to two lobbying and advocacy campaigns: the first one deals with the Tax Justice Campaign and the second one relates to the lobbying for the improvement of the Biotechnology and Biosafety Bill.

2. Context

SEATINI is of the opinion that agriculture and trade related policies at national and regional level can be influenced through lobbying and advocacy activities. In its view it is necessary that government and continental policies include positions generated by Civil Society Organisations (CSO) in Uganda. It does so by promoting clear structures and mechanisms for CSO participation in agriculture, finance and trade related policy processes at national and regional levels.

SEATINI's programme areas are divided into four major areas of work:

1. Trade and Economic, Social and Cultural Rights: to influence trade and trade related policy processes for the attainment of people's Economic Social and Cultural rights for sustainable development.
2. Regional integration: to promote effective stakeholder engagement in the EAC regional integration processes for improved livelihoods in the region and to contribute to poverty eradication and sustainable development in Uganda and in the East African region.
3. Financing for development: to promote transparent and sustainable resource mobilization, allocation and utilization policies and practices
4. Institutional Development: to strengthen the governance, financial and human resources for the effective operation of the institute.

(source: SEATINI website)

The main strategy of SEATINI to realize participation in policy formulation is by strengthening the capacity of key stakeholders i.e. the Media, CSOs, Members of Parliament, farmers groups, trade unions, etc. to take a more effective part in and to influence global, regional and national agricultural trade and financial processes and to better manage the process of globalization for sustainable development and improved livelihoods.

As a representative of CSOs, SEATINI wants to be a spider in the web of Ugandan CSOs (and the other countries of operation). They are often a spokesperson and representative of the views of CSOs in the relevant policy arenas. In order to play that central role, SEATINI (1) mobilises Civil Society views; (2) conducts research; (3) gives CSOs feedback from the various platforms in which it represents them; (4) builds the capacity of the CSOs; (5) creates awareness by generating and disseminating relevant information; (6) makes financial contribution (in-kind); (7) mobilises and coordinates CSOs at national level to utilise regional platforms; and (8) brings trade perspectives into debates on various issues.

The third strategy SEATINI focuses on concrete policy goals at national (and international) levels in clearly defined areas of operation which affect the domains of agriculture, finance and trade. One of their main focus areas is Tax Justice, resource mobilisation, allocation and expenditure by government.

SEATINI engages with relevant Ministries in Uganda (Finance, Trade, East African Community and Agriculture) and with relevant organisations of the East African Community and the African Union. Through this close engagement it expects to have CSO positions integrated in trade negotiations (such as EPA and WTO) and relevant policies (e.g. on Food and Nutrition Security, Biotechnology and Biosafety).

At national level opportunities for stakeholder engagement in policy processes and trade negotiations exist. The Inter-Institutional Trade Committee (IITC) and the National Development and Trade Policy Forum (NDTPF) are in place for stakeholders including Civil Society Organisations like SEATINI, to participate in the various trade negotiations. These spaces of engagement also exist in

the National Development Plan (NDP) planning process, various parliamentary committees and at district council level. However, these spaces are not legally provided for and are continuously becoming more constricted.

At the global level, the defining events have been the interrelated crises of food, finance, climate change and energy. The financial crisis has brought to the fore the need to engage with the International Financial Institutions on policies related to aid and debt. These crises have also affected the poor countries in particular the poorer and most vulnerable people. The WTO Doha Round of trade negotiations, launched in 2001 with high hopes of addressing the development needs of poor and developing countries, remained deadlocked, giving impetus to the bilateral trade negotiations in which developing and poor countries are highly disadvantaged.

In the East African Community, regional integration of the five EAC partner states including Uganda has been strengthened by the conclusion of the Customs Union, the conclusion of the Common Market and by the joint negotiations of a comprehensive EPA with the EU. Efforts to bring the Eastern and Southern regions together have culminated into negotiations between COMESA, SADC and EAC.

3. Project description

SEATINI receives core funding from Oxfam Novib for its programmes as defined in the Strategic Plan 2013-2015. This Strategic Plan was preceded by the one for the period 2010-2012. The revision of the Strategic Plan 2013-15 was done during the period under review (2012-2014) and was the outcome of a participatory strategic plan review process based on an evaluation of the implementation of the previous Strategic Plan 2010-12 and a SWOT analysis.

SEATINI programmatic focus for the period 2013-2015 has been identified to be : *“Promoting democratic governance of trade and trade-related policies and processes for sustained equitable development and improved livelihoods in Uganda and EAC”* (source: SEATINI Strategic Plan 2013-2015). This has culminated in four programmatic areas of which the first three are development-oriented and the latter one is related to internal organisational development.

The programmatic areas have been defined as follows:

- 1: Trade and Economic, Social and Cultural Rights (ESCRs);
- 2: Regional Integration (RI); and
- 3: Financing for Development.

SEATINI lobbying and advocacy activities are:

- Monitoring developments in the area of agriculture, finance and trade –related matters;
- Providing a platform for Civil Society Organizations and other stakeholders to deliberate on global, regional and national issues with a view of developing a consensus;
- Contributing to build capacity of partners;
- Raising awareness, build capacities and bring into discourse the concerns of other key stakeholders i.e. MPs, civil society movements;

SEATINI’s advocacy work focuses on the Economic Partnership Agreement (EPA), Regional Integration, WTO Trade Negotiations, Tax Justice, Economic Social and Cultural Rights and Linking Global Economic Issues to Rural Livelihoods. SEATINI analyses policies, simplifies them and shares them with the partners in form of policy briefs and translates IEC materials. The research done by SEATINI on the various policies and treaties focuses on how they impact the citizens including

smallholder farmers and the poor. SEATINI wants to ensure that the multilateral negotiations and other global processes generate favourable rules and frameworks that are supportive to the development efforts of Uganda, East African Community and Africa in general.

Budget

Oxfam's contribution to :

2012 budget	€ 170,000	representing 27% of overall budget
2013 budget	€ 126,976	31%
2014 budget	€ 120,000	30%

Through the capacity building of staff in fundraising, SEATINI has been able together with Oxfam Novib and Tax Justice Network-Africa to secure additional project funding, e.g., in 2012, the consortium received funding from the EU to implement an 18 months project. They have also received EU funding for their Capacity for Research and Advocacy for Fair Taxation (CRAFT) project. In addition, Oxfam and SEATINI were able to secure funding from DGIS to implement CRAFT phase II.

4. Data collection and analytical approach

The methodology applied during the baseline in 2012 and follow-up assessment in 2014 is a general one which is described in the methodological annex 1 (*note: still to be added*).

Key Outcomes selected for the contribution analysis

The key outcomes for the contribution analysis for all twelve CSOs under review during the endline in 2014 have been one related to Civil Society Strengthening and one related to advocacy and lobbying of policy makers.

In the case of SEATINI, the first case is the Tax Justice Campaign in which SEATINI addressed taxation issues and its impact on development. Advocacy focused on improving the fairness of the tax system in terms of policies and practices at local (district), national, regional and international levels. In order to improve the awareness of stakeholders on tax issues, SEATINI enhance the knowledge of the wider public on the role of taxation in society and engaged them to demand for a fairer and just tax regime that redistributes resources for improved development. By doing so SEATINI and its allies looked in-depth at issues like corporate taxation, tax avoidance, tax incentives and how it hinders the domestic revenue generation for development. SEATINI's campaign on tax justice contributed to government's suspension of tax incentives to corporations in the 2013/2014 Budget and influenced the budget process leading to the removal of taxes on agricultural products

The second analysis of the contribution by SEATINI to Civil Society Strengthening concerns the role SEATINI together with the Food Rights Alliance played to raise awareness of the Members of Parliament and other key stakeholders about the gaps in the Biotechnology and Biosafety Bill and its effects on farmers' rights to seed, on food security and on health. As a result of this campaign, the Bill was not passed in Parliament. It was sent back to the Science and Technology Committee of Parliament for further consultations.

The two SEATINI contribution analysis case studies were selected for two main reasons: the campaign and lobbying activities have a clear and distinct goal and number of activities; and the two actions have yielded some results at the time of the endline evaluation (whether positive or negative). The two cases are being presented in chapter 5.2.

5. Results

5.1 Relative changes 2012-2014

The assessment of relative changes has been done against the indicators used in the baseline; the descriptive part for the endline is provided in detail in Annex . The scores of relative changes are given in the following table. The table further below presents a short description of the highlights on which the assessment of the Endline relative changes is based including the score given in the endline.

Criterion	1a	1b	2a	2b	2c	3a	3b	3c	4a	4b	4c	Total
Baseline	2	3	3	2	2	2	2	3	2	2	3	2,36
Endline	+2	+1	+1	+2	-1	+1	=	=	+1	=	+2	

Score: **Baseline** 0-3 0 lowest score and 3 highest
Endline = no change;
+ 1 resp – 1 little change (+ better respectively - worse);
+ 2 resp – 2 substantial change (+ better resp - worse)

Short description of the highlights explaining the relative score of relative change 2012-2014

Evaluation Criterion	Explanation of score relative of relative change 2012-2014
I. Civic Engagement	<i>Very Positive development: +3 overall</i>
1a- social engagement	SEATINI overall approach is now more evidence- based engagement and more human rights focused. The new Strategic Plan 2013-2015 raises people’s awareness on their economic, social and cultural rights thus having more impact on their livelihoods. In order to increase the relevance of their initiatives to rural livelihoods and to increase the authenticity of their campaigns and lobbying efforts, SEATINI has made a major change in their main implementation strategy. SEATINI tries to bring to the fore the voices of their target groups and thus directly linking rural issues to global concerns. They have translated information materials into local languages. By using these materials, farmers’ groups have been able to input into the Civil Society positions in lobbying campaigns, e.g. the farmer position on GMOs. Through satisfaction surveys in the Tax Justice Campaign/ Financing for Development, SEATINI mobilised the views of the grassroots and fed them into policy advocacy. SEATINI is actively partnering with various women’s organisations.
1b- political engagement	More recognition of SEATINI by the Ministry of East African Community Affairs (MEACA) as CSO representative on trade issues including in the National Implementation and National Monitoring Committees. SEATINI being recognized by East African CSOs’ Forum (EACSO) Uganda chapter as the lead organization on trade issues and is often requested to submit CSO position papers on trade.
II. Level of organisation	<i>Positive development: +2 overall</i>
2a-organisational level of civil society	SEATINI is increasingly taking a lead role in CSO networks and in government committees at national and sub-regional levels, e.g. in the <i>Revenue Tracking Group in the Coalition on Oil</i> and as <i>National Chapter of the EAC National Dialogue Framework</i> . SEATINI carries out studies, satisfaction surveys and develops position papers, petitions and open letters on trade related issues and, therefore, enriches the debate on trade in the various platforms. SEATINI is being recognized as the lead advocacy organisation on tax justice issues. It has also been promoting Agriculture, Climate Change and Trade Linkages in the EAC (PACT-EAC) national and regional trainings for CSOs.
2b-dialogue and communication	By having membership and building coalitions with CSOs SEATINI increases the different voices for policy influencing, e.g. having local organisations such as district CSOs as members of alliances enables CSOs to join in advocacy interventions.

	SEATINI produces a wide range of studies and publications including open letters, cartoons, radio programmes, Facebook and twitter posts, engagement and communication strategies for policy influencing and training guides to keep stakeholders updated on what is going on. There is a constant feedback from Members of Parliament (MPs) and the Secretary General of the EAC on SEATINI's proposals. SEATINI's information materials are often simplified and translated to enable stakeholders to understand the issues being discussed.
2c-financial and human resources	Since 2010 the share of Oxfam Novib has only barely been reduced from 38% to 31% in 2013. There is a lack of stability in donor funding. Oxfam Novib funding being approved for only two years and with contracts being signed on an annual basis leading to uncertainty as staff are also given annual contracts. There are measures to increase internally generated incomes It rose from 5% in 2012 to 9% in 2013.
III. Practice of values	Minor relative change: +1 overall
3a-internal governance	Bi-annual programme reviews are going to be done beginning this year (2014). SEATINI now holds Project Inception meetings and Mid-term and End of Project reviews involving key stakeholders.
3b-transparency	No major changes
3c-internal management	No major changes
IV. Perception of Impact	Very positive relative change: +3 overall
4a-Responsiveness	SEATINI has developed stronger working relationship with Members of Parliament at national and regional levels, including the Parliamentary Committees on Trade, National economy and Agriculture; and with the Parliamentary Forum on Regional Integration.
4b-social impact	The concrete results and impact of SEATINI are mainly with the organisations they are working with. They provide evidence, knowledge and competencies to a wide range of CSOs and farmer communities.
4c-policy impact	The work of SEATINI is not being without its risks as Government tried to intervene in the activities of SEATINI's work followed by threats of being de-registered as a result of SEATINI's input in the Plant Variety Protection (PVP) Bill.

A more elaborate description of the relative changes 2012-2014 can be found in Annex 2.

5.2 Contribution Analysis

Case study I: TAX JUSTICE CAMPAIGN

1. Case Background

Uganda depends on a substantially donor supported budget implying that the government is not collecting enough resources to meet its domestic needs. Uganda's tax gap and tax effort does not competitively compare with other countries within the East African region due to the high prevalence of tax evasion and leakages. The existence of tax incentives and exemptions further curtails local revenue mobilization by directly depleting an already narrow tax base and thus inhibiting any possibility of its expansion.

Excessive use of tax incentives complicates tax administration, facilitates evasion and encourages corruption (AfDB 2010) which has led to very big revenue losses. In the year 2009/2010, tax exemptions resulted into a direct loss of 3.99 percentage of tax to Gross Domestic Product (GDP) ratio. A 2011/12 study conducted by Action Aid and Tax Justice Network Africa indicated that over 690 billion Uganda Shillings (272 million US\$) was lost in tax incentives in Uganda.

A study done by SEATINI in 2012 to analyse the impact of tax exemptions on Uganda’s economic development confirmed that tax exemptions were having a contradictory impact on the economy, leading to loss of tax revenue contrary to the stated government policy of stimulating employment and development. The study also confirmed that tax exemptions were ill managed with no clear and consistent legal framework to guide their implementation and with the Minister of Finance and Economic Planning having ‘practically unfettered discretionary power’ to grant tax incentives and exemptions, with Parliament simply playing a residual oversight role, there were instances where well-connected companies and individuals were enjoying the tax incentives and exemptions without deserving them.

The SEATINI study also revealed that much as government was well-intentioned in granting tax exemptions, there was no reliable research that clearly stipulates the positive and sustainable impact of tax incentives and exemptions in propelling socio-economic development. Most important, the study noted that there was the limited involvement of stakeholders in tax policy processes. With limited pressure from citizens, Government was not accounting for the incentives given to investors and how they contribute to the development of the country. There was also no systematic monitoring and evaluation of the extent to which the tax incentives were working or not. In addition, lack of transparency also prevented oversight and public scrutiny on the policies and processes which limited the power of parliament and key institutions to debate and scrutinize government decisions since it was only the Minister of Finance that was mandated to give tax incentives or exemptions.

While the Uganda Government was committed to removing and/or at least harmonizing ‘harmful taxes’ and reducing tax incentives and exemptions and had agreed to undertake a comprehensive review of the tax exemptions in 2009, it had not done so in 2012.

In order to reduce the unnecessary tax exemptions which were contributing to the narrowing of the tax base and loss of the much needed tax revenue, Civil Society Organizations (CSOs) and Private Sector Organizations (PSOs), led by SEATINI, embarked on an advocacy campaign against the tax incentives and exemption regime adopted by the Government of Uganda which was unsustainable and not beneficial to the development of the economy. The advocacy interventions targeted key policy makers including senior government technical staff, donor agencies, MPs, local politicians, CSOs, the media and the private sector so as to address the harmful effects of tax incentives and exemption policies and practices and hence promote accountable, fair and pro-poor tax systems.

2. Theory of Change

The Tax Justice Campaign intended to realize the following final, intermediate and immediate outcomes. It did so by realizing a good number of outputs.

	Results	Assumptions
Final Outcomes	<ul style="list-style-type: none"> - Transparent and sustainable resource mobilization and utilization practices - Fair and just resource mobilization policies developed - Increased accountability by government - Leaders are more accountable to the citizens 	<ul style="list-style-type: none"> - Government positions on tax exemption are translated into policy
Intermediate outcomes	<ul style="list-style-type: none"> - Fair and accountable tax development financing policies and practices - More effective stakeholder participation in shaping tax policy processes 	<ul style="list-style-type: none"> - Parliamentary Committee on the Economy willing to consider citizens’ views on tax justice - Citizens willing to participate in

	<ul style="list-style-type: none"> - Increased stakeholders' ability to demand for fair and just tax policies at national and regional levels. - Government coming up with positions on tax avoidance and leakages - Increased debate on fair tax systems by policy makers 	engagements on tax justice
Immediate outcomes	<ul style="list-style-type: none"> - Stakeholders advocate for transparent and accountable tax policies and practices - Increased consultation between governments and other stakeholders on tax policy 	<ul style="list-style-type: none"> - Stakeholders including citizens are willing to engage with government on tax justice - Tax Justice is not 'politicized' leading to CSOs being de-registered and therefore not being able to operate
Outputs realized	<ul style="list-style-type: none"> - 12 National dialogues and meetings - 2 regional meetings - Satisfaction survey reports on taxation, governance and service delivery - 3 Study reports - 2 Issues papers - Media activities (print, electronic) - 6 Strategic meetings with policy makers and government bodies - 3 Training of trainers' reports - 6 Civic Education Campaigns - 3 round table dialogues - 9 meetings for the tax justice taskforce and alliance - Advocacy materials - Journalism award - 12 newsletters - 6 Policy briefs - 1 Documentary on Tax Justice 	<ul style="list-style-type: none"> - Cooperation with the different stakeholders including government officials, private sector and CSOs

3. Results and Effectiveness

In terms of outputs and immediate outcomes, at the beginning of the Tax Justice campaign, SEATINI did a stakeholder analysis and identified the organisations to partner with and developed good rapport with different stakeholders including government ministries and agencies such as the Uganda Revenue Authority (URA). As a result, SEATINI was invited to several government forums and was, therefore, able to lead the engagement with the various government agencies. The research that was done by SEATINI on Tax Justice was noted to have provided evidence for engagement with government by all stakeholders including CSOs, private sector and citizens. Those interviewed for the evaluation noted that SEATINI's work is not only focusing at the work of Civil Society Organisations (CSOs) but is looking at government, private sector and citizens' interests. The latter not only includes the responsibilities of citizens to pay taxes but also the need for them to demand for accountability. It is, therefore, addressing the needs of the various stakeholders.

Due to the work of SEATINI, various CSOs and private sector players have joined the campaign to see to it that government has transparent and accountable tax policies and practices. With more stakeholders involved in the Tax Justice Campaign, there is also more appreciation by citizens of the need to pay taxes and

"Civil Society Budget Advocacy Group (CSBAG), a membership organisation, was only focusing on budgetary allocation and not where the revenue was coming from but following the engagement with SEATINI on Tax Justice, the members of CSBAG appreciate the importance of paying taxes, who pays and how it is collected and administered. In addition to shaping the budgeting process, CSBAG is, therefore, now involved in the campaign to ensure an increase in the tax base in addition to shaping the budgeting process".

Mr Julius Mukunda, Coordinator, CSBAG

to follow-up to see how tax revenue is being utilized.

Those who were interviewed for the evaluation commended SEATINI for building the capacity of all stakeholders including government and URA officials, private sector, CSOs as well as the citizens. Most importantly, SEATINI was noted to have demystified the tax debate which was initially considered the preserve of government officials by taking the discussions to the level to the community level. As a result, citizens too can now engage with government officials on tax issues. Most importantly, the parliamentarians who were sensitized on Tax Justice admitted that they did not know what to say about taxes but can now confidently debate on the matter in parliament.

The journalists who were interviewed for this evaluation also acknowledged that their capacity has been built in taxation issues. As a result, they can confidently present/ write about tax issues in the media which was not the case before they attended the various trainings and meetings on Tax Justice. The various media interventions including radio programmes hosted representatives of various CSOs and Private Sector Organisations (PSOs) including Kampala City Traders Association (KACITA), Uganda Manufacturers Association (UMA) and Food Rights Alliance which gave listeners an opportunity to get various views on Tax Justice. Through regional training, the Uganda team got exposure to what is happening in other countries in relation to tax collection which enabled them to learn how other countries were handling taxes while those who were trained as trainers have been able to sensitize communities in their respective areas on the need to pay taxes and what to expect from the taxes they pay.

SEATINI created awareness on tax issues through the various information materials (brochures, stickers, booklets) that were published in English with some translated into the local language (Luganda). Through various talk shows, various specialists including URA and government officials, economists and private sector and CSO representatives clarified the issues which were not clear to listeners hence enabling the public to appreciate tax issues. Most citizens were also not aware that it is their right to know how the revenue from taxes is utilized but now know their rights and responsibilities.

“The pamphlet on “the Day of a Tax Payer” was particularly useful as it made people aware that they pay taxes on items such as sugar, transport fare, soft drinks, airtime, electricity, toothpaste which they were not aware of before. As a result, people now know that it is their right to know how the revenue from taxes is utilised”.

Mr Hamzat Ssenoga, Talk-Show Host, Central Broadcasting Service

Through studies and publications, SEATINI’s input in the various areas of Tax Justice has enabled stakeholders to appreciate the need for ensuring transparency in taxation. For example, the study on Tax Justice in the Oil and Gas Sector brought out the issues related to taxation that need to be addressed if Uganda is to benefit from the Oil and Gas Sector. Civil Society Steering Committee on Oil and Gas (CSCO) of which SEATINI and many of the organisations that are involved in Tax Justice are a member - has a Revenue Tracking Working Group which is focusing on monitoring how the oil companies are handling transfers and how tax payments to government are done as well as issues related to insider trading, money laundering as well as illegal financial transfers.

The Policy Paper on Revenue Mobilization at Local Government Level made recommendations on how Local Governments can broaden their tax base and the need for citizens to be empowered so that they know and understand their roles, rights and obligations in local revenue management and

service delivery. Given the fact that SEATINI’s Tax Justice interventions are also focusing on revenue administration as a whole, SEATINI is protecting the interests of the different stakeholders including manufacturers and citizens since there is need for good roads, reliable electricity and employment which can be worked on using the revenue generated from taxes. Through the various capacity building interventions done by SEATINI, the different stakeholders have been able to improve their activities.

In addition to building capacity of the different stakeholders, SEATINI was commended for bringing all the stakeholders together who, have now realized the benefits of working jointly. SEATINI was commended for bridging the gap between CSOs and state actors. The capacity building done by SEATINI and, through the relationships created with different state actors, CSOs are now able to engage effectively with government on various issues including budgetary allocation to the agriculture sector. Through capacity building, CSOs and PSOs are also now able to connect taxation with aid, trade, agriculture and investment which was not the case before. CSOs and PSOs are, therefore, able to engage with government on a broad range of issues that affect the economy and citizens. Most importantly, in terms of Final Outcomes, SEATINI’s contribution and lead in the Tax Justice Campaign as well as the need for government to reduce the budget deficit have led to the realization for the need for government to stop giving incentives to individuals. This is in particular the case for the reducing/removing of tax incentives to multilateral corporations in the 2013/2014 Budget.

In 2012/2013 financial year, Hon. Minister Maria Kiwanuka presented some commendable tax proposals, especially in light of protecting the poor and letting the rich pay more. For instance, the increase of withholding tax on income derived from treasury bills and bonds would raise extra resources from those that are benefiting from governments domestic borrowing. Raising Pay As You Earn (PAYE) threshold from Shs. 130,000 to Shs. 235,000 per month will allow low income earners to have some extra disposable income for consumption or saving while a 10% increase of PAYE for people earning an annual income of 120 million is a good step towards a progressive tax system where government taxes are more proportional to one’s income (*source: SEATINI Annual report 2013*).

“We are no longer giving tax incentives to individuals. We shall only be giving tax incentives to specific sectors where we believe it is applicable, for instance, in medical equipment”
Ms Maria Kiwanuka, Minister of Finance. July 2013.

As a result, SEATINI was recognised by the Uganda Revenue Authority for complimenting their efforts to widen the tax base.

4. Contribution Analysis

Engagement with political stakeholders

SEATINI engaged with the Committee on National Economy of the Parliament of Uganda whose members were sensitized about Tax Justice to enable them to effectively contribute to the debate on tax exemptions and incentives. SEATINI also collaborated with various government ministries and agencies, CSOs (both national and international) and coalitions, training institutions, private sector organisations and the media. The government ministries and agencies SEATINI collaborated with included the Ministry of Finance, Planning and Economic Development (MFPED), Uganda Revenue Authority and the Local Government Finance Commission. MFPED gave the strategic direction in regard to fair tax policies and was represented in the various meetings on promoting fair tax exemptions and incentives. As a member of the Tax Justice Task Force, the URA representative provided technical input in the Baseline study and the leaflet on taxation showing how much tax an individual pays in a day and also made various presentations and trained the Tax Justice Campaign stakeholders both in Uganda and Kenya. The Local Government Finance Commission was also

represented on the Tax Justice Task Force. The Commission representative participated and made presentations in the various meetings held at both local and national level and also provided technical input on the policy brief developed on "Tax Policy paper on Revenue Mobilisation at Local Government Level For sustained Service delivery; challenges, opportunities and proposals" which clarified the local government legal and policy processes hence linking the local and national level tax issues.

Coalition building

A Tax Justice Alliance was formed to promote stakeholder engagement. SEATINI built on these efforts to enhance further stakeholders' capacity to advocate for transparent and accountable tax policies and practices and to promote fair and accountable tax and development financing policies and practices. The CSOs and PSOs that partnered with SEATINI in the Tax Justice campaign included Uganda Debt Network, Action Aid International Uganda, Uganda Non-Governmental Organisation Forum (UNNGOF), Africa Youth Development Link, Food Rights Alliance (FRA), Uganda Network of Business, Jenga Africa, Forum for Women in Democracy (FOWODE), PELUM-Uganda, Uganda Road Sector Support Initiatives URRSI), Water Governance Institute and Citizens' Watch-IT (CEWIT). The CSO Coalitions that were involved in the campaign included the Civil Society Coalition on Oil (CISCO) and the Civil Society Budget Advocacy Group (CSBAG) through whose membership the campaign brought on board issues relating to how the country can benefit from the Oil and Gas Sector and how the revenue collected from taxes is being utilised. The PSOs that participated in this campaign included the Kampala City Traders Association (KACITA) and Uganda Manufacturers Association (UMA) who brought on board the tax issues relating to Private Sector. The media houses including electronic and print media also participated in the Tax Justice Campaign by creating awareness and engaging with their listenership to clarify issues that were not clear and to strengthen local level platforms.

Research and capacity building

Through its different research activities SEATINI has clearly developed the capacity of various stakeholders. Their research pointed out that in Uganda by mobilising domestic revenues for the provision of public goods and services through taxation helps to reduce external dependence on loans and foreign aid, thus strengthening the legitimacy of the state and deepening the social contract between governments and their citizenry which reduces corruption and promotes good governance as citizens' demand for accountability from office bearers as tax payers. Taxation can also be used as a tool to achieve trade policy objectives by nurturing certain sectors through tariffs. It also facilitates income distribution to address poverty and inequality by taxing the rich and providing social services to the poor.

Whether tax incentives and exemptions work or not, there is a need for transparency, public scrutiny and dialogue; equality and bargaining are essential to building a culture of tax compliance. Accountability of government to citizens is essential. Taxation encourages citizens to make claims on governments and hold them accountable for public expenditure. It is, therefore, important for citizens to provide oversight on how tax incentives are given and utilized. The research reports on Tax Justice have clarified these mechanisms and provided evidence on the functioning of the National Taxation system and its shortcomings in terms of transparency.

SEATINI's CRAFT project was, therefore, aimed at contributing to a more democratic, accountable and responsive state in Uganda, through enhancing the capacity of civil society to advocate for a transparent, efficient, accountable and progressive tax system, that would prevent the uncontrolled outflow of resources and widespread tax evasion and corruption, tackle inequality and reinforce pro-poor policies and practices. Through SEATINI's awareness campaign following the training of Civic

Education Campaigners, 50 CSOs were engaged with over 150 Members of Parliament in 23 Districts on taxation issues while the Training of Trainers led to national level interventions through media. The CSOs in their Tax Justice campaign participated in the various discussions in the media and also created awareness among communities on Tax Justice. Those who were interviewed for the evaluation noted that the engagement on Tax Justice using well researched information has led to government's willingness to listen to Civil Society which was not the case before and, as a result of the various engagements, government has realized that there is need to have a policy that regulates and guides the process of giving tax incentives and exemptions.

Joint Planning

Those interviewed for the evaluation noted that because SEATINI involved CSOs, PSOs and other stakeholders in planning including developing a strategy for the Tax Justice programme, there was increased ownership and, therefore, the commitment of the various stakeholders in the programme. The planning meetings were noted to have brought all stakeholders on board so that they fully owned the process. As a result, the number of partners in the Tax Justice programme has been growing with organisations that were, for example, focusing on one issue such as governance, now able to link governance to Tax Justice and to other issues such as trade, agriculture and investment. The journalists who were trained about Tax Justice confirmed to the evaluation team that they went an extra mile to be able to put what they had learnt into practice and, therefore, did additional research and also used other programmes (not sponsored by SEATINI) to be able to make the necessary impact.

Case study II: SEATINI'S CONTRIBUTION TO THE BIOTECHNOLOGY AND BIOSAFETY BILL

1. Case Background

The Government of Uganda developed a Biotechnology and Biosafety Bill in 2012. The Bill was tabled before Parliament for enactment on 5th February 2013. The Bill was aimed at providing a regulatory framework that facilitates the safe development and application of biotechnology, designating a National Focal Point and a Competent Authority, establishing a National Biosafety Committee and Institutional Biosafety Committees, and providing a mechanism to regulate research, development and general release of Genetically Modified Organisms (GMOs) and related matters.

The Biotechnology and Biosafety Bill followed a number of GMO trials and research that were ongoing for more than 10 years. It was intended to provide a legal basis for the introduction of GMOs in Uganda and most especially into the agricultural sector with the aim of reducing food insecurity. This was to be realized through the adoption of GMO seeds and plants and by facilitating the safe

Box 1: Concerns about GMOs on agriculture, the environment and the economy

- GMOs bring high costs to farmers because the seeds are patented by the corporations that sell them. Farmers must, therefore, buy new seeds each season. Ugandan farmers, especially small-scale farmers, are unable to bear the additional cost of buying expensive patented seed each season.
- There is a risk of contamination of indigenous crops from fields planted with GMOs, through the likely event of cross-pollination.
- In other countries including Canada and the US, farmers have been sued by the corporations for saving their GM seed, or for being accidentally contaminated with GM genes through cross-pollination.
- Since seed saving is forbidden, future generations will lose the knowledge and value of traditional seeds.
- Contamination of Uganda's agriculture and seed with GMOs means the loss of export markets to countries that have already rejected GM foods.
- GMOs cannot address the real problems of food insecurity in Uganda. They can only serve to distract policy makers from the good options that already exist, which are being underutilized.
- There are unknown health risks associated with inserting genes from different species into seeds of food crops.
- The process of developing GMOs provides scientists with an opportunity to produce sterile seeds. The idea of producing sterile seeds disrespects farmers' rights to seed and causes total dependence of farmers and generations to come on corporations.

development and application of biotechnology. Hence the lobbying to the Biotechnology and Biosafety Bill is also known as the GMO campaign.

An analysis of the draft Bill by CSOs showed that it was intended to promote the introduction and commercial release of GMO seeds into the agriculture sector at the expense of the smallholder farmers' rights to seed. As is indicated in Box 1 below, in their submission to the Parliamentary Committee on Science and Technology, the members of the Food Rights Alliance, under the leadership of SEATINI and PELUM, raised their concerns about GMOs in regard to agriculture, the environment and the economy.

Given this background, CSOs organized and participated in a series of advocacy activities around the Bill. Spearheaded by SEATINI, PELUM-Uganda, Action Aid International Uganda (AAIU) and VEDCO, CSOs developed and shared with the Members of Parliament (MP) an analysis of the draft Bill, participated in a public hearing organized by parliament on the same, and developed and shared various information materials. The organizations also developed an open letter to each MP sharing their concerns on the bill and GMOs in general. In addition, Food Rights Alliance (FRA) and SEATINI organized a half-day meeting with MPs to further build their capacity on GMOs and the Biosafety Bill so as to inform their debate and decisions on this bill.

Given the nature of the Bill, SEATINI engaged with the Parliamentary Committees on Science and Technology, National Economy and Agriculture, Animal Industry and Fisheries. The campaign brought together CSOs focusing on food sovereignty, sustainable environmental management, health and farmers' rights. CSOs that were involved in this campaign were led by SEATINI and the Food Rights Alliance under whose umbrella 65 CSOs presented a statement to the Parliamentary Committee on Science and Technology. Other CSOs that participated in the campaign included PELUM-Uganda, Eastern and Southern African Farmers' Forum (ESAFF), Volunteer Efforts for Development Concerns (VEDCO), Caritas-Uganda, Uganda Joint Christian Council (UJCC), Alliance for Food Sovereignty in Africa (AFSA), Centre for Health, Human Rights and Development (CEHURD) and Uganda Network on Toxic Free Malaria Control (UNETMAC). Various farmers' organisations were actively involved in the Campaign both formally and informally including Wobulenzi and Kakindu Farmers' Associations. Electronic and print media were also used in creating awareness on the risks GMOs presented to Ugandan farmers and to the public.

2. Relevance and Results

The GMO Campaign started as far back as 2008 when the Ministry of Finance, Planning and Economic Development (MFPED) formulated the National Biotechnology and Biosafety Policy. The CSO campaign then involved a few organisations which included SEATINI Uganda, Advocates Coalition for Development and Environment (ACODE) and AAIU. Subsequently, the Biotechnology and Biosafety Bill was developed in 2012 to operationalize the Policy and was tabled in Parliament by MFPED in February 2013. Following the tabling of the bill in Parliament, SEATINI convened a Strategic Planning meeting for CSOs to engage Parliament on the bill. Several CSOs, which included PELUM-Uganda and ESAFF analysed the bill. Using the findings from the review, a massive awareness campaign targeting Members of Parliament, CSOs, farmers and the general public was done. As a result, the bill got wide attention from key sections of the public including religious leaders, the media, farmer organizations and politicians.

Under the leadership of SEATINI, CSOs organized dialogues in the Central, East, North and Western regions of the country and also held press briefings. As a result, there were articles that were

published in various newspapers and public debates on GMOs in various forums including radio and television stations. The journalists who were interviewed for the evaluation confirmed that through the use of radio, awareness was created on the challenges associated with the bill. Through various information materials, people were sensitized about food sovereignty and their right to use indigenous seed and not to be required to buy seed every planting season. This sensitization enabled people to give comments on the Bill in various forums including radio. As a result, people brought out issues such as the need for farmers to be consulted on the contents of the bill. Thus the awareness created led to many petitions being submitted. For example, in Eastern Uganda, communities developed a petition and delivered it to the Speaker of Parliament.

Furthermore, under the leadership of SEATINI Uganda, Food Rights Alliance (FRA), PELUM, AAIU and the Eastern and Southern Africa Farmers Forum (ESAFF), a meeting was organized for Members of Parliament (MPs) in March 2013 to enable them to appreciate the impact of GMOs on agriculture, health, environment and the livelihoods of people, to share the positions of key stakeholders on the Bill and to jointly come up with a way forward. Before this meeting, the MPs were not positive on the CSO position on GMOs as they thought the CSOs were frustrating the adoption of technologies that would lead to the commercialization of agriculture. During the meeting, it was pointed out that it is not a bad idea to introduce technology but it is important that GMOs can co-exist with non-GMOs, which is not the case. It was also pointed out that there is need to introduce technologies that will not increase the cost of production for small-scale farmers through use of fertilizers and herbicides. According to those interviewed for the evaluation, after the meeting, the MPs appreciated the issues that were being raised by CSOs and recommended that more sensitization be done for both MPs and communities on the implications of the Bill.

The analysis of the Bill also noted a number of gaps and omissions. For example, it omitted the issue of labelling GMO food; it didn't clearly show the linkages between the various industries mentioned in the Bill; and most importantly, the Bill placed the Ministry of Agriculture, Animal Industry and Fisheries (MAAIF) with an ad-hoc function. In addition, the Bill left out provisions for public participation and consultations and compensation of farmers and communities in the event of GMO contamination.

Thus, under the auspices of Food Rights Alliance (FRA), CSOs (both national and international) made a submission to the Parliamentary Committee on Science and Technology on the Biotechnology and Biosafety Bill. In their submission, the CSOs noted that the Bill fully accorded the Uganda National Council for Science and Technology (UNSCT) the mandate to approve confined field testing, exporting, importing or transit of GMOs. In their engagement with policy makers, the CSOs pointed out that there was conflict of interest since UNSCT is the competent authority on matters of Science and Technology, the final approval for commercial release of GMOs, exportation, transit and importation should be done by a neutral government agency. As a result, the Committee report presented to Parliament proposed that in order to avoid conflict of interest, an independent agency be created to regulate the exportation and importation or transiting of GMOs through Uganda.

In addition, the CSOs pointed out that the Bill did not provide for labelling of GMOs especially for general release on the market which is very important for observance of consumer rights. The Parliamentary Committee recommended the labelling of GMOs. The CSOs also noted that the Bill did not take into account the need for having a risk assessment report for importation of GMOs which is necessary to avoid an influx of unsafe GMOs from other countries. A clause of the Bill read that if a GMO was approved in another country in the same ecological zone, there was no need to re-test it in Uganda. After engagement with the CSOs, the Parliamentary Committee recommended that this clause be deleted from the Bill.

In their submission to the Parliamentary Committee, the CSOs also raised concern about the challenges relating to the Terminator Gene aimed at protecting the intellectual property rights of Monsanto thus enabling the Company to recover its investment on research. The Committee Report made reference to an October 1999 letter written by Monsanto to Rockefeller Foundation on the Terminator Gene being developed for cash crops and not for food crops. However, as a result of the engagement with the MPs, the Committee recommended that this clause be deleted from the Bill as it was applicable to Rockefeller Foundation and not to the people of Uganda.

In addition, in their submission to the Parliamentary Committee on Science and Technology, the CSOs pointed out that there was a very sketchy provision for public participation and consultations during the development and general release of GMOs. While Uganda's agricultural sector is mainly composed of smallholder farmers, there was no clear mention of representation of the smallholder farmers in the Bill. Most importantly, farmers were not represented in the GMO Regulatory Authority. The Parliamentary Committee recommended the representation of farmers on the Board of the Regulatory Authority by a recognized farmers association.

The CSOs also noted that the Biotechnology and Biosafety Bill held no respect for the rights of farmers because if their fields and the environment got contaminated by GMOs, it would be impossible for them to successfully claim for compensation. While the Parliamentary Committee noted that a certain amount of incidental, trace level of pollen movement may occur, it is not possible to achieve 100% purity of seed or grain in any crop production system and recommended that the Bill should address the problem of accidental contamination of conventional food by GM material.

The fact that the bill was reviewed by CSOs article by article enabled the CSOs to argue the case against the introduction of GMOs in the country. The success registered so far is that the bill was referred back to the Parliamentary Committee of Science and Technology for further consultation by MPs with their constituents. In a consultative meeting held in the President's Office Building on 4th August 2014, a Medical Doctor noted that so far no research on the dangers of GMO foods to people has been done because it is unethical to use human beings for such a study and warned of the GMOs contaminating organic foods leading to Uganda losing foreign earnings from selling organic food in the international market. A Ugandan resident in Canada informed the meeting that having realized the health problems associated with GMO foods, people in North America are craving for organic foods which have become five times more expensive and noted the need for Uganda to have a strong legislative mechanism to protect its organic foods. An official of the Ministry of Defence noted that the Ministry is concerned about the bill because GMOs will enslave Ugandans to those who supply seed and it is the duty of the Ministry of Defence to protect the sovereignty of Uganda. While one participant noted that because of the Banana Wilt, there is need for resistant GMO bananas, several MPs recommended that the Bill be amended so that it bans GMO food.

Following the various discussions on GMOs, the major success attributed to SEATINI is the fact that it is now not possible for researchers to say that GMOs are the answer to the country's food insecurity as people are aware that they are not. In addition, GMOs were initially being promoted by scientists without considering their safety but they now acknowledge that there are issues related to health which need to be researched on.

3. Contribution Analysis

SEATINI taking the lead

SEATINI was credited by those interviewed for the evaluation, for being pro-people as it looks at the rights of people. SEATINI was also recognized for taking the lead in the advocacy initiative on GMOs by lobbying for significant changes in the Biotechnology and Biosafety Bill and for taking the discussions on GMOs to the farmers who are now aware of the challenges related to the promotion of GMOs. SEATINI was also commended for being part of all agricultural related laws and policies including the National Seed Policy and the Plant Variety Protection (PVP) Bill.

Effective CSO Partnership and coalition building

SEATINI together with the Food Rights Alliance has promoted and contributed to the building of a very broad coalition of Civil Society Organisations including Farmer Organisations. The joint planning sessions that were held by the CSOs enabled them to work effectively together as they identified the different roles to be played by the various stakeholders. As a result, the various CSOs that have been involved in the GMO campaign have been able to reach various stakeholders. For example, VEDCO and ESAFF passed on information to farmers and farmers’ organisations while PELUM passed it on to its Ugandan members which has led to many CSOs and farmers groups participating in the campaign hence becoming a more effective and representative campaign. The fact that 65 CSOs including farmers’ organisations and international, national CSOs presented a Statement on the Biotechnology and Biosafety Bill to the Parliamentary Committee on Science and Technology is an indicator of the level of awareness about the Bill.

Awareness raising

The awareness created by the lead CSOs including SEATINI on the challenges and dangers of GMO food has been instrumental in influencing the debate on GMOs both in Parliament and in the media.

Due to the awareness created, different sectors of society have taken interest in the Bill including religious leaders, health professionals and the media. Due to lack of resources, it has not been possible to have radio or TV programmes on the GMO campaign but various media houses have had programmes about the campaign.

Constant engagement with the MPs

The sensitization that was done for the MPs on GMOs made it difficult for them to ignore the submissions of CSOs on the bill. Although the legislators initially considered the Bill too technical for farmers, after being sensitized about it, farmers consistently engaged their MPs both formally and informally about it leading to MPs taking more interest in the bill.

Awareness raising
The farmer leader who was interviewed for the evaluation noted that due to the trainings and exposure visits he had had, he has sensitized his fellow farmers about their rights leading to farmers engaging with their respective MPs on the Bill. He was able to confidently discuss the challenge of introducing GMOs with the officials of the National Agricultural Research Organisation (NARO) and was able to talk about the disadvantages of GMOs and answer the questions raised by listeners of the community radio in his area. He noted that currently farmers are able to exchange seed which will not be possible with GMO seed as it will require them to buy seed every planting season. He also noted that the cost of production will be higher as they will have to buy herbicides which they are not buying now and that as was the case with hybrid bananas, it will be difficult for farmers to get a market for GMO food. He further noted that some indigenous foods have cultural and medicinal values which will be lost if they are substituted with GMO food and that, given the fact the country has different ecosystems, with the research on GMOs only being done in research stations, GMO seed will not necessarily do well in all parts of the country.

Farmer leader Wobulenzi Farmers’ Association

Discussions in the media

The development of technology is politically sensitive as Monsanto, the leading promoter of GMOs is well resourced and is, therefore, in a position to influence governments. A case of bribery of MPs was reported in the papers which created suspicion among those who were not yet involved in the

campaign leading to more discussions on GMO in the media which have led to more awareness and different stakeholders participating in the consultative meetings organized by MPs.

4.0 Conclusions and Lessons Learnt

The debate on GMOs is a sensitive one as it involves multi-national companies that are well resourced. However, the fact that 65 CSOs and community based/ farmer organisations at the national level as well as other regional and international civil society organisations (e.g. African Biodiversity Network) were brought on board made it difficult for the legislators to ignore the submissions of CSOs.

Working as a team and not having parallel activities enabled the CSOs to share information and to come up with a common position which was used to dialogue with MPs. The fact that farmers invited their MPs to go and explain to them the contents of the bill has led to various debates on the bill. It is, therefore important that advocacy issues are taken to the community level so that they are able to attract the attention of legislators and technical personnel in the relevant government institutions.

As a result of the CSO led campaign against GMOs, there are engagements between various stakeholders and the legislators. Kenya banned GMOs after discovering that the losses outweigh the gains. It would be useful for Ugandan CSOs to take the GMO debate to the East African Community level so as to enable Uganda to learn from the experiences of Kenya and Tanzania both of which have legislations on Biotechnology.

The prolonged debate on the Biotechnology and Biosafety Bill is a result of the initiative taken by CSOs under the leadership of SEATINI without whose engagement, Uganda would have had an unfavourable legislation on Biotechnology. To be able to make the necessary impact, more awareness on the dangers and challenges related to GMO food needs to be done for MPs and for farmers in different parts of the country.

5.3 Relevance of Results

The two cases described above indicate that SEATINI is an organisation widely recognized by partners as a central and significant one to effectively tackle political issues and to successfully bring the point of view of CSOs to the forefront in the Ugandan political arena. There are four critical factors which have made the work of SEATINI relevant for reaching its goals of policy influencing at local, national and regional level. The cases of the Tax Justice and GMOs Campaigns have been instrumental to point out at these critical factors:

1. Coalition building for lobbying and advocacy

SEATINI is able to take up controversial issues in the Ugandan political arena; both the Tax Justice Campaign as well as the lobbying for the improvements in the Biotechnology and Biosafety Bill do illustrate this. In the first place, SEATINI is capable to build coalitions which appear to be quite successful and effective. As has been illustrated by the debate on GMOs which appeared to be a sensitive issue in Uganda as it involves multi-national companies that are well resourced. The fact that 65 CSOs national, international and community based CSOs were brought on board made it difficult for the legislators to ignore the submissions of CSOs. Also in the case of the Tax Justice Campaign SEATINI was able to lead the process of coalition building for advocacy and lobbying with a wide range of partners (Tax Justice Alliance). It did not only partner with CSOs but also with the

media and with Private Sector representative organisations. A thorough Stakeholder Analysis was at the basis of the formation of these coalitions or alliances.

2. Working together on a joint strategy

The coalitions were not an empty phrase as partners planned their strategy together. The campaign brought on board civil society from the EAC region, Africa and international level to help strengthen the campaign. SEATINI was instrumental to lead the development of a communication strategy in both campaigns. Working as a team and not having parallel activities enabled the CSOs to share information and to come up with a common position which was used to dialogue with MPs. SEATINI is partnering with organisations that have outreach programmes and have been training their staff. These organisations are supposed to sensitize the citizens about taxes and GMOs and the need for them to demand for accountability and respect of their rights from the government. However, there was no established mechanism for following up those trained which needs to be taken into account in future interventions.

Through partnerships with PSOs and CSOs which are focusing on different issues, there is synergy built with each partner bringing on board different angles to solving the problem which leads to the campaign being able to address the needs of the different stakeholders.

3. Research and awareness raising

A very important element has been the studies and research done on the topics of Tax Justice and Biotechnology and Biosafety. In both campaigns, the in-depth studies made on the basis of the inputs of so many Civil Society Organisations, Private Sector but also of experts in the different domains – in some cases even Government Institutions – made it possible to enter the political arena with enough evidence. Partnerships with various international agencies including Universities in analysing tax laws have also proven to be of relevance. On the basis of these analyses it was possible for SEATINI to enlighten the public debate on the critical issues at stake in both the Tax Revenue system and their utilization as well as in the GMO debate.

Furthermore, SEATINI Uganda mobilized and strengthened awareness of CSOs as well as the population around tax justice matters and GMOs through its various information materials, cartoons, radio programmes and other means. For instance in the case of Tax Justice, the high level of corruption in government agencies accompanied by the inability of government to recover misappropriated funds made it difficult for citizens to appreciate the need to pay taxes. In addition, since very few Ugandans pay direct taxes, they do not find it necessary to question how government utilizes the tax revenue. Hence there was an urgent need to raise the awareness of citizens on the one hand on the value of paying taxes and on the other the importance to know how the taxes are being utilized. In this type of situation, SEATINI is well capable – in collaboration with their partners – to develop communication strategies to reach out to the ordinary public.

4. Political engagement at various levels.

The prolonged debate on the Biotechnology and Biosafety Bill is a result of the initiatives taken by CSOs under the leadership of SEATINI to engage with Members of Parliament and their relevant committees. Also in the Tax Justice campaign SEATINI also engaged with various government ministries, agencies (e.g. Uganda Revenue Authority) and Parliamentarian Committees. To the extent that SEATINI has been recognized by government institutions as an expert organisation on certain topics. To be able to make the necessary impact, MPs were made aware on the implications and challenges related to Tax Justice and GMOs which ultimately resulted in adjustments or even postponement in the legal process.

It also appeared to be very important that advocacy campaigns are taken beyond the national level to the community level so that they are able to attract the attention of legislators and technical personnel in the relevant government institutions. The fact that farmers invited their MPs to go and explain to them the contents of the Biotechnology Bill has led to various debates on the Bill.

As a result of the CSO led campaign against GMOs, there are engagements between various stakeholders and the legislators at regional level. For instance, Kenya banned GMOs after discovering that the losses outweigh the gains. It would be useful for Ugandan CSOs to take the GMO debate to the East African Community level so as to enable Uganda to learn from the experiences of Kenya and Tanzania both of which have legislations on Biotechnology.

6. Discussion

1. The support to SEATINI by Oxfam Novib is not a project support but core funding based on the Three-Year Strategic Plan 2013-2015 (and which was preceded by the Strategic Plan 2010-2012). One of the key changes in their new strategic plan was to engage more intensely “with stakeholders at the District and lower levels to promote evidence based advocacy at national, regional and global levels; and to ensure that the voices of the people, who are impacted most by these policies, are heard in these processes.” (Source SP 2013-15). Both the analysis of the relative changes 2012-2014 (indicators 1b, 4a and 4b) and the two case studies indicate that SEATINI has been successful in realizing this objective. In particular the collaboration with farmer organisations and the capacity building through awareness raising has impacted on the capacity to raise political issues of importance to farmers and their communities. The programme as such was therefore well-designed as it was fully based on the objectives and strategies as defined by SEATINI in its Strategic Plans. It also catered for flexibility to take up the issue of GMOs as a lead organisation of the Coalition to campaign for a better law.

It is therefore fully recommended to Oxfam to continue funding of SEATINI for the work they are doing.

2. However, SEATINI has not been able to monitor their quantitative goals of reaching out to 4000 farmers and 5000 stakeholders as was indicated in the previous Strategic Plan. Whether SEATINI has been able to achieve this remains unclear as the Monitoring and Evaluation Framework for their specific programmes was only developed in 2014. Whereas in their collaboration with other CSOs there is a good awareness of the partner organisations, SEATINI is not capable of monitoring how many people their activities are reaching out to, let alone the impact on the individual target groups other than the policy makers at different levels. It is therefore recommended to SEATINI to strengthen its Monitoring and Evaluation capacity in particular to monitor their reaching out to farmers and their organisations and the consequences for their livelihoods.

3. Besides, despite the fact that SEATINI is partnering with women organisations their campaign work on Tax Justice and GMOs has not always included an assessment of differentiated impact on men and women. In their Strategic Plan 2013-15, SEATINI had indicated that they would “consciously undertake a gender analysis of all its work so as to effectively address the challenges and needs of both women and men”. It is also mentioned in the SP that “SEATINI in its programmes will mainly target women as its beneficiaries and focus its activities on their empowerment”. However, there is no clear strategy defined how to operationalize this attention for gender issues in the three programmes of Trade and Economic Social and Cultural Rights, Regional Integration and Finance for Dev. In the analysis of the organisational timeline 2012-2014 nor in the Most Significant Changes Analysis, the issue of gender (and women) did not emerge. It is therefore recommended to take up

this issue seriously and to better strategize the mainstreaming of gender (and generation) issues in their work.

4. The impact evaluation could be improved by implementing the assessment over a longer period of time. And given the limited time available making information available by the different stakeholders involved should be given a priority. A single time evaluation could be sufficient for this type of impact evaluations.

5. SEATINI has adopted the approach to network and collaborate with various other stakeholders in order to be able to provide evidence-based policy options to policy-makers generated through collaboration with a wide variety of CSOs, Private Sector, Universities and even government institutions. This very good practice authenticates SEATINI's work and provides the organisation a morale edge over so many other organisations involved in policy advocacy and lobbying processes.

7. Conclusion

Changes in Civil Society Strengthening 2012-2014 for SEATINI

On all dimensions there is a positive to very positive improvement. The most relevant changes have been observed with respect to Civic Engagement (dimension I) and Perception of Impact (dimension IV), in particular with respect to the political arena through lobbying and advocacy and an active engagement of Policy makers at district, national and regional levels as well as through their collaboration with Civil Society Organisations to pursue political ends. This enhanced and effective collaboration is further reflected under criteria 2.1 and 2.2 which show that SEATINI has become a respected and lead organisation on behalf of Civil Society in many areas of policy-making.

With respect to SEATINI's internal organisation, the criteria 2.3 and dimension 3 indicate that there is stagnation, in particular with respect to their financial resources. The external financial dependency – in particular of Oxfam Novib – remains high which may jeopardize the sustainability of the organisation in the future.

Attribution of changes

SEATINI has played a very important role as lead organisation in many policy lobbying and advocacy campaigns in Uganda, as has been shown by the cases of the Tax Justice campaign and the GMO campaign. Through its capability to liaise and collaborate with a wide array of different stakeholders and jointly plan activities, SEATINI has been able to realize its programmatic goals as defined in its Strategic Plans covering the period 2010 up to 2015. As said before, SEATINI is being recognized by all their partners as the only organisation that has been capable of effectively tackling important political issues such as Regional integration, Finance for Development and Trade.

Secondly, on the basis of their collaboration with many different organisations they have been able to build up the evidence from their analytical and research work. In particular, their strategic move to more effectively engage with the District and local levels in Uganda has provided them with the concrete information of the implications and impacts that new policies may have on the local population. Hence SEATINI – together with its many partners – have been able to stronger lobby at different levels, including the lobbying of Members of Parliament through local and/ or farmer leaders.

In the third place, SEATINI's capability to engage with policy makers at national and regional levels has been a critical factor. SEATINI has been able to take the lead in developing communication and engagement strategies which later on were applied together with their campaign partners.

Relevance of the changes

The relevance of the changes have been analysed and presented in Chapter 5.3

Explaining factors to identified changes

The lead and important role of SEATINI as (co-)facilitator of the process to take up the challenges of lobbying and advocacy for policy change in a country like Uganda where CSOs have been critically followed over the past decade, is a commendable one. This role is not automatic as SEATINI has been threatened several times by the Ugandan authorities. For instance in 2013, Government tried to intervene in SEATINI's work followed by threats of being de-registered as a result of SEATINI's input in the Plant Variety Protection (PVP) Bill.

SEATINI has a strong vision and mission which – together with its organisational set-up including the Board and International linkages– makes it possible to operate in the highly complex and sometimes controversial political arena of Uganda. The continued funding by OxfamNovib over a prolonged period of time has made it possible for SEATINI to operate in this arena.

Assessment of project design

Statements	Scores
The project was well designed	8
The project was implemented as designed	9
The project reached all its objectives	8
The observed results are attributable to the project interventions	9
The observed results are relevant to the project beneficiaries	9

Scale of Scores: 'Not at all' (1) - 'Completely' (10)

Annexes

- 1. Short description of the MFS II CSS baseline and endline methodology (similar for all CSOs)**
- 2. Description and scoring of relative changes CSS 2012-2014**
- 3. List of people interviewed**
- 4. List of documents consulted**

Annex 2. Description and scoring of relative changes CSS 2012-2014

SEATINI Baseline Assessment and Endline Assessment INDICATORS

Indicator	Assessment (baseline)	Score 0-3	Assesement (endline)
Dimension 1: Civic Engagement		2,5	Overall Relative change Dimension 1: +3 (very positive)
1a – diversity of socially based engagement		2	Change +2
1. Degree to which the needs of beneficiaries / target groups are included in SPOs analysis, planning and implementation.	SEATINI partners with a wide range of organisations (50+) in order to integrate the needs of different categories of beneficiaries in their analysis and planning. Participation of SEATINI's target groups is not done directly but indirectly through the various partners it is working with. SEATINI consults these specific partners within the three areas of interest: agriculture, finance and trade.		<p>In order to bring out the voices of the target groups in advocacy, SEATINI has translated information materials into the local language. Using the information materials in local languages, farmers' groups have been able to input into the Civil Society position on GMOs. Through <i>satisfaction surveys</i> in the Tax Justice Campaign/Financing for Development, SEATINI mobilised the views of the grassroots and fed them into policy advocacy. SEATINI has also organised <i>meetings</i> of communities and other stakeholders with local government leaders in Amuru, Lira, Palissa and Nebbi districts and engaging with them on matters regarding financing for development. Smallholder farmer representatives, CSOs and youths were also sensitised on their role in demanding for accountability. SEATINI has also involved smallholder farmers, traders, CSOs, Private Sector Organisations (PSOs) and the academia in the development of the <i>Promoting Agriculture, Climate Change and Trade Linkages</i> in the East African Community (PACT-EAC) objectives and timeframe.</p> <p>In order to take into account how the different policies affect women, SEATINI is <i>partnering with various women's organisations</i> including Uganda Women's Entrepreneurs Association (UWEAL), Uganda Women's Network (UWONET), Forum for Women in Democracy (FOWODE) and the Eastern Africa Sub-Regional Support Initiative for the Advancement of Women (EASSI). The women's organisations were involved in the development of SEATINI's M&E framework. UWEAL highlighted the different roles of women in the trade analysis while FOWODE was brought on board to analyse how the budget affects women. Being the majority in food production, there is a focus on women's role in the seed sector. In partnership with UWONET, there were joint activities during the "Women's Week" to bring out the need</p>
2. Degree of participation of target groups in analysis and planning of SPOs.	In order to take the special needs of women into account, two of their specially trained staff will spearhead the mainstreaming of gender in SEATINI's advocacy and lobbying campaign. Through radio programs, SEATINI gives citizens an opportunity to engage with policy makers. In this way, SEATINI gets to know the issues that the Citizens of Uganda are concerned about and therefore focus on those in their advocacy actions.		

Indicator	Assessment (baseline)	Score 0-3	Assesment (endline)
			for women's empowerment and gender sensitive policies. <i>Joint statements</i> were addressed to policy makers on various issues related to women's empowerment.
1b – diversity of political engagement		3	Change +1
3. Number of dialogue platforms with local or national government that SPO is participating in.	SEATINI is involved in various platforms at international, sub-regional and national levels. SEATINI is partnering with four Ministries (Finance, Trade, East African Community and Agriculture) as well as Members of Parliament to be instrumental in influencing government policies, programs and strategies. SEATINI often acts as a representative of CSOs; eg. SEATINI heads the Economic Justice Thematic Cluster under the Civil Society Platform for the African Union and represents CSOs in both the on the High Level Task Force of the East African Community Affairs and the Inter-Institutional Trade Committee of the Ministry of Trade.		SEATINI works with and has initiated a number of alliances/working groups: these include the <i>Tax Justice Alliance and Task Force, the Food Rights Alliance and the CSO Working Group on Trade.</i> SEATINI is chairing the <i>Revenue Tracking Thematic Group</i> in the Civil Society Coalition on Oil and gas and the Economic Justice Cluster in the East African Civil Society Forum (EACSO). SEATINI represents the East African region on the Africa Trade Network and on the Tax Justice Network-Africa/Global. In these various platforms/networks, SEATINI has been able to enhance the capacity of the stakeholders to effectively participate and have their voices heard in these processes. Other political engagements include Min. Of Finance , Members of Parliament, the Committee of Science & Technology , and the Committee on Agriculture, Animal Industry and Fisheries.
4. What is the intensity of involvement in dialogue platforms or sectoral networks?			
Dimension 2: Level of Organisation		2,3	Overall Relative change Dimension 2: +2 (positive)
2a – Organisational level of civil society		3	+1
5. Degree of participation of the SPO (and possibly CFAs) in sectoral networks of civil society organisations.	SEATINI is involved in various CSO networks at international, sub-regional and national levels. At national level, SEATINI is a member of nine national networks focusing on trade, food sovereignty, oil and gas, climate change, national budget allocation and access to essential medicine. At sub-regional (East Africa) level, SEATINI is a member of two networks focusing on climate change and agriculture, and regional integration. At the regional (Africa) level, SEATINI is a member of two networks focusing on trade and tax justice. At the international level, SEATINI is a member of networks focusing on aid effectiveness, good governance and the Economic Partnership Agreement.		SEATINI is increasingly taking a lead role in CSO networks and in government committees at national and sub-regional levels. Since 2012, SEATINI is heading the the <i>Revenue Tracking Group in the Coalition on Oil</i> and the <i>National Chapter of EAC National Dialogue Framework</i> aimed at mobilising PSOs and CSOs to participate in Regional Integration processes. SEATINI is also a member of the Ministry of Agriculture, Animal Industry and Fisheries Platform on standards of maize grain and beans and the Steering Committee of the Tax Justice Network. Being the only organisation focusing on trade, SEATINI carries out studies, satisfaction surveys and develops position papers, petitions and open letters on trade related issues and, therefore, enriches the debate on trade in the
6. Nature of the relationship between the SPO (and possibly CFAs) and sectoral networks/umbrella			

Indicator	Assessment (baseline)	Score 0-3	Assesment (endline)
organisations in the MDG/theme.			various platforms. Through interactions with other CSOs in the region, SEATINI's publication on Tax Justice "A Day in the Life of a Ugandan Tax Payer" has been replicated by other organisations in Ghana and Tanzania.
2b – Dialogue and communication		2	+2
7. Degree to which a shared analysis of situation in society exists	SEATINI is playing a lead role in many networks and platforms. Together with their partners and members of the various networks and platforms, SEATINI analyses various policies and publishes policy briefs. The research and analysis has been used by CSOs and other stakeholders to come up with evidence based statements and also cause policy changes. Through the various networks and platforms, SEATINI is involved in various campaigns and produces various publications for supporting campaigns and for creating awareness on various issues that affect citizens. SEATINI also publishes fact sheets and policy briefs. SEATINI produces a quarterly magazine and case studies, and has a website. The website has up-to-date information on SEATINI's activities.		SEATINI's advocacy is based on the principle that policies/agreements at global, regional and national levels should be informed by and respond to the challenges and opportunities at the lower and household levels. Through <i>Open Letters to policy makers</i> at the EAC Secretariat and Permanent Secretaries of Government Ministries, SEATINI's engagement with policy makers is now more direct with Members of Parliament calling upon SEATINI to make presentations on trade issues. SEATINI led the process of developing the <i>National Civil Society Engagement Strategy and the Communication Strategies on EAC Regional Cooperation and Integration Processes</i> and the <i>National CSOs' M&E Framework for Engagement and Communication on the EAC Regional Integration Processes</i> which were used by the Ministry of East African Community Affairs (MEACA) and the NGO Forum to develop <i>the National Dialogue Framework</i> for enabling CSOs and Private Sector Organisations (PSOs) to effectively participate in the East African Integration process. SEATINI also led the process of developing a <i>Training Guide on Policy Advocacy Skills</i> for CSO Engagement with the EAC. These publications were done with the input of PSOs, youth and women CSOs and district networks; print and electronic media; academia and trade union representatives. With more direct communication, there is constant feedback from Members of Parliament (MPs) and the Secretary General of the EAC on SEATINI's proposals. In the EAC-USA-TIPA, (Trade and Investment Partnership Agreement), the Director General of Customs included SEATINI's study findings on EAC Trade and Investment in the EAC negotiations while MPs invited SEATINI to make presentations when reviewing the <i>Trade Licencing Bill</i> . SEATINI's information materials are often simplified to enable stakeholders to understand the issues being discussed.
8. Degree of joint activity as a result of joint analysis			
9. Mode, nature and quality of dialogue / communication			
2c – financial and human		2	Change -1

Indicator	Assessment (baseline)	Score 0-3	Assesment (endline)
resources			
10. Composition of current financial resource base of SPO	<p>Oxfam Novib provides program support to SEATINI and was the first major donor of SEATINI. While Oxfam Novib provided 80% of the total funding in 2008, by 2010, Oxfam Novib's contribution fell to 39% but rose again to over 50% in 2011.</p> <p>SEATINI's local contribution was only 1% of the total income in both 2010 and 2011. It was from the sale of publications and doing consultancies.</p> <p>Quality of staff in terms of qualification and experience is high. For several reasons – often personal – there has been a high turnover of staff recently. In order to meet the staff requirements, SEATINI recruited a total of 7 new staff in 2012.</p>		<p>Oxfam Novib's contribution to SEATINI's funding further went down to 27% in 2012 but increased to 31% in 2013.</p> <p>SEATINI generated 5% and 9% of the total income in 2012 and 2013 respectively from consultancy work and sale of books.</p> <p>Since 2012, the rate of staff turnover has been 15%. The turnover has mostly been for personal reasons. Two (2) staff resigned this year (2014) and are yet to be replaced.</p> <p>As a means of ensuring sustainability, SEATINI Uganda is planning to raise internally generated incomes through consultancies, sale of prequalifications for supply of services and sale of some publications.</p> <p>SEATINI Uganda also charges a 10% administration fee on external consultants.</p>
11. Degree of dependency of external funding			
12. Human resources management by the SPO			
Dimension 3: Practice of Values.		2,3	Overall Relative change Dimension 3: +1 (positive)
3.a - Internal Governance		2	Change +1
13. Degree to which organisational structures are involved in strategic management of the SPO	<p>SEATINI has a Board of Trustees that offers strategic direction to the organisation in the 3 countries of operation and a Country Management Board in Uganda consisting of 5 members who meet quarterly. The roles and responsibility of the Board are embedded in the constitution of the organisation. The Board considers and passes the audited accounts, the Strategic Plan, the organisation's policies and procedures and the annual and quarterly workplans and budgets. The Board has the Human Resource and Finance Committees.</p> <p>SEATINI holds staff meetings for review and planning every 2 weeks. The staff meetings also review administrative issues and are also used to communicate the board decisions to staff.</p>		<p>SEATINI Uganda is governed by a country programme management board which meets four times in a year, consisting of professional women and men. In 2014, two new members joined this board.</p> <p>Monthly and quarterly reports are prepared for the Board's review. There are annual programme evaluations. Bi-annual programme reviews are going to be done beginning this year (2014). SEATINI now holds Project Inception meetings and Mid-term and End of Project reviews involving key stakeholders.</p>
14. Degree of sharing of information to staff (structured and regular)			
3b- Transparency		2	Change =0
15. Independent external (financial) auditing	SEATINI's accounts are audited annually. According to the Accounting Policy and Procedures Manual, external annual audits		SEATINI Uganda shares her annual audited accounts with all her partners. SEATINI now does internal audits before the external audits to review the

Indicator	Assessment (baseline)	Score 0-3	Assesment (endline)
being done	<p>are considered an essential part of good governance. The beneficiaries of SEATINI's programs include the citizens of Uganda and farmers whom the partners. Currently, there are no direct means of communication with the beneficiaries but ways of doing so are being considered in the next Strategic Plan.</p> <p>SEATINI prepares reports that are submitted to the various donors in accordance with their specific guidelines. The reports have adequate information on the various programs that are being implemented. Where joint activities are carried out, reports are prepared jointly.</p>		<p>the financial accounting systems/procedures and internal control mechanisms.</p> <p>The Board appoints the auditors annually and also approve the audited accounts.</p> <p>With support from OXFAM NOVIB, SEATINI developed an M&E Framework as a tool for measuring impact and performance. The framework will enhance SEATINI's accountability to her partners and stakeholders. Staff will be trained in M&E on 30th May 2014.</p> <p>There is now more direct communication with various stakeholders using google groups, facebook and twitter. Communication with beneficiaries is through meetings, radio programmes and text messages. Various reports including reports from negotiations on bilateral trade negotiations are shared with the various stakeholders while annual reports are shared with the donors and other stakeholders. The annual report has a section on finances to inform all stakeholders about SEATINI's finances.</p>
16. Degree of transparency towards beneficiaries			
17. Extent of upward and downward accountability by SPO			
3c – Internal financial and human resources management		3	Change =0
18. Extent to which internal written procedures for financial and human resource management are being respected	SEATINI has a Human Resource Management and Accounting and Procurement policy and procedures in place. They were reviewed by a Consultancy firm to ensure that SEATINI had improved processes and strong organisational management systems. The policies and procedures are adhered to. All staff have a copy of the policies and procedures manuals. SEATINI has a Code of Conduct.		<p>An introduction exercise is undertaken for the new staff where the SEATINI policies and values are explained.</p> <p>Accounting and finance Manuals were put in place last year and they are operationalised. SEATINI was awarded a QUAM certificate in the same year</p>
Dimension 4: Perception of Impact		2,3	Overall Relative change Dimension 4: +3 (very positive)
4a –Responsiveness		2	Change +1
19. Degree of incorporation of priorities of target groups in plans and activities	<p>The advocacy and lobbying actions of SEATINI focus on issues that affect citizens. Through both electronic and print media, publications and workshops, SEATINI creates awareness of how the various issues affect citizens.</p> <p>SEATINI's work is primarily focusing on influencing government policies, programs and strategies. It also focuses on trade-related issues at sub-regional (East African Community), regional (African</p>		<p>SEATINI creates awareness among various stakeholders including smallholder farmers and the private sector players and jointly come up with them on the way forward on key issues and also jointly plan whom to target in the advocacy campaigns. In addition to trade related issues, SEATINI is now focusing on tax justice and financing for development at both local and national levels and on climate change.</p> <p>SEATINI has continued to develop stronger close working relationship with</p>
20. Degree of alignment with government			

Indicator	Assessment (baseline)	Score 0-3	Assesment (endline)
policies (planned and implemented)	Union) and global levels.		Members of Parliament at national and regional levels. At the national level, SEATINI-(U) works closely with the Parliamentary Committees on Trade, National economy and Agriculture; and with the Parliamentary Forum on Regional Integrtion in terms of capacity building through workshops/ seminars, information dissemination and technical assistance regarding trade related bills/papers. As a result, key trade issues of interest to the different stakeholders have been discussed in Parliament before being passed while parliamentarians are questioning the positions taken by the executive on trade related matters. SEATINI is participating in regional and international trade related negotiations as part of the government delegation.
4b – Social impact		2	Change =0
21. Target group satisfaction regarding fulfilment of their primary social and/ or personal concern	The direct beneficiaries of SEATINI’s work are the partners working with SEATINI on the various advocacy issues. Many partners (eg. Send a Cow, VEDCO, or PELUM) have collaborated with SEATINI to advocate on smallholder farmer issues and have had both their technical and advocacy and lobbying capacity built by SEATINI. As a result, they testify that it is now able to engage with the various committees of parliament on issues affecting smallholder farmers.		In addition to smallholder farmers, SEATINI is now working directly with communities including youth and women’s groups and is also partnering with trade unions on advocacy interventions.
22. Degree to which empowerment of target groups towards public and/ or private sectors have been enhanced	SEATINI is considered by the partners as a Hub on trade issues and builds the capacity of the partners through the various researches done on various policies and treaties.		In addition to trade issues, SEATINI is spearheading policy advocacy on taxation issues and is working with various CSOs including Action Aid, Uganda Debt Network, Forum for Women in Democracy (FOWODE) and the Civil Society Advocacy Group (CSBAG); Uganda Land Alliance, government institutions including the Local Government Finance Commission, Uganda Investment Authority, Uganda Revenue Authority; and PSOs including Uganda Manufacturers Association, Private Sector Foundation and KACITA and with universities in doing research on investment and tax justice.
23. Degree of sustainability of the social impact	As a result of SEATINI’s awareness creation, there is an improved mainstreaming of MDGs in CSO’s work with increased reference to the achievement of MDGs within their broad goals and objectives.		Regarding MDGs, SEATINI’s contribution is that MDG8 on the issues of trade has been put on the table especially in the Post 2015 debate but needs to be given priority in order to enable countries to fund their own development instead of depending on donor funding.
4c policy impact		3	Change +2
24. Level of influence of SPOs towards major policy changes	There have been a substantial number of policy changes as a result of SEATINI’s lobbying campaigns in Uganda, eg with respect to EPA, GMO, Biosafety, Seed and Food Rights, Competition Policy,		SEATINI’s campaign on tax justice led to government reducing/removing tax incentives to multilateral corporations in the 2013/2014 Budget. As a result, SEATINI was recognised by the Uganda Revenue Authority for complimenting their efforts to widen the tax base.
25. Degree to which SPOs are holding	Consumer Protection, Trade Related Aspects of Intellectual Property Rights and the Convention on Biological Diversity. SEATINI is said to		SEATINI mobilized Civil Society to develop a statement demanding for a

Indicator	Assessment (baseline)	Score 0-3	Assesment (endline)
government (national and local) and private sector accountable	be a key partner in trade policy and negotiations as it represents NGOs in all the discussions on trade issues including the WTO and in national and regional policies.		<p>further <i>Trade Related Intellectual Property Rights (TRIPS) extension</i>. The position was used to request for support from East African Legislative Assembly (EALA) which developed a resolution indicating their support for LDCs for a further TRIPS extension. An extension of the TRIPS transition period was ultimately granted to all LDCs until 2021.</p> <p>Regarding the <i>EU Economic Partnership Agreement (EU-EPA)</i> negotiations, SEATINI influenced the current position of the EAC on Export Subsidies and Most Favored Nation (MFN) Treatment leading to the issue being referred to the Ministries of Trade for a political decision.</p> <p>As a result of SEATINI's interventions: the <i>EAC Anti-Counterfeit Bill</i> was recalled from regional level to the partner states for further discussions and consideration of problematic clauses. There was development of a joint statement by private sector (pharmaceuticals) and CSOs calling on the presidents and secretariat of EAC to strongly support the LDC call for a further TRIP extension; and assent of EAC HIV Bill by Heads of state of EAC countries.</p> <p>Regarding the <i>Biosafety and Biotechnology Bill (2012)</i> and the <i>GMO Campaign</i>, SEATINI together with the Food Rights Alliance raised awareness of the Members of Parliament and other key stakeholders about the gaps in the Bill and its effects on farmers' rights to seed, on food security and on health. As a result of this campaign, the Bill was not passed in Parliament. It was sent back to the Science and Technology Committee of Parliament for further consultations.</p> <p>In the <i>EAC-US-TIP negotiations</i>, SEATINI's petition to the Ministry of Trade, Ministry of East African Affairs and the EAC Secretary General raised an issue that the EAC should have a joint position before negotiating with the US was taken on Board and a study was commissioned to start the harmonisation process. There were also specific articles i.e. Transfers, Performance requirements, National Treatment which were taken on Board by the Ministry of Trade.</p> <p>SEATINI was also able to mobilise CSOs and raise awareness among key stakeholders i.e. farmers, CSOs and Members of Parliament on the need to address the seed issue in a comprehensive manner by finalising the <i>National</i></p>

Indicator	Assessment (baseline)	Score 0-3	Assesment (endline)
			<p><i>Seed Policy</i> to guide the promulgation of all seed related policies. SEATINI wrote a letter to the President requesting the stay of the accession of the Plant Varieties (PVP) Bill.</p> <p>SEATINI influenced policy and practice in land policy as a result of the 2012 <i>Land Grab Campaign</i>. SEATINI brought on board the issue of investment in this campaign and the need to have guidelines on how investors access land. During the global Civil Society consultations on the effectiveness of MDGs by the UN-Non Governmental Liaison Service (UN-NGLS) <i>Post-2015</i> for the UN Secretary-General, UN General Assembly, and the Open Working Group on Sustainable Development Goals, SEATINI made a presentation to the UN General Assembly on Post-2015 http://www.un-nxls.org/spip.php?article4350.</p>

Annex 3: List of people interviewed

LIST OF STAKEHOLDERS INTERVIEWED Tax Justice Case Study

1. Mr Fredrick Kawooya, Policy and Campaigns Manager, Action Aid Uganda
2. Mr Lawrence Michael Oketcho, Policy and Advocacy Manager, Uganda Manufacturers Association
3. Mr Henry Bazira Mugisha, Executive Director, Water Governance Institute
4. Mr Hamzat Senoga, Talk-Show Host, Central Broadcasting Services (CBS) and CEO, Mbugo Area Cooperative Enterprise
5. Mr Julius Mukunda, Coordinator, Civil Society Budget Advocacy Group (CSBAG)
6. Mr Micah Gaalya, Uganda Revenue Authority

LIST OF STAKEHOLDERS INTERVIEWED Biotechnology and Biosafety Case Study

1. Mr Fredrick Kawooya, Policy and Campaigns Manager, ActionAid Uganda
2. Mr Hamzat B Ssenoga, Talk Show Host, Central Broadcasting Services (CBS) and CEO, Mbugo Area Cooperative Enterprise
3. Ms Bridget N Mugambe, Policy Advocate, Alliance for Food Sovereignty in Africa (AFSA)
4. Mr Richard Mugisha, Advocacy and Lobby Officer, PELUM-Uganda
5. Mr Mbalangu Gonzaga, Legal Officer, Food Rights Alliance (FRA)
6. Mr George Kirabira, Chairman, Wobulenzi Farmers' Association
7. Ms Agnes Kirabo, Executive Director, Food Rights Alliance (FRA).

Annex 4: List of documents consulted

LIST OF DOCUMENTS REVIEWED Tax Justice Case Study

1. SEATINI. Tax Exemptions: Implications on Socio-Economic Development. 2012.
2. SEATINI and Action Aid: Tax Incentives and Exemptions in Uganda. March 2013.
3. SEATINI and Uganda Tax Justice Network: Final Narrative Report. December 2011 - August 2013.
4. SEATINI. A Day in the Life of a Ugandan Tax Payer.
5. SEATINI: Understanding Tax Justice in the Context of Transparent and Accountable Oil Management in Uganda. 2012.
6. SEATINI. Taxation, State Building and Governance. Baseline Study Uganda Report.
7. SEATINI and Oxfam: Tax Policy Paper. Revenue Mobilisation at Local Government Level for Sustained Service Delivery: Challenges, Opportunities and Proposals.
8. SEATINI: Tax Justice Advocacy Campaign Strategy. 2013.
9. Oxfam Novib: Grant Application Form – 10th European Development Fund. June 2011.

LIST OF DOCUMENTS REVIEWED Biotechnology and Biosafety Bill Case Study

1. SEATINI and Food Rights Alliance: Statement on Biosafety and Biotechnology Bill. February 2013
2. SEATINI and Food Rights Alliance: Report of the Proceedings of the Members of Parliament Meeting on Biosafety and Biotechnology Bill. March 2013
3. Parliament of Uganda: Report of the Committee of Science and Technology on the National Biotechnology and Biosafety Bill. November 2013.
4. New Vision Newspaper: Tempers flare over GMO foods. 5th August 2014.

Joint MFS II Evaluation: Civil Society Strengthening –Uganda

VECO East Africa – Uganda Programme

Technical report on VECO’s Civil Society Strengthening

1. Introduction

Organisation	VECO East Africa - Uganda
Contact Persons	John Ereng, Country Representative Denise Lapoutre, Regional Representative Email: john.ereng@veco-eastafrika.org Phone: +256-752011936
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MDG	1 (poverty reduction)

Purpose and outline of technical report

VECO-Uganda supports the development of sustainable agricultural chains at local and national level in which organized family farmers, male and female successfully influence the trade relationships and benefit through increased income. The focus of VECO is on the formation of commercial Farmer Organisations, building farmer driven cooperatives to develop sustainable agricultural value chains of Groundnuts and maize. VECO aims to contribute to a sustained improvement of small scale farmer household livelihoods through increased incomes as a result of improved accessibility to markets. Cordaid has been supporting VECO in Uganda for over a decade since 2000.

This report is presenting the context of operation of the Cordaid funded projects in the period 2011-2014. This relates to four different projects which are related to the strengthening of Farmer Organisations to develop their groundnut and maize commodity chains, to lobby for more enabling policies at district and national levels and a project to enhance access to rural finance. The report intends to analyze the relative changes for the period 2012-14 (the baseline also includes the preceding years) and to present two cases that illustrate the contribution of VECO to the realisation of their objectives.

2. Context

In Uganda 80% of the total population live in the rural areas. Most agricultural production is produced by 2.5 million small farmers households, of whom the majority have less than two hectares of land and grows for own consumption. Uganda's agricultural sector contributes about 20% to the national Gross Domestic Product, accounts for 49% of exports, provides a significant proportion of the raw materials for industry and employs 73% of the population. In the smallholder sector about 10% of farmers have access to and use quality seed (mostly maize) while 3% of the smallholder farmers use fertilizers and about 1% agro-chemicals. Good quality agricultural inputs, particularly seeds are key resources to a farmer as they enhance agricultural production thus ensuring improved livelihoods of smallholder farmers since food and income security are guaranteed.

The Government of Uganda's agricultural market liberalisation policies have focused on increasing incentives to agricultural producers, reforming price regimes, increasing competition and improving the regulatory environment for agricultural trade, restructuring and privatisation of parastatal and government marketing boards, and to a lesser extent, pro-active measures to support market development. The impact of these policies has been varied. In general, supply response to changing agricultural price incentives has not been as high as was anticipated. While the role of the private sector in agricultural markets has increased, this has not always led to increased efficiency or competition even where markets have become integrated. In addition, the distribution of benefits from agricultural market liberalisation has mainly favoured medium and large-scale commercial producers and large-scale private traders or providers of support services to marketing such as transporters leaving out the smallholder farmers.

The total agricultural output decreased in recent years due to erosion, low productivity, lack of improved seeds and the loss of labor due to HIV/AIDS. Especially in Eastern Uganda (less fertile and drier), the yield in agriculture is low and farmers receive low prices for their produce due to low organization rates. For women, the lack of control over productive resources remains one of the root causes of poverty. Although women are responsible for the vast majority of agricultural production in Uganda, it is the male heads of households who control land ownership, the crops and livestock produced from women's labour, and the financial gains from market sale as women often have little or no say in household decision making.

The current policies of the Government of Uganda relating to agriculture are viewed as positive and can benefit smallholder farmers on a local, national and regional level. However, there is no evidence that these policies really benefit smallholder farmers. Although many reports highlight the success or partial success of some of the government programs, the reality on the ground is different as smallholder farmers groups and associations do not always benefit from the provision of government services hence the need for the farmers organisations to: (1) collaborate with District Local Governments who are the implementers of government policies and programs; and (2) monitor the effects of government policies and programs.

Now that produce marketing is almost entirely in the hands of private traders, farmers are obliged to make complicated marketing decisions for themselves. Some farmers are already adopting these collective marketing strategies and receiving the benefit of higher prices for their output. There is a renewed recognition and interest by the government in the role cooperatives can play in improving the livelihoods of farmers. Government and other development actors are increasingly promoting cooperatives including the bulking of agricultural produce and collective marketing as a pathway to alleviating poverty. The cooperative department has been alleviated to a ministry of state level in the former ministry of Trade Industry and Tourism that has been changed to Ministry of Trade, Industry and Cooperatives following intensive lobbying by actors including Uganda Cooperative Alliance.

Farmers need to be sensitized about the benefits of co-operation and how they go about setting up such systems. This requires farmers to acquire new skills and to develop closer relationships with their fellow farmers.

Small family farmers in Uganda are also facing problems resulting from poor access to reliable inputs. The provision of controlled quality inputs, in particular seed, has constantly been a challenge for the agricultural sector in Uganda due to poor implementation of quality standards. Another major challenge experienced by farmers is their access to agricultural finance. Government has introduced incentives to commercial finance institutions through tax holidays on interest earned from agriculture lending; it has established financial instruments such as a guarantee scheme and it has tried to establish mechanisms that would bring financial services closer to the rural people. However, presently only large-scale commercial farmers can successfully access credit from financial institutions. Small-scale farmers are often frustrated and have to pay high interest on loans due to poor and unfavourable terms and conditions under which agricultural loans are provided.

Finally margins from marketing of family farm crops are still small as cooperatives in Uganda have remained weak and not able to support small holder farmers to effectively participate in markets. Government policies on cooperatives need to be addressed to reduce politicisation of cooperatives and strengthen farmer participation. The Uganda National Farmers Federation (UNFFE) and the Uganda Cooperative Alliance (UCA), as well as District Farmer Associations are the main farmer organisations set out to influence agricultural policies in Uganda to address challenges affecting family farmers on agriculture value chain issues.

Groundnuts are the second most widely grown legume crop in Uganda, after common beans. It is considered a women's crop, since it was originally grown by females to supplement family diets with protein. The groundnuts are consumed primarily roasted or as oil. This crop requires few inputs and increases soil fertility by fixing nitrogen, making it an appropriate choice in the low-input agricultural systems that are prevalent among many small-scale farmers. Many small farmers in Eastern Uganda grow groundnuts, both for consumption and export, but both yields and prices remain relatively low.

3. Project description

The VECO East African program in Uganda is being implemented in partnership with four District Farmer Associations (DFAs) in East Uganda in the districts of Tororo, Iganga, Busia and Kumi. The VECO-Uganda program strategy is to support organized family farmers (male and female members) to actively participate in and equitably benefit from sustainable agricultural market chains and related economic processes for the enhancement of sustainable income security (source: VECO Impact Assessment 2011-2013)

Collaboration with Cordaid started in 2000 when the first contract was signed. The project aims at the promotion and development of conducive agriculture, trade and trade related policies and programs at all levels that address the interests and needs of small scale farmers.

In the period under review 2011-2014, Cordaid has provided support to VECO through four different project fundings, one related to the development of Market Chains, one related to Access to Rural Finance and two related to lobbying and policy-influencing for trade-related issues:

1. *Programme for Sustainable Agriculture Market Chain Development in Eastern and Northern Uganda through the Promotion and Establishment of Strong and Viable District Farmers Associations and Farmer Driven Agri-Enterprises (project: 158/1380D).*

This was a 3-year programme to support VECO's economic strategic objective for five District Farmer Associations in East and Northern Uganda to build on the achievements and to address the challenges of the previous three year programme to improve access to markets and to appropriate agri-financing to ensure operationalisation of sustainable agricultural chains for small scale farmers.

Period: 2009-2011

Budget: ?

2. Improving small scale groundnut farmers' access to financial services (project: 108462)

Small scale groundnut farmers in eastern and northern Uganda are affected by low yields and low revenues. In order to professionalize their agricultural businesses, they need access to financial services. VECO-Uganda aims to provide these services in a sustainable manner to organized family farmers, male and female, in Busia, Tororo and Kumi Districts (source: Cordaid website).

The project period is 01-10-2012 to 31-12-2014

Total budget € 378,390

3. Lobby capacities of farmer organisations (project : 108461)

The main goal of this project is to increase capacities of farmer's organizations to lobby and influence policies in order to successfully influence public and private decision makers, to make decisions in their favor, using successful evidence with sustainable agricultural market chains. The project targets 7824 rural smallholder farmers in 7 districts of Eastern and Northern Uganda, of which 3680 are male and 4144 female (source: Cordaid website).

Project period 01-10-2012 to 30-09-2013

Total budget € 100,000

4. Strengthening the Lobby Capacities of Farmers (project : 110143)

The major objective of this project is to facilitate functioning market chain linkages, better access to finance for investment in agribusinesses, and advocating for policies and programs that are favorable to the needs of value chain actors especially the smallholder farmers of the members of 6 districts (in total 7100 beneficiaries).

Project period 01-10-2013 to 30-12-2014

Total budget € 265,952

Budget MFS-II A total of € 743,342 over a period of 27 months (Oct 2012-2014)

Civil Society Strengthening

VECO is implementing several projects using its partner affiliation strategy. At district, sub-county and parish levels VECO collaborates and targets 53 Rural Producer Organisations of 50 members or more (before 2012 in six districts in Eastern and Northern Uganda: Iganga, Kumi, Tororo, Busia for groundnuts and maize and in Bugiri, Pallisa for groundnuts; after 2012 only in the four districts in Eastern Region). In the four districts of Eastern Uganda of their actual intervention VECO targets a total of 3737 farmers (of which slightly more women).

With respect to the groundnut commodity chain networks, VECO-Uganda organises, mobilises and recruits members, provides funding and co-facilitates training workshops under the peanut, oil seed, groundnut seed and the Groundnut Trade Block. VECO-Uganda initiated the formation of the Eastern and Northern Uganda Natural Resources Platform and has recruited members and facilitated their training workshops and has initially funded its activities.

In line with VECO new global strategy, the VECO Uganda programme for the period 2014-2016 (Fresh Fruits and Vegetable and Rice Programme) will work on the one hand towards stimulating the development of staple food crops, sub-sector development and on the other towards the inclusion of

smallholders (m/f) in modern markets. VECO has decided to work in Kapchorwa, Mbale and Tororo districts for the Fresh Fruits and Vegetables chain, and in Butaleja district for the rice chain.

Policy influencing and Lobbying

The Cordaid support to VECO-Uganda is explicitly aiming at an improved advocacy and lobbying. Through its advocacy and lobbying activities, VECO-Uganda intends to support their partner organisations to influence local, national, regional as well as international policies on marketing and trade policies to address the needs and realities of member farmers, including the poor and vulnerable populations through sustainable agricultural market chains. Their main partners at National level are the Uganda Cooperative Alliance and the Uganda National Farmers Federation (UNFFE). At international level, VECO-East Africa is an active member of the East African Farmers Federation (EAFF) thus representing the interests of their Uganda program. At both national and East African level, VECO-Uganda provides funding for research and policy analysis, developing advocacy strategies and engaging with policy makers under the auspices of UNFFE and EAFF. It also facilitated studies on cross-border trade that informed EAFF on the areas of lobbying at the East African Community.

VECO is also playing an active role in the PELUM network of which it is a member. At the national level, VECO-Uganda shares information with members and engages in policy debates on agro-finance and seed. VECO-Uganda was, until 2008, the Chairperson of the Food Rights Alliance and supports the meetings of the network. In Agri Pro-Focus, VECO-Uganda coordinated the agro-finance thematic group until 2011 and also contributes resources.

VECO’s overall Impact Assessment is based on the following Parameters measuring changes in livelihood based on five main dimensions of impact analysis:

- i. Increased income
- ii. Increased degree of influence
 - Market access
 - Influence in policy change
 - Influence in trade relations
 - Access to services
- iii. Reduced vulnerability, increased resilience
 - Social integration
 - State of autonomy
 - Resilience to cope with trends and shocks
- iv. More sustainable use of natural resources
 - Sustainable agricultural practices
 - Resilience to climate change
- v. Improved food security

4. Data collection and analytical approach

The methodology applied during the baseline in 2012 and follow-up assessment in 2014 is a general one which is described in the methodological annex 1 (*note: still to be added*).

Key Outcomes selected for the contribution analysis

The key outcomes for the contribution analysis for all twelve CSOs under review during the endline in 2014 have been one related to Civil Society Strengthening and one related to advocacy and lobbying of policy makers.

In the case of VECO-Uganda, the first case which has been selected for the contribution analysis concerns

The second case study relates to VECO's contribution to the advocacy for the elimination of counterfeit agro-inputs in Eastern Uganda.

5. Results

5.1 Relative changes 2012-2014

The assessment of relative changes has been done against the indicators used in the baseline; the descriptive part for the endline is provided in detail in Annex . The scores of relative changes are given in the following table. The table further below presents a short description of the highlights on which the assessment of the Endline relative changes is based including the score given in the endline.

Criterion	1a	1b	2a	2b	2c	3a	3b	3c	4a	4b	4c	Total
Baseline	2	3	3	3	2	3	3	3	2	2	3	2,64
Endline	+1	=	=	=	=	=	+1	=	+1	+1	+1	+5

Score: **Baseline** 0-3
Endline =
 + 1 resp – 1
 + 2 resp – 2

0 lowest score and 3 highest
 no change;
 little change better resp worse;
 substantial change better resp worse

Short description of the highlights explaining the relative score of relative change 2012-2014

Evaluation Criterion	Explanation of score relative of relative change 2012-2014
I. Civic Engagement	Positive development: +1 overall
1a- social engagement	VECO has developed a gender and youth strategy outlining the interventions of women and youth. VECO has also appointed a gender coach who provides input in all VECO's interventions. This has led to a gender sensitive value chain approach.
1b- political engagement	No changes
II. Level of organisation	No overall relative change: 0 change
2a-organisational level	No major change; VECO has withdrawn from Northern Uganda
2b-dialogue and communication	There have been no major changes; the website has been improved
2c-financial and human	No major change; restructuring has taken place with staff turnover; financial dependency on three major donors has remained

resources	
III. Practice of values	Positive development: +2 overall
3a-internal governance	There is a new organisational structure but it is not yet clear whether there have been governance improvements
3b-transparency	The most relevant change is the provision of detailed information on the impact for farmers for specified value chains on a number of relevant indicators. This is unique to all organisations reviewed.
3c-internal management	No major change. New staff has been provided with the Human Resources Manual which includes a Code of Conduct.
IV. Perception of Impact	Very positive development : +3 overall
4a-Responsiveness	The design of the new programme for 2014-16 involved all stakeholders including farmers. VECO has changed the targeted districts and the value chains indicating that VECO is cautious of creating dependency relationships.
4b-social impact	Impact assessment 2011-2013 has indicated that on a number of relevant indicators there has been substantial progress
4c-policy impact	Capacity building for policy influencing has been successful to the extent that bye-laws on counterfeit products were passed by 8 districts, and access to agricultural finance enabled; proposals for aflatoxin standards for cross-border trade were formulated.

Annex 2 provides a more elaborate description of the relative changes in the period 2012-2014.

5.2 Contribution Analysis

Two cases are being presented to illustrate and analyze the contribution VECO has made to the achievement of their project goals. The first case study concerns the strengthening of the Farmer Organisations through the professionalization of agricultural value chain development in order to increase farmer income and food security (VECO impact dimensions 1 and 5) . The second case relates to the realization of more influence on policy-making processes (VECO impact dimension 2).

Case Study I: Strengthening of Farmers' Organisations (FOs) in Eastern Uganda

1. Case Background

The majority of Uganda's farmers are subsistence producers and, therefore, grow crops or keep farm animals but they consume almost everything they produce. They may be able to produce only tiny surpluses to sell in the local market. Other farmers are capable of producing surpluses but find it difficult to transport the produce to a market or a roadside stall. Most farmers produce small quantities for sale but find that the local trader is only prepared to pay low prices for their goods compared with the wholesale price. As individual farmers, they have little bargaining power with traders and must often accept almost any price offered. The only way small-scale farmers can compete with these large farms is to co-operate with each other to form an association or farmers' marketing group. If farmers are able to bulk their produce in order to sell their combined output and to take steps to make sure that it is of a standard quality, they might be able to market their produce at a higher price.

Where VECO previously provided funding to the District Farmers' Associations (DFAs) in the districts of Tororo, Iganga, Busia and Kumi for strengthening FOs and directly supported FOs in Bugiri and Pallisa Districts, this was changed to funding the Uganda Co-operatives Alliance (UCA) to train FOs.

The DFAs focussed on the task of lobbying and advocacy. The UCA was better positioned to provide training to the members of the FOs than the DFAs. VECO also provided technical support during the trainings and/or mentoring of farmers and carried out monitoring to support adoption of good practices. In addition, VECO program staff provided technical support to the integration of cross-cutting issues including gender, participation and natural resource management in the program. For example, they supported Savings and Credit Cooperative Societies (SACCO) management staff and their Boards in the development of loan products suitable for women and youth, as the existing products under offer were unattractive to this group of people. The VECO program strategy was to support organized family farmers to actively participate in and equitably benefit from the supported sustainable agricultural market chains and related economic processes for the enhancement of sustainable income security.

2. Theory of Change

The Theory of Change which has been applied by VECO can be summarized as follows:

	Results Chain	Assumptions
Final Outcomes	Farmer Cooperatives (Rural Producer Organizations-RPOs, Area Cooperative Enterprises-ACEs and Savings and Credit Cooperative Society - SACCOs) enhanced their internal structures for coherent and sustainable operations in their incremental institutional development process.	<ul style="list-style-type: none"> - Improvement in conducive policy and institutional environment - Government continues to support agriculture development as a major strategy for poverty reduction in rural areas . - Security prevails - Other complementary programmes continue to operate - Natural disasters managed.
Intermediate Outcomes	Farmer Cooperatives harnessed and strengthened their leadership competencies, bargaining power, mobilization of internal resources both human and financial, initiated and strengthened collaborations and linkages with key strategic chain actors, facilitators and supporters.	<ul style="list-style-type: none"> - No social cultural barriers to adoption of Post-Harvest Handling and other technologies - Acceptance of training and new technologies - Incentives for farmers and the public/private sector to invest in new technologies exist and/or are maintained. - Social and cultural barriers to technology adoption do not exist - Conducive social, economic , policy and institutional environment for effective operation of cooperatives.
Immediate Outcomes	High level of participation and membership in the short and long term savings initiatives providing a strong and solid base for the mobilization of SACCOs.	<ul style="list-style-type: none"> - Acceptance of Farming as a Business and commercial minded target groups.
Outputs	<ul style="list-style-type: none"> - Increased knowledge and skills on appropriate post-harvest handling, storage, processing techniques, and value addition - Increased access to post harvest handling, storage and agro processing technologies/equipment - Increased knowledge and skills in savings & credit schemes, agribusiness management - Increase in the number of farmers participating in collective marketing initiatives - Increase farmer access to Knowledge and information on marketing through developing market information services (MIS) at DFA level 	<ul style="list-style-type: none"> - Trade and market conditions do not compromise gains. - Appropriate National Market Information Systems available - Appropriate policy and institutional environment , terms and conditions for farmer access to Agri-finance - Stable political, social and economic environments - Farmers willingness to organize themselves in farmer organisations and cooperatives.

3. Results and Effectiveness

Given the need for smallholder farmers to bulk, ensure quality standard and collectively market their produce, VECO supported the formation of a total of 11 FOs in 6 districts in Eastern Uganda. The FOs that were formed with the support of the District Farmers’ Associations (DFAs), were constituted into cooperatives and subsequently became member of the Uganda Cooperative Alliance (UCA). Rural Producer Organisations (RPOs) made of farmer groups formed an Area Cooperative Enterprise (ACE) at sub-county level with a focus on marketing and input supply. Members of an ACE formed a SACCO (Savings and Credit Cooperative Society) to be able to access finance. At the village level, farmer groups formed Village Savings and Lending Associations (VSLAs) which are linked to the SACCOs and to the formal banking sector through the Centenary Bank. With approximately 90% of the rural households in the Eastern Region deriving their livelihood from agriculture, the support to FOs from VECO was critical as it is addressing a sector which is the main source of livelihood for the majority of the population in the region.

With the support of VECO, UCA was able to build the capacity of the technical staff, business managers and extension workers at the ACE level, and managers and cashiers at the SACCO level. UCA supported confidence building among members which was critical given the challenges cooperatives have experienced in the past. With support from VECO, the South Eastern Private Sector Promotion Enterprises Ltd (SEPSPEL) and UCA built the capacity of the VSLAs and SACCOs in group formation and leadership, business management, record keeping and marketing including bulking. As a result, the members of the ACEs have been able to increase the income from their farming activities while the formation of VSLAs and SACCOs has enabled them to access loans which was not happening before their formation. VECO claims that the yearly gross income derived from the groundnuts and maize chains increased from USD 185 in 2010 to USD 641 in 2013 (source: VECO website). A total of 3,846 (1,461 men and 2,385 women) smallholder farmers gained knowledge and skills on VSLAs while 8 SACCOs for long-term savings and credit were formed. As a result, 1,409 farmers received credit of UShs 100,899,750 for purchasing inputs such as tarpaulins, gunny bags, improved seed, hoes and for bulking of their produce especially groundnuts and maize.

“Through bulking and quality assurance, the ACEs are able to increase farmers’ incomes. The ACEs were able to increase the price of their maize, groundnuts and sorghum from Ush 200/250 to between Ush 500 and 800”.
Namungalwe ACE members

Through the support provided by VECO, both ACE and SACCO members and partner staff gained knowledge and skills in enhancing organisational management capacity including financial management. They were able to develop business plans that guided their operations while their Boards were trained, backstopped and technically supported to understand, appreciate and play critical roles to manage, lead and support their financial and cooperative institutions. The capacity building enabled the VSLAs to manage records and formulate and abide by the organisations’ Bye-laws which are critical for safe-guarding members’ savings. The technical backstopping which was

“Before we were supported by VECO, we were having one meal a day during the months of April to June but we now have three meals a day throughout the year with farmers from other sub-counties in the district buying cassava from us from April to June. The District Agricultural Office is also buying cassava stems and groundnut seed from us for the NAADS programme”.
Nankoma ACE members

provided by UCA and SEPSEL enabled the ACEs and SACCOs to refine their strategies and develop action plans with specific objectives, targets, activities and monitoring indicators which guided their activities. Through reflection, review meetings, partners’ fora and multi-stakeholder platforms, partners reviewed their strategies and shared knowledge, experiences and information on a quarterly, bi-annual and annually at sub-county, district and regional levels. As a result, 50% of the SACCOs are self-sustaining and are able to rent offices and are paying better salaries to their staff than what VECO was paying them. Box 1 below gives the areas in which the VECO partner FOs had their capacity built in organizational management and marketing.

Through the VSLAs, farmers are able to access credit at an interest of 8-10% compared to 21% from formal financial institutions which has enabled them to increase their incomes.

Box 1: Capacity building for the FOs in Organisational management and marketing

- Forming SACCOs which has enabled the FOs to access credit for agriculture activities and for other income generating activities such as shops
- Group formation and leadership, business management and record keeping which has enabled the VSLAs and SACCOs to give credit to their members
- Financial management, administration and human resource management for SACCOs which has led to 50% of the SACCOs that were formed being self-sustaining
- Business management, costing and record keeping which has led to members not selling their produce at not less than the cost of production
- Postharvest handling, bulking and value addition as well as use of moisture-meters which has led to good quality products and increased incomes therefore
- Training of the ACE staff in marketing and market access
- Technical assistance by UCA for setting up systems for leadership, governance including conducting Annual General Meetings; group and records management for the FOs; formation of SACCOs, marketing, enterprise selection, establishment of partnerships for access to credit as well as establishing bulking and marketing, financial and asset management policies.

Through exposure to the Uganda Industrial Research Institute, the members of Nankoma ACE were trained in food processing and are processing fruits and also making tomato sauce which they are selling at local markets level while those of Kameke ACE are also processing cassava chips and flour for sale to those baking bread, cooking and to the national brewery while some members are baking bread, biscuits, doughnuts and scones for income generation. They are also making peanut butter which is free of aflatoxins. Those who were trained in the making of energy saving cook stoves are

“Before we were trained on soil fertility management technologies, we were wasting cow dung. We are now using it to make compost manure. As a result, we are getting very big banana bunches and are going to start selling bananas next year”.
Nankoma ACE members

generating income by making stoves for members of the community and training people from other districts. In addition, the VECO capacity building interventions are having a multiplier effect as the VECO partner FOs are building the capacity of other farmers who were not supported by VECO. During the Focus Group Discussions, the members of the Nankoma ACE confirmed that they are supporting and mentoring many farmers who did not get the opportunity to work with VECO as many come to visit them and learn from their experiences.

Box 2 below gives the benefits Kameke ACE members received from the VECO support.

Box 2: The benefits that KAMEKE ACE members have received from the support provided by VECO

The members of Kameke ACE have been able to increase their household incomes and are also food secure as a result of the support they received from VECO.

In order to increase crop production, VECO provided 'walking' tractors and oxen and ox ploughs to the FOs. Kameke ACE which is composed of 15 groups received 15 animal traction kits but later received an additional 15. The ACE also received improved maize and groundnut seed and cassava stems. The initial cassava stems were for food security as they were resistant to cassava mosaic but has now been multiplied for income generation. For the poorest of the poor to be able to participate in income generating activities, they were given dairy goats for improving their nutrition and farm tools such as hoes and bicycles while the rest of the ACE members received goats for cross breeding and for sale while the soil testing kits and the training in soil testing they were given and how to plant groundnuts (in rows) have led to increased crop yields.

Kameke ACE contributed local materials worth Ush 12,500,000 for the construction of the Collection Centre for bulking their produce. The group also received 2 motorcycles for the extension worker and the manager. Other support included a computer, a maize grading machine, a groundnut-sheller, a weighing scale and a moisture-meter for measuring the moisture content in maize and groundnuts. As a result of this support, Kameke ACE was able to improve the quality of their maize and sell it at a higher price than they were doing before. In addition to the high quality cassava planting materials, the group was given a cassava chipper for making cassava chips for sale.

Two households were also supported to set up a tree nursery in a green house in which they raise tree seedlings for sale. They were also supported with 2 water tanks for the tree nursery and are selling seedlings to other farmers and to development programmes including NAADS. As a result of the support received, the members of Kameke ACE confirmed that they are now able to pay school fees for their children which was not possible before they were supported by VECO. They have also been able to construct better houses.

Due to their low levels of savings and being located far away from financial institutions, many women and men are actively involved in the VSLAs. The VSLAs initiated with support from VECO attracted a large proportion of women in the RPOs. Out of the 3,846 mobilised members participating in the 92 mobilised VSLAs, 2,385 are women. VSLAs and SACCOs therefore provide an excellent avenue of increasing access to rural financial services. FGDs with members of the ACEs confirmed that the Tripartite Model supported by VECO with the RPO focusing on production, the ACE on marketing and the SACCO on access to finance, has enabled them to increase their food and income security.

The FOs have also been supported by their respective District Local Governments. For example, the District Commercial Officers (DCOs) in the programme area played an oversight function to protect members' savings with the VSLAs and SACCOs which are registered at the sub-county and district levels and have well documented security of the members' savings. These DCOs continue to technically support, mentor, backstop, supervise and monitor these farmer institutions in their respective districts. However, with limited funding, SACCOs cannot satisfy the loan requirements of their members.

Despite a MoU signed to pilot agriculture credit guarantee scheme for facilitating young ACEs to access credit from Centenary Rural Development Bank, access to loans from the formal financial institutions for smallholder farmers still remains a challenge as they require collateral, charge high interest rates and have limited financial products that respond to farmers' needs and preferences. Because farmers are not willing to give their land as collateral for fear of becoming landless if they are not able to re-pay the loans, they are not able to access loans from the formal financial institutions. As a result, very few farmers are able to access loans from the formal financial institutions. On the other hand, the ACEs are not able to get loans as the agreement they signed with VECO does not allow them to use their assets as collateral. However, as is indicated in Box 3, Centenary Rural Development Bank, recently adapted its operations and products to agricultural lending by tailoring their procedures and products to seasonal agricultural needs thus making it possible for farmers to access loans from Centenary Bank.

Box 3: Credit access from Centenary Rural Development Bank

Centenary Bank has a loan facility for agricultural production, marketing and purchase of agricultural equipment such as oxen ploughs and tractors at an interest rate of 22% per annum. Farmers can access loans by giving land titles or sale agreements to the Bank. The loan recipients are given a grace period in accordance with the agriculture enterprise they set up. The Bank has sensitized FOs through various forums including meetings and radio programmes on its loan facilities. Farmer groups can access loans if they register with the Community Development Office or if one of their members are willing to give their land title as collateral. A few individual farmers have been able to access loans from Centenary Bank using sale agreements.

4. Contribution Analysis

The following elements have proven to have positively contributed to the successful strengthening of Farmers Organisations in the targeted districts.

Linking to external organisations

VECO has promoted to link the supported Farmer Organisations to a wide number of external organisations. This multi-stakeholder approach has regularly brought together farmer leaders with facilitators such as UCA . as well as the networking with DLGs and production sectors increased the appreciation of the critical role of FOs in agricultural production, financing and collective marketing. During the Farmer Group Discussions, farmers confirmed that they were linked to various partners including cooperatives, academic, research and training institutions, NGOs, FOs and government agencies. In one way or another these different stakeholders have been able to contribute to enhanced capacities of Farmer Organisations to become viable business enterprises. As a result, they were not only able to manage their farming activities in a more profitable way since they are bulking their produce, but are also able to manage the physical environment in a sustainable way and thus improve their crop yields. The various partnerships (14 different ones) have been established by the FOs and various benefits from these partnerships have been identified (See also Box 4).

Support for increasing agricultural production and productivity

Besides the external linkages, the ACE members also had their capacity built in agronomic practices and were also given planting materials and implements such as oxen and ox ploughs in order to have adequate products for bulking. As a result, 83% of the FO members are food secure and are, therefore able to focus on income generating activities. During the FGDs with the members of the ACEs, they confirmed that the support from VECO has enabled them to improve their livelihoods as they are now food secure. The training in soil fertility management has enabled the members of the

ACEs have been able to improve their crop yields while the training in tree nursery establishment and management has enabled them to plant trees including improved mangoes and oranges for income generation. For the poorest of the poor, the dairy goats they received have enabled them to improve their nutrition status while the 50 goats received by the ACE members have enabled them to improve the goat breeds for income generation. Box 5 below gives the areas in which the members of the ACEs had their capacity built for increasing agricultural production and productivity and improving livelihood skills.

Sensitization in gender issues

Sensitization of gender issues has enabled men and women to work together to address their various household needs including paying fees for their children who are no longer being sent away from school due to lack of school fees. They are also able to provide food to the schools enabling their children to have lunch at school while women are also able to take up leadership positions in the FOs and to handle conflicts. It was further reported that women members of the ACEs are actively engaged in income generating activities which was not the case before the VECO supported interventions as they were mainly involved in food security activities. Women are role models as they are able to provide guidance to their fellow women, they are more confident and are proud to be farmers which was not the case before they were supported by VECO.

Capacity strengthening on essential issues: marketing and savings & credit

VECO's support for strengthening FOs has enabled farmers to improve their livelihoods through improved marketing and through improved access to rural finance. As was realized most farmers and the ACEs were not able to access loans from formal financial institutions for the expansion of their agricultural activities due to lack of collateral. The mobilization of savings from members for expansion of the ACE's activities is, therefore, critical. Due to the careful selection and commitment of the various leaders of the FOs, 50% of the SACCOs are able to sustain their operations. A big percentage of VSLAs too are also able to give loans to their members.

The capacity of Farmer Organisations to market the products of their members has been another essential element of VECO's approach. The ACEs have successfully bulked and marketed their produce: for example, Namungalwe ACE has sold maize, groundnuts and sorghum to traders in Iganga and to exporters to Kenya and South Sudan. However, marketing remains a challenge for the ACEs as the support for marketing by UCA was too short to ensure the sustainability of the marketing interventions.

Observations on the case study

It is remarkable that the Theory of Change which has been identified for this significant outcome does not fully reflect all the significant contributions to the achievement of the final results. For instance the attention to gender issues has not been included in the theory of change whereas VECO claims that gender issues are key to their programming and monitoring of results. Also the important contribution of the support to agricultural production and productivity has not been included in the theory of change. This indicates that the prior theorizing of the how to realize the changes does not always reflect the actual implementation of the activities.

Moreover, while the capacity building support to the FOs has enabled them to improve their food and income security, the FOs have not been able to engage effectively with policy makers such as District Local Governments. For instance the effective utilization of NAADS resources would have ensured the expansion and sustainability of their interventions which are, at the moment, on a very limited scale as they are covering only one or two sub-counties per district.

VECO did not include one of their impact dimensions in the design of the project outcome, which is the sustainable use of natural resources. In the Eastern part of Uganda it is clear that soil fertility management is critical as land fertility is declining. Support for oxen and ox ploughs by VECO has enabled farmers to cultivate about 5 acres but at the other hand also contributes to a further decline of soil fertility. Water for production too needs to be taken into account as a climate change adaptation strategy. The ACEs need more capacity building and technical assistance in these matters to be able to address the challenges that they are currently experiencing. If not VECO’s intention to contribute to sustainability remains an empty shell.

Case Study II: Elimination of counterfeit agro-inputs in Eastern Uganda

1. Case Background

According to the Ministry of Agriculture, Animal Industry and Fisheries, 15% of the agro-inputs on the market are not genuine. With regard to agro-chemicals the situation is even worse. It is estimated that over 50% of the agro-chemicals on the market are fake. However, in the absence of a law on counterfeit inputs it is difficult to prosecute offenders. The process of developing Bye-laws is lengthy since the Bill has to be submitted to the relevant government ministry and to the Attorney General before it can become a Bye-law. In addition, the policy-makers need to be constantly reminded about the advocacy issues otherwise it will be shelved and forgotten about.

With support from VECO, the Uganda National Farmers’ Federation (UNFFE) and six of her member District Farmers’ Associations (DFAs) in Eastern Uganda, namely, Iganga, Bugiri, Busia, Tororo, Kumi and Pallisa have engaged the District Local Governments (DLGs) in their respective districts to come up with Ordinances and By-Laws against Counterfeit/fake agro-inputs. The Ordinances were aimed at putting in place mechanisms for ensuring surveillance and monitoring of agro-inputs dealers/stockists and strict penalties for the offenders as well as creating a multi-stakeholder platform for information sharing. Although the supply of counterfeit agro-inputs is a country wide challenge, in the case of the support by VECO, the design of the project limited the geographical coverage to only the six districts in Eastern Uganda and, therefore, the participation of farmers and other stakeholders in the advocacy campaign. However, use of media, press releases, policy briefs and internet greatly contributed to reaching the indirect beneficiaries.

2. Theory of Change

The Elimination of counterfeit agro-inputs lobbying intended to realize the following final, intermediate and immediate outcomes. It did so by realizing a good number of outputs.

Results Chain

Final Outcomes (impacts)	<ul style="list-style-type: none"> - Increased access to information and participation of farmers in District based multi-stakeholder platforms thus contributing information on strategies to enhance sustainable food security - Uganda National Agro-Input Dealers Association (UNADA) registered all agro-input dealers thus improving farmers’ access to quality agro-inputs
Intermediate Outcomes	<ul style="list-style-type: none"> - Farmer empowerment through meetings, radio talks and agricultural shows to provide information and evidence and get feedback on policy processes - Farmers became sensitive on the sources of specific agro-input products - Farmers demanding DLG staff to provide technical support in form of guidance on procedure and enforcement of by-laws - Lists of traders dealing in genuine and certified agro-inputs posted in public places including sub-county headquarters and health units - Majority of farmers no longer buy agro-inputs from any company other than those recommended by UNADA and also demand for receipts - In Tororo and Busia District, the farmer associations opened agro-input shops to enable them access accessing genuine agro-inputs

	<ul style="list-style-type: none"> - Advocacy coalition on fake agro-inputs between UNFFE, DFAs, NARO, Ministry of Agriculture, Animal Industries and Fisheries and UNADA. Alliances were also strengthened at district level with various seed companies including the East African Seeds Company (EASC), Naseco, Victoria and Mt Elgon and with chemical companies such as Bukoola and Bolton META and with the Oil Seed Sector Platform - Through their newly formed Savings and Credit Cooperatives Organisations (SACCOs), farmers started bulking purchase of seeds from recommended seed companies while the seed companies started giving inputs on credit and establishing demonstrations.
	<ul style="list-style-type: none"> - Farmers engaged with DLGs demanding for a more effective regulation and monitoring of quality of inputs through UNADA - UNADA coordinated, mobilized and trained input stockists operating in the districts - In Iganga district, the district Business licensing policy was reviewed from direct issuance of trading licenses to input suppliers to registration and issue of operational permits. - Collaboration was initiated with EASC to supply farmers with inputs at subsidized costs.
Immediate Outcomes	<ul style="list-style-type: none"> - Awareness among key stakeholders on challenge of fake agro-inputs - Availability of a tool regulating sale, use, supply and distribution of agro-inputs - Concrete evidence on counterfeit agro-inputs in the market and their negative effects on farming - The Phyto-sanitary department of the Ministry of Agriculture provided the ministry's position on regulating counterfeit products entering into the country - Public Private Partnership: Research and government institutions, seed companies and farmers worked together closely to fight counterfeits on the market - Farmers and VECO staff engaged with different stakeholders from 10 countries in Eastern Africa to explore future collaboration on access to quality inputs.
Outputs realized	<ul style="list-style-type: none"> - Position papers and policy briefs on fake agro inputs and counterfeits were drafted and presented to key stakeholders - Radio talk shows on local stations and articles in print media on agro inputs availability - Ordinances on fake and counterfeit agro-inputs - Database of input dealers in the 6 districts - A total of 46,560 (31,040 men, 15,520 women) were reached by the advocacy campaign on counterfeits.

3. Results and Effectiveness

During the discussions with the representatives of the DFAs and those of the ACEs, they confirmed that there was indeed a challenge for farmers to access quality agricultural inputs with some of the seed being adulterated and either not germinating or germinating but having no yields leading to farmers making losses. This included seed supplied by the Government of Uganda's National Agricultural Advisory Services (NAADS) programme with seed suppliers getting maize seed, coloring it and supplying it to NAADS.

With the seed companies producing genuine seed not able to meet the market demands and some suppliers using the packages of the seed companies to supply fake seed, there was need for intensive sensitization of farmers on how to identify genuine seed and also deal directly with the seed

“The district has a budget to inspect agricultural inputs and carries out spot checks on agro-input shops. However, the advocacy work supported by VECO made the interventions more focused”.

District Agricultural Officer, Bugiri District

companies. In addition, most agro-input suppliers were not registered with UNADA, which has the mandate to register and certify input dealers. For example, In Iganga District, 80% of the input dealers were not registered with UNADA while in Bugiri District, out of 38 input dealers, only one was registered and certified by UNADA while 2 were registered but not certified. The interventions supported by VECO helped to focus attention on the challenges related to agro-input access. However, it was noted that since there is only a policy by the Ministry of Agriculture and no law relating to counterfeit agro-inputs or a By-law, the district is not able to prosecute those found selling counterfeit agro-inputs.

After the capacity building in advocacy that was supported by VECO, the DFAs developed an advocacy strategy to guide the advocacy process and also came up with Position Papers and a video highlighting the challenge of counterfeit agro-inputs and engaged with key stakeholders on input supply. The idea was to come up with a By-law on counterfeit/fake agro-inputs. The advocacy initiative brought together farmers, input dealers, seed companies, DLGs and the agriculture department so as to come up with by-laws and commitment on the implementation of the By-laws.

To enable farmers to buy genuine agro-inputs, with support from VECO, the DFAs sensitized farmers and also provided them technical assistance to enable them to identify genuine inputs and also be able to handle seed and other agro-inputs in the right way since most input dealers did not have the capacity to advise farmers on how to handle agro-inputs. In addition to sensitization by the DFAs, the farmer groups were linked to research institutions for cassava and groundnut seed multiplication with VECO facilitating the linkages for the procurement of the foundation seed and providing financial support for the technical backstopping and for engagement with the policy makers.

The process of developing draft Bills involved the input of all stakeholders including the Seed Companies, farmers, policy makers most of whom are farmers and the District Production Departments before they were presented to the Council. Advocacy committees were formed at parish and sub-county levels. A District Supervisory Committee composed of input dealers and farmer representatives was tasked to review issues that needed clarification before the District Councils could pass the Bill.

Although the Bills that were passed by the 5 DLGs (excluding Tororo which is yet to be passed by the DLG) are yet to become By-Laws and cannot therefore be enforced as they are yet to be submitted to the Ministry of Local Government and to the Attorney to be published in the Gazette, the levels of counterfeit inputs has been greatly reduced due to the sensitization of the farmers which has been done by the DFAs with support from VECO while the availability of free seed by the East African Seed Company (EASC) for demonstration sites has led to farmers being aware of where to get genuine seed. In addition, the agro-input shops set up in Busia and Tororo by the DFAs in collaboration with the District Advisory Committees, which are now profitable ventures, farmers are able to have bulk purchases and are trained on the proper use of seed and other farm inputs such as herbicides. Kameke ACE is also in the process of setting up an input shop so as to ensure that the members get genuine seed. In addition, in Bugiri, VECO has been supporting a quarterly radio programme on Eastern Voice and is now doing so only twice a year.

Through the trainings supported by VECO, farmer leaders realized the need for a shop that would be a source of genuine seed and other inputs so as to outcompete the counterfeits. As a result, Tororo District Farmers' Association set up an input shop which is now a profitable venture". Mr Moses Obenen, Coordinator, Tororo District Farmers' Association.

4. Contribution Analysis

Capacity building

In order to enable the different partners involved in the advocacy campaign to effectively engage with policy makers, they were trained in policy research and advocacy. The capacity building workshops in Policy Research Analysis and Advocacy enhanced effective stakeholder analysis, identification of targets and presentation of messages to the target groups. Monitoring, coaching, mentoring and technical backstopping were provided to the partners and DFA staff in refining their advocacy strategies and developing action plans. In addition, capacity was built in participatory research and learning and networking with DLGs. However, with the low literacy level of the farmer group leaders and lack of knowledge of their rights, some farmers are scared of engaging their leaders on advocacy matters, for fear of victimization. This was confirmed by the Namugalwe ACE leadership as one of their leaders gave up engagement with district leaders on accountability for fear of being victimized.

Partnerships for coordination and information sharing

A good working relationship between DFAs, UNFFE, UCA and other NGOs in the agricultural sector ensured effective coordination of the advocacy interventions. Through the partnership/alliances that were formed, information was shared between the UNFFE Secretariat, DFAs and farmers groups. In addition, joint planning and review meetings were held quarterly thus providing communication spaces/fora through which information was shared. Farmers' participation in the advocacy intervention led to their increased commitment to contribute evidence based information and reporting through their structures which led to their understanding their role in shaping the policy environment. At the district level, there was collaboration with the DLG leaders and increased commitment by advocacy committee members to play their roles which led to persistence in advocacy efforts. The initiation of district Multi Stakeholder Innovation Platform (MSIP) was an avenue for stakeholders to generate innovations (ideas), evaluate them and prioritize the ideas for implementation.

However, it has also proven difficult to harmonize the work plans with the various partners which necessitated conducting quarterly advocacy coalition planning meetings. There was also political will at the district level to support the programme following the selection of key influential allies to join the advocacy campaign which led to the success as the policy-makers recognized the force behind this campaign in terms of the institutions involved and as such they could hardly challenge the motive of the campaign despite the fact that some of them own input supply businesses.

Awareness creation

The members of the ACEs that were interviewed for this evaluation confirmed that before they worked with VECO, they often bought seed which would not germinate and didn't know whom to consult but after their involvement in advocacy on counterfeit products, they buy their seed from seed companies which sell them good seed. In Bugiri District, the Station Manager for the Eastern Voice Radio Station confirmed that given the cost of the radio programmes (Ush 750,000 per hour), it was difficult for VECO to support regular talk shows and spot messages after news. However, through the few radio programmes, farmers became aware of the challenges relating to counterfeit agro-inputs and have an idea where to buy genuine inputs which was not the case before. It was also reported that the existence of Ordinances have led to input dealers supplying genuine inputs as out ignorance, most of them consider Ordinances as legally binding.

Because of the high illiteracy levels, farmers are not able to easily distinguish fake from genuine seed. However, due to poverty, some Farmers are attempted to buy fake seed because it is cheaper than genuine seed. However, following intensive training and the involvement of the agriculture

department, farmers are now aware of the genuine input suppliers and, through their SACCOs, they purchase seed in bulk and also usually get the agriculture department to inspect the seed before purchase.

Putting on the agenda

The awareness created in the various districts has played a very important role in helping farmers to avoid suppliers of counterfeit products and to insist on being issued receipts for the agro-inputs purchased which was not the case before their involvement in advocacy on agro-inputs. Farmers' testimonies in the media helped to popularize the campaign agenda while the various alliances with various farmer organisations played a key role in getting the local leaders to recognize the force behind the campaign. It is therefore critical to have those that are directly affected by a certain issue advocate for laws protecting them from exploitation. It is also important to create allies to participate in an advocacy campaign.

The capacity building done for the Advocacy Committees at Parish, Sub-County and district levels on lobbying and advocacy was critical as it enabled them to identify other advocacy issues while the involvement of the farmer groups led to their participation in various DLGs initiatives including budgeting conferences which ensure that the issues affecting their livelihoods are taken into account in the DLG planning and budgeting processes therefore.

Observations on the case study

Though a critical initiative in ensuring household food and income security, the VECO programme on counterfeit inputs ended in September 2013 and, since then, the DFAs are making efforts to mobilise resources and continue to support the process to its conclusion but have not succeeded in doing so. There is, therefore, need for VECO to continue their support and to come up with a follow-up initiative so as to have finally legally binding frameworks on the sale of counterfeit agro-inputs. The fact that some farmers fear victimization and are therefore not able to engage in advocacy campaigns calls for mass sensitization on their rights.

5.3 Relevance of Results

The relevance of results have been assessed by VECO through their impact assessment exercise over the period 2010-2013. The results of this assessment refer to three different dimensions: Gross income (2 indicators), Livelihood (10 indicators) and Business Capacities (5 indicators). The following table provides an overview of the impact assessment for the Groundnut and Maize Value chains over the period 2010-2013.

The most significant changes have been recorded in terms of Gross Income and Gross Margins (under Income) as well as Access to Services and Resilience to Shocks (under Livelihood) and Group Management, Marketing and Networking skills. These significant changes confirm the findings of the relative changes 2012-2014 (see 5.1 and Annex 2) as well as the analysis of the contribution by the VECO projects to these changes as illustrated in the two presented case studies.

In the first place Capacity building has contributed to the linking of Farmer Organisations to external stakeholder of relevance to the Marketing of agricultural products and access to Rural Finance. Besides VECO has contributed to improved management skills for the leaders of the Rural Producer Organisations. Secondly, the approach promoted by VECO to collectively market groundnuts and maize by the bulking of produce in order to realize a better price of their sales. However, the claim by VECO that Resilience to Shocks (Economic, Health, Climate) has improved has not been substantiated by the findings of this study.

The Box on the next page presents the main results of the VECO impact assessment 2010-2013.

VECO impact assessment for Groundnut and Maize value chains 2010-2013¹

Yearly gross income derived from the chain

From Maize and Groundnuts production

Gross income increase from USD 185 in 2010 to USD to USD 641 in 2013 (+246%)

Simplified Gross Margin²

From Maize and Groundnuts production

Gross margin increase from 42,5% in 2010 to 72% in 2013 (+69%)

Livelihood (score 0-3)

Access to service Score +2

Resilience to shocks +2

7 indicators +1

Social integration =

Business capacities of farmer organizations

Group Management skills: From Low in 2010 to Middle in 2013

Business Management skills: No change from 2010 to 2013: remained Low

Marketing skills: From Low in 2010 to Middle in 2013

Sustainable natural resources management skills: No change from 2010 to 2013: remained Low

Networking skills From Low in 2010 to Middle in 2013

¹ Source: www.veco-ngo.org/ impact. VECO

² Same; Gross Margin being defined as “the margin a producer retains after deducing costs from its revenues”

6. Discussion

- **Design**

Overall the design of the projects is somewhat confusing. The relationship between VECO-Uganda already dates from the year 2000 and has gone through several funding periods. The goals of the projects relate to three different but very much related areas: Capacity Strengthening of Farmer Organisations, Access to Rural Finance and Lobbying and Policy Influencing. In one way or another Cordaid has decided to fund these related activities through different contracts for shorter or longer periods of time. On the one hand this makes it very complicated to assess the outcomes of each of the projects as they are very much linked to each other; on the other hand it creates a complicated situation for VECO to be able to analyze what has worked to realize their objectives. For instance, the question what has most contributed to the income increase of farmers cannot be answered as all is linked to each other. VECO has got around this attribution question by applying one standard impact assessment methodology for all of its projects.

Also the time limitation of project intervention is putting a negative shade on the sustainability of some of the project results. VECO in its new programme 2014-16 has chosen to opt for new districts and new commodities being supported. But in none of the projects there has been mention of any exit strategy of the farmer organisations that have been supported in the preceding periods.

Despite the fact that VECO has developed a gender and youth strategy and claims to have a gender sensitive value chain approach monitored by a gender coach, the assessment of outcomes and impacts have not made any relevant reference to gender and youth. Also the VECO solicited Impact Assessment study 2011-2013 does not make a substantiated observation on gender or generation based results.

It is questionable why Cordaid after so many years of support and collaboration has not made the decision to provide core-funding to VECO for their work in Uganda. VECO has illustrated that it has been able to secure a constant funding over a longer period of time from three different donors. Core fundign would have reflected more confidence in the work of VECO and have substantially reduced their reporting and accountability requirements.

- **Future funding**

Overall the different projects have been able to realize impact on the lifes of the targeted farmer households. It is therefore recommended to continue the funding of VECO's work in Eastern Uganda. However, this funding should be made conditional to the type of funding arrangement (core funding based on an agreed programmatic approach) and a clear exit strategy for organisations which have been supported over a period of time.

- **Changes in project design**

See previous comments.

- **Impact evaluation**

A major improvement would have been if VECO (or Cordaid) would have made it open to the evaluation team that they intended to implement an impact assessment on the basis of the five dimensions as defined by VECO. This would have been a great opportunity to merge and synchronize the approach and/ or include these indicators in the MFS II assessment. The focus of the MFS II assessment could have been better aligned with the own organisation's internal approach to impact evaluation.

7. Conclusion

Changes in Civil Society Strengthening 2012-2014 for VECO-Uganda

The main relative change based on the Civil Society Strengthening dimensions are related to the dimension 4 (Perception of Impact). To a lesser extent VECO-Uganda has also improved on dimension 1 (Civic Engagement) and 3 (Practice of Values) but this was only based on one indicator (criterion 1a resp 3b). VECO has made a substantial improvement by developing a gender and youth strategy and – in particular – by introducing a gender coach which in theory could put gender (and generation) issues better on the agenda of VECO's work with Rural Producer Organisations. But in terms of political engagement there has not been a major change. The work they have been doing in 2012 has not been extended to other lobbying or policy influencing trajectories. This is remarkable as two consecutive project fundings (108461 and 110143) relate to the strengthening of lobbying capacities. VECO has also developed a clear strategy to assess the impact of its projects and present this on their website (criterion 3b Transparency). This is very unique compared to other MFS II organisations active in Uganda. However, it has been difficult to substantiate the origin of these assessments: the Uganda Impact Assessment report 2011-13 does not provide the information as presented on the web.

With regard to the second CSS dimension (Level of Organisation) it is obvious that VECO has paid relatively little attention to the further development of its networks in which it is operating. Also the internal organisation (criterion 2c) has received less attention despite the fact that VECO has made major changes by its move of the Regional office from Kampala to Arusha.

As indicated the most relevant changes have been observed with respect to the Perception of Impact. On all indicators there has been progress: VECO has shown that it is responsive to the needs of their target group in particular to address the issues of marketing and access to rural finance. The two case studies have provided evidence that VECO has contributed to the achievement of improved income, organisation and skills as well as been able to lobby for policy influencing at district level.

Attribution of changes to VECO

VECO has played an important facilitating role to address support to the strengthening of Rural Producers Organisations. As the two case studies and the impact assessment illustrate VECO has done so through important and relevant strategies of capacity building, awareness raising, partnerships with relevant stakeholders and information sharing. In this sense VECO has proven to be an effective and result-oriented development organisation.

One important observation is that the sustainability of the realized results at outcome level is not secured. This is mainly due to the lack of an appropriate time-frame to assure continuity in the developed skills and competencies. Secondly, despite the fact that the new VECO programme 2014-16 calls for the development of an exit strategy for its partners, the absence of an operationalization of such an exit strategy with concrete steps makes this strategy so far a nominal one (similar to the gender approach as indicated above). Also the Impact Assessment study 2011-13 does not mention any exit strategy applied.

Relevance of the changes

The relevance of the changes have been analyzed and presented in 5.3

Explaining factors to identified changes

VECO has been able to play an important role in their support role to the strengthening of Farmer Organisations on the basis of their wide experience of developing agricultural commodity value

chains in a wide range of countries as well as their on the ground experience in Eastern Uganda. The combination of these two elements have materialized into a clear and straightforward approach.

Assessment of project design

Statements	Scores
The project was well designed	6
The project was implemented as designed	9
The project reached all its objectives	8
The observed results are attributable to the project interventions	8
The observed results are relevant to the project beneficiaries	9

Scale of Scores: 'Not at all' (1) - 'Completely' (10)

Note: The assessment has been done on the basis of the four Cordaid funded VECO projects in total.

Annexes

Annex 1. List of people interviewed

1. Mr John Ereng Atyang, Country Contact Person/Programme Officer, Sub-Sector Development (SSD)
2. Mr Cephas Otebba Okodo, Bugiri District Farmers' Association
3. Mr John Mpaata, Project Manager, Iganga District Farmers' Association
4. Mr Moses Obenen, Coordinator, Tororo District Farmers' Association (TODIFA)
5. Mr Nimmy Mugabe, Acting District Agricultural officer, Bugiri District
6. Mr Jude Mugagga Wannume, Station Manager, Eastern Voice, Bugiri
7. Ms Christine Harriet Ingurat, District Commercial Officer (DCO), Pallisa District
8. Dr Patrick Muhofa, District Production Officer, Pallisa District
9. Mr Stephen Wafula, Advocacy Officer, Busia District Farmers Association
10. Mr Johnson Ayebazibwe, Credit Administrator, Centenary Rural Development Bank, Bugiri Branch
11. Mr Michael Kibwika, Chairman, Production, Marketing and Natural Resources Committee, Iganga District
12. Mr Richard Ssempijja, Institutional Development Officer, Uganda Cooperative Alliance, Jinja Branch.
13. Mr Stephen Wafula, Advocacy Officer, Busia District Farmers Association

FOCUS GROUP DISCUSSIONS

1. Nankoma Agricultural Cooperative Enterprise (5 women, 17 men)
2. Kameke Agricultural Cooperative Enterprise (6 men, 2 women)
3. Namungalwe Agricultural Cooperative Enterprise (5 men, 2) women,

Annex 2: Assessment of relative Changes 2012-2014 based on CSS Dimensions

Indicator	Assessment (baseline)	Score 0-3	
Dimension 1: Civic Engagement		2,5	Overall Relative change Dimension 1: +1 (positive)
1a – diversity of socially based engagement		3	Change +1
1. Degree to which the needs of beneficiaries / target groups are included in SPOs analysis, planning and implementation.	<p>VECO's strategic planning process is based on reflection of past achievements and the analysis of issues arising from the farmers' quarterly meetings, literature reviews and external and internal evaluations. Consultations are made with relevant government departments, research institutions and private sector players. There are also interviews with the group members of the rural producer groups at both parish and sub-county levels. Annual review with all Rural Producer Organisation provide an input into their annual planning process.</p> <p>The consultation process involves poor/marginalised groups, the elderly and women and youth groups. As a result, there are special programs for the youths, food insecure households and the economically poor who are supported to access markets.</p>		<p>In order to have women and youth groups to be able to participate effectively in the programme activities, when starting a new programme, mobilisation of women and youths is done through the farmer group leaders. This led to having programmes that are women and youth friendly such as vegetable gardening since women and youth do not have permanent rights over land. The mobilisation focuses on the participation of both men and women in trainings. Sensitisation on gender is done so as to ensure that both women and men participate effectively in the project interventions. VECO has a <i>gender and youth strategy</i> outlining the interventions of women and youth.</p> <p>VECO has a gender coach who provides input in all VECO's interventions. This has led to a <i>gender sensitive value chain approach</i>. The coach reviews all documents including Memoranda of Agreement signed with the various stakeholders so as to ensure that they are gender sensitive.</p>
2. Degree of participation of target groups in analysis and planning of SPOs.			
1b – diversity of political engagement		2	=
3. Number of dialogue platforms with local or national government that SPO is participating in.	<p>VECO-Uganda supports the partner organisations to get involved in advocacy both at the district and national levels aimed at creating an enabling environment for smallholder farmers. At the district level, VECO-Uganda partners with the District Farmers Organisations and</p>		<p>In addition to the partnerships with the District Farmers Organisations and the National Farmers' Organisation, VECO is now supporting smallholder farmers and other value chain actors to take the lead in advocacy.</p>
4. What is the intensity of involvement			

Indicator	Assessment (baseline)	Score 0-3	
in dialogue platforms or sectoral networks?	with the National Farmers Organisations at the national level. VECO-Uganda is providing funding for advocacy at sub-county, district, national and international levels through the Uganda National Farmers and the East African Farmers Federations.		
Dimension 2: Level of Organisation		2	Overall Relative change Dimension 2: = (no major changes)
2a – Organisational level of civil society		3	Change =
5. Degree of participation of the SPO (and possibly CFAs) in sectoral networks of civil society organisations.	At the local (district and sub-regional levels), VECO-Uganda is a member of the networks focusing on agriculture, peanut and oil seed, groundnut value chain, natural resources management and HIV and AIDS awareness. At the national level, VECO-Uganda is a member of various networks active in Sustainable Agriculture and Food Rights and also advocacy. At both national and East African level, VECO-Uganda provides funding for research and policy analysis, developing advocacy strategies and engaging with policy makers under the auspices of the National and the East African Farmers Federations. VECO-Uganda has initiated the formation of the Eastern and Northern Uganda Natural Resources Platform and funds its meetings, recruits members and facilitates their training workshops.		VECO is still supporting various networks of civil society organisations. Emphasis is now on getting the chain actors to be part of the various networks. However, VECO is no longer operational in Northern Uganda and is, therefore, no longer supporting the activities of Northern Uganda Natural Resources Platform.
6. Nature of the relationship between the SPO (and possibly CFAs) and sectoral networks/umbrella organisations in the MDG/theme.			
2b – Dialogue and communication		2	Change =
7. Degree to which a shared analysis of situation in society exists	VECO-Uganda provides financial support to the partners for policy analysis, developing advocacy strategies and for engaging with policy makers. VECO-Uganda also shares information with the members of the various platforms that are formed for advocacy purposes. It supports campaigns and supports partners to produce publications including manuals and flyers on relevant issues. It supports radio programs on various issues affecting smallholders and makes contributions to partners' newsletters/magazines and also supports the production of video documentaries. The VECO website provides		A decision was made in March 2014 to improve the website by having information on the organisation's activities including a database about the value chain actors on the website.
8. Degree of joint activity as a result of joint analysis			
9. Mode, nature and quality of dialogue / communication			

Indicator	Assessment (baseline)	Score 0-3	
	little detail.		
2c – financial and human resources		1	Change =
10. Composition of current financial resource base of SPO	VECO-Uganda depends on 3 main donors for all its activities. The major donors are the Belgian Directorate General for Development and the Belgian Survival Fund. Funding from CORDAID represents about one-fifth of total funding. The quality of staff is good, but VECO has experienced a very high staff turn-over in the last 2 years.		VECO Uganda still has three main donors. In 2011 Cordaid provided about 20% of total funds. While there was a high staff turn over in 2012, in 2013 there was restructuring in 2013. All positions were re-advertised with all staff having to re-apply. The restructuring was based on the shift in focus from food security to income generation interventions.
11. Degree of dependency of external funding			
12. Human resources management by the SPO			
Dimension 3: Practice of Values.		1,3	Overall Relative change Dimension 3: +2 (positive change)
3.a - Internal Governance		1	Change =
13. Degree to which organisational structures are involved in strategic management of the SPO	VECO focuses on building the capacity of its partners in organisational management. It positions itself as a support and development organisation of its Ugandan partner organisations. VECO pursues the values of dialogue and participation but in its organisational set-up partner organisations are not represented in strategic decision-making. The Supervisory Board operates from Belgium. With regard to its partner organisations the District Farmers Associations hold a General Assembly once a year and have a Board which usually meets on a quarterly basis. VECO Uganda staff hold weekly meetings to monitor progress. Their monthly meetings focus on reviewing the month's activities and to get updates on various programs. There are also reflection meetings on an annual basis at both country and regional levels.		All management staff moved to Arusha. In the newly constituted organisational structure, the Regional Representatives and 2 programme staff per region are mandated to be on the General Council. At the country level, there are weekly programme and staff meetings while on a quarterly basis, there are regional planning meetings and reflection meetings with partners in the 2nd quarter of the year and bi-annual planning and reflection meetings.
14. Degree of sharing of information to staff (structured and regular)			
3b- Transparency		1	Change +1
15. Independent external (financial) auditing being done	VECO-Uganda works through partners with whom plans and budgets are shared. Budget allocation to partners is 70% of program funding while administration costs do not exceed 10%. All partners meet		Audit reports are shared with the donors. VECO shares with partners information relating to the programme including the resources available and the mechanisms
16. Degree of transparency towards			

Indicator	Assessment (baseline)	Score 0-3	
beneficiaries	<p>once a year to discuss the funding available and allocation of funds to the different partners after which contracts which must be complied with are signed with them.</p> <p>VECO Uganda holds annual review workshops to get the input of the supported CSOs and CBOs in the plans. VECO-Uganda also meets with the partner farmers organisations on a quarterly basis to review the progress of their activities.</p> <p>A short annual report by VECO East Africa is available on the website with limited financial information. Results of their activities are not presented.</p>		<p>with which the resources will be managed. Audit reports for the Cordaid funds are shared with Cordaid.</p> <p>The VECO website is providing detailed information on the impact of farmers for specified value chains which is assessed every three year. This site provides detailed data on livelihoods, incomes and business capacities of the supported Farmer Organisations.</p>
17. Extent of upward and downward accountability by SPO			
3c – Internal financial and human resources management		2	Change =
18. Extent to which internal written procedures for financial and human resource management are being respected	<p>The organisational manuals have all been reviewed with the involvement of staff therefore enabling them to make contributions. The financial manual also has separation of duties. The Human Resource Manual has procedures for recruitment which are followed.</p>		<p>The Regional Office is part of the financial approval process. All staff have a copy of the human resource manual which they are given right from the time when they are negotiating the contract and are required to give feedback to the Administrator that they have read and understood the contents of the manuals. A Code of Conduct is stipulated in the personnel manual.</p>
Dimension 4: Perception of Impact		2	Overall Relative change Dimension 4: (very positive)
4a –Responsiveness		2	Change +1
19. Degree of incorporation of priorities of target groups in plans and activities	<p>The farmers' organisations VECO-Uganda is closely working with, identify their needs and priorities. Examples have been provided of changes in approach how partner org's are supported and how men, women and youth are involved in programme activities.</p> <p>The value chain development activities VECO-Uganda is promoting are in line with the Government's National Agricultural Advisory Services (NAADS) program while the strong emphasis on savings and credit and natural resource management fall within the government</p>		<p>The design of the new VECO programme 2014-16 on value chain development focusing on high value crops involved all stakeholders including farmers. The programme will target farmers who are already involved in fruits and vegetables. A value chain analysis was done to identify commodities with high profit margins that could be produced by marginalised groups including women and youths.</p>
20. Degree of alignment with government policies (planned and implemented)			

Indicator	Assessment (baseline)	Score 0-3	
	policies related to cooperatives and environmental management.		The new programme will engage with local government authorities to lobby for actions such as repairing feeder roads so as to enable producers to access markets.
4b – Social impact		2	Change +1
21. Target group satisfaction regarding fulfilment of their primary social and/ or personal concern	VECO-Uganda’s interventions aim at strengthening farmers’ organisations through training and access to services including markets. The trainings and exchange visits given to the farmers groups focus on agronomy, marketing, farmer institutional strengthening, gender and natural resource management which enable them to improve their food and income security. No baseline is made on production, harvesting and marketing. Monitoring of these parameters is only done since 2011.		Baselines were done for all commodities including fresh fruits and vegetables and groundnuts in 2013. The Value Chain analysis established the profit margins and how the various actors can play a meaningful role in the value chain. VECO focuses on establishing market linkages between buyers and farmers. Once farmers understand the needs of the buyers, the relationship between the two will be sustained.
22. Degree to which empowerment of target groups towards public and/ or private sectors have been enhanced			
23. Degree of sustainability of the social impact			
	Lobby actions of the National Farmers Federation and District Farmer Associations have been strengthened. The process involves consultations with the farmers groups and bringing together different stakeholders with farmers’ representatives and technical staff who advise on the way forward. There are concrete examples of results of lobbying, for example, counterfeit inputs, marketing and agro-financing.		The Impact Assesment of the VECO Uganda programme on sustainable agricultural chain development (2011-2013) indicated that Farmer production is still quite low but that bulking of maize and groundnuts for marketing increased their profitability; their marketing skills have improved but they have not yet been able to establish an independent business enterprise. 92 Voluntary Savings and Loans Associations have been established; household savings have increased by 11% over the past two years.
	VECO’s strategy of linking farmers groups to different service providers and value chain actors, and the creation of multi-stakeholders platforms that enhance partnerships with government relevant departments and private sector, contribute to sustainability. In addition, the creation of strong farmers’ institutions enable farmers to improve their livelihoods.		On the VECO website there is a claim that farmers have increased their income for the Maize and Groundnuts Value chains with 246% and their profitability with 69% in the period 2010-2013. Also improvements are signalled for access to services, resilience to shocks, group management skills and networking skills in the

Indicator	Assessment (baseline)	Score 0-3	
			same period.
4c policy impact		2	Change +1
24. Level of influence of SPOs towards major policy changes	Support for lobbying and advocacy has been provided at different levels of the District Farmer Associations. Trained members are participating and contributing at district and national advocacy meetings and dialogues, effectively doing advocacy work on counterfeits, food security, cooperative development, and access to affordable agricultural finance. As a result farmers concerns and issues have been discussed in different fora and forwarded for further analysis and redress by policy-makers. Members followed up implementation of government programmes for effective delivery of services to address the general problems affecting agricultural production.		VECO builds the capacity of farmers to be able to bring out issues that affect production and marketing within the value chains to policy-makers.
25. Degree to which SPOs are holding government (national and local) and private sector accountable			In 2013, the bye-laws on counterfeit products were passed by 8 district councils and are awaiting submission to the Attorney General for final approval. VECO also signed an MoU with Centenary Bank enabling famers to access affordable agriculture finance. VECO is also working with EAFF on matters relating to cross-border trade. EAFF secured a formal space at the East African Community Sectoral Council on Agriculture and Food Security, where they lobbied council members on the prevalence of aflatoxin. As a result, a proposal was made that the EAC should capture data and incidences on aflatoxin which will inform the grains standards in the region.

Box 4: Partnerships established by the ACEs as a result of VECO's support

- **Uganda Cooperative Alliance (UCA):** Capacity building and institutional support for cooperative management
- **South Eastern Private Sector Promotion Enterprise Ltd (SEPSPEL):** Training of FOs and technical backstopping in VSLAs and SACCO microfinance management and the RPOs and ACE members in business skills, financial management and leadership
- **National Agricultural Research Organisation (NARO):** Monitoring and evaluation of improved seeds
- **Makerere University Soil Science Department:** Training in soil testing and soil fertility management
- **Makerere University Food Science Department:** Aflatoxin management
- **NASECO:** Supplied seed for demonstration gardens
- **N2 Africa:** Setting up of groundnut demonstrations and monitoring and evaluation
- **Uganda National Farmers' Federation (UNFFE):** Lobbying and advocacy on counterfeit agro-inputs and agri-financing
- **JEEP:** Training in construction of energy saving stoves and purchase of solar lanterns
- **National Forestry Authority:** Setting up of tree nurseries and training in agro-forestry including fruit tree growing
- **District Local Governments:** Capacity building for VSLAs and monitoring and evaluation
- **Centenary Bank:** 24 members of Kameke ACE have been able to get loans from the Bank
- **Barclays Bank:** Through a partnership with CARE Uganda, 3 farmers groups of Namungalwe ACE accessed loans from Barclays Bank at an interest rate of 8% per annum compared to 22% charged by Centenary Bank
- **Agrinet and ABi Trust:** Provide market information.

Box 5: Capacity building areas for increasing agricultural productivity and livelihood skills

Agronomic practices

- Sustainable agriculture including agronomic practices such as planting in rows and soil fertility management leading to increased production and productivity
- Soil testing to be able to examine the soil and tell what fertilizers the soil needs for improved yields
- Tree nursery establishment and management to enable farmers to access tree seedlings and for income generation
- Groundnut growing and handling thus avoiding producing groundnuts with aflatoxins
- Livestock production to be able to improve the goat breeds and ensure their multiplication for income generation
- Vegetable/kitchen gardening for nutrition improvement and income generation

Livelihood skills

- Gender mainstreaming which has led to men and women working together and taking responsibilities jointly and to women and youths having self-esteem
- Construction of energy saving stoves that use less fuelwood and are smoke free thus improving the kitchen environment

Advocacy and lobbying which has led to district leaders improving roads in Iganga and Busia Districts and hospitals and schools in Iganga District.

Box 6: Challenges of market access

Kameke ACE consisting of 524 members (209 men, 215 women, 97 youths of whom 29 are female and 8 Persons with Disabilities, 4 of whom are female) is able to process peanut butter which is of good quality as it is aflatoxin free following the training supported by VECO. The ACE is however yet to get a market for the peanut butter.

Kameke ACE received a cassava chipper for processing cassava. Given the fact that the ACE has a moisture-meter, it is able to produce high quality cassava chips. The ACE signed a contract with Family Diet, a Company based in Kampala to supply 5 metric tons of cassava chips every month. However, the buyer has for the last 6 months not taken any cassava chips and since cassava chips do not have a local market, the ACE is not able to get a market for the chips. Such experiences pose challenges for collective marketing as members need income to be able to meet their household needs and for re-investing in farming.

Annex 4: List of documents reviewed

Case I

1. FAO. Monitoring African Food and Agricultural Policies: Analysis of Incentives and Disincentives for Maize in Uganda. December 2012.
2. VECO-East Africa. Improving Access to Financial Services for farmers (October 2012 – September 2013). October 2013.
3. VECO-East Africa. Final Report: Impact Assessment of the VECO-Uganda Programme on Sustainable Agriculture Chain Development (2011-2013). November 2013.
4. VECO-East Africa. Strengthening Farmers Capacity to lobby for improvements in incomes and food security through advocacy for quality inputs, cooperative development and effective financing of agricultural value chains (2012-2014)
5. VECO-East Africa. Sustainable Food and Income Security Programme: Bugiri and Pallisa Districts. (2009-2015)

Case II

1. Uganda National Farmers Federation: Access to quality agricultural inputs: A key factor increased productivity, food security and household incomes for smallholder farmers. Briefing Paper Issue No 3. June 2013.
2. VECO: Strengthening farmers' capacity to lobby for improvements in income and food security through advocacy for quality inputs, cooperative development and effective financing of agricultural value chains. End of Year Narrative Justification (October 2012 to September 2013)

Joint MFS II Evaluation: Civil Society Strengthening –Uganda

Uganda Governance Monitoring Platform

Technical report on UGMP's Civil Society Strengthening

1. Introduction

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MDG Good governance and civil society building

The Uganda Governance Monitoring Platform, a coalition of Ugandan NGOs united in the quest for good governance was established in 2004 with an aim of monitoring trends in governance in Uganda and Africa at large. The platform now comprises 18 Uganda and 5 Dutch Civil Society Partners. Over the years, UGMP has been producing an annual governance trends bulletin on the basis of intensive research, and thereafter using the findings to lobby and engage concerned actors on how practically to improve the governance situation in the country.

The Uganda Governance Monitoring Platform was established as a coalition united in the quest for good governance with an aim of monitoring trends in governance in Uganda and Africa at large. UGMP has grown in size since its inception in 2004 from 13 to 18 member organizations to date, each member bringing a unique aspect on board. In addition there are 40 partner (35 district partners and 5 interest groups), through whom UGMP's flag ship programme - *The Citizen's Manifesto* - and other programmes are being implemented. The members provide voluntary services to the platform and entirely facilitate its running in terms of operating costs and human resources. UGMP is run as a loose coalition, with the Chairperson democratically elected by the members. Currently Deniva chairs UGMP and its secretariat is hosted at the National NGO Forum.

Within this platform the NGOs work together in monitoring governance around different thematic lines. For this purpose information is being collected and analyzed on good governance, peace-building and human rights issues which contributes to a substantial and critical political dialogue between public and government. Annually UGMP produces a governance trends bulletin on the basis of thorough research of actual political issues. The platform uses a total of 29 governance related indicators, ensuing from four broad benchmarks derived from Uganda's 2004/05 Poverty Eradication Action Plan. These benchmarks are: democratization process, human rights situation, transparency and accountability, and conflict resolution.

Purpose and outline of technical report

This report is presenting the contribution of the Uganda Governance Monitoring Platform to civil society strengthening, and in particular its lobbying and advocacy activities through their role in the Citizens Manifesto and the Black Monday Movement. These are two campaigns by a wide coalition of Civil Society Organisations in which UGMP has played a pivotal role of coordination and guidance. In the report the context of the HIVOS – besides four more Dutch CFAs - funded programme is being presented as well as an analysis of the contribution of UGMP to the achievement of the expected outcomes of the Citizens Manifesto and the Black Monday Movements.

2. Context

Building democratic institutions remains a major challenge in Uganda. After independence, state structures in Uganda were designed as the pivot for development processes, resulting in the construction of authoritarian state institutions where popular participation in the policy decision-making process was marginal. Civil society was never seen as playing any partnership role. Instead they were often viewed with hostility by post-independence governments. After the coming to power of the NRM government in 1986, the linkages between the state and Civil Society somewhat changed and there has been more of complementarity and space for collaboration and interaction.

As in many other African countries, Civil society organisations (CSOs) in Uganda play an important role in monitoring and holding governments accountable and thus contributing to the building of democratic institutions. But there are also questions whether CSOs can live up to these expectations. Because of Uganda's political history, political activism and political advocacy have not been widely embraced by CSOs. Negative political experiences have created some apathy and wariness resulting in many CSOs maintaining that they are apolitical. As a result, CSOs have failed to mark distance from the NRM government in a manner that affirms their autonomous and independent growth. Besides, the continued dependence of the majority of CSOs, particularly on foreign sources of funding, puts a great challenge on the question of ownership and legitimacy.

As NGOs have attained prominence in the economic and political life in Uganda, the NRM government is increasingly determined to control them. The government of Uganda has proposed or enacted legislation designed to strengthen official authority over NGOs, usually under the guise of developing a national regulatory framework for associations. Relationships between NGOs and government are characterised by suspicion and confusion about roles and rights. According to Human Rights Watch, research and advocacy organizations in Uganda that deal with controversial topics are facing increasing interference by Uganda's government (HRW 2012).

The UGMP Governance Trends Report of 2010 concluded that political and social trends indicate very marginal improvements, tending to stagnation for the democratization process and human rights situation; overall regression in the transparency and accountability benchmarks and a degree of progress only in the conflict resolution benchmark. The three arms of government are increasingly operating in conformism with the principle of check and balances eroding fast. According to the same report, different bills and laws are undermining the human rights situation or democratization process (NGO Bill, anti homosexual Bill, domestic violence Bill). The UGMP Governance report 2011 further underscores the key challenge of absence of Presidential term limits as a major hindrance to democracy and good governance. This position is reinforced further by the Africa Peer Review Mechanism (APRM) report on Uganda along with a review of at least 10 election observation reports.

According to DENIVA, also the year 2013 was characterized by further clashes between the NRM government and Civil Society. Civil Society spoke out "against draconian laws that had the potential to curtail the freedoms and rights of the citizenry and to also narrow the operating space of NGOs". The actions by Civil Society rallied in particular against the Public Order Management Bill but also other Bills such as the Anti-Homosexuality Bill (DENIVA Annual Report 2013). The Year 2013 witnessed increasing citizen organising, inspired by various CSO-led initiatives including Black Monday Movement, the Citizen Manifesto activities, Budget Advocacy work, the Local Government Scorecard, the Uganda Women's Agenda, etcetera.

In this political context the general goal for the UGMP is to lobby towards decision-makers in Uganda for good governance and respect of human rights. Monitoring and reporting are on Ugandan

government's progress made in transparency and accountability, in furthering the peace process to stop the conflict in Northern Uganda, and to stop human rights abuses. The Ugandan Platform decides on the selection of issues for studies, publication in newspapers and position papers written by platform members. Specific activities are the strengthening of the Ugandan platform by identification of new relevant members, deepening the analysis and using various publication forms to reach the public and decision-makers. Furthermore support is provided to Ugandan CSOs to strengthen their lobbying capacity to be able to hold critical dialogues with their local governments and donor agencies in Uganda. UGMP also tries to stimulate joint decision-making among donors regarding the conditions to be set for budget support to the government of Uganda. Many CSOs are involved in promoting social accountability for improved service delivery especially at local government level.

3. Project description

HIVOS has started to support UGMP in 2005. Hivos supports this lobby initiative because it strengthens the Ugandan CSOs lobby capacity in order to hold critical dialogues with their government and donor agencies in Uganda and to stimulate joint decision-making among donors regarding conditions for budget support to the government (*source: HIVOS website*). The support by HIVOS is being provided as a kind of “membership fee”, similar to the other four Dutch organisations supporting UGMP. As UGMP is not an organisation but a platform or coalition of like-minded CSO organisations, hosted under the Ugandan National NGO Forum, the support is not a project but can be considered “basket funding” to the activities of the UGMP.

All UGMP activities are geared towards good governance, strengthening democracy, holding the government accountable and increasing the awareness of citizens about their democratic rights. This is done through their constituency of member organisations and the 500+ organisations which are indirectly reached through UGMP members and partners. As indicated above the flagship activity of the UGMP is the Citizens Manifesto 2011-2016 which results will be further assessed in Chapter 5.2 as part of the Contribution Analysis.

The UGMP overall objective is to “improve governance in the country by ensuring that duty holders and the three arms of government institutions (the executive, the judiciary and the parliament) commit to principles of good governance, accountability, transparency and democracy”.

The specific programme objectives have been formulated to be:

1. To strengthen the lobby capacity of CSOs in Uganda who enable citizens’ participation in holding governments and other decision makers accountable.
2. To inform relevant members of parliament and the ministry of foreign affairs on the perspectives of the Ugandan CSO’s on the relevant debates in Uganda.

The activities to realize the overall objective and expected outcomes can be summarised as follows:

- Strengthen networking with pro democracy groups such as the media, political parties and the church and make an inventory on initiatives of this kind concerning civic education, citizens participation, public domestic accountability, bottom-up planning and budgeting involving all civic actors etc.
- Strengthen those initiatives by linking different local partners to the active UGMP members to interact and be involved.
- Conducting pre and post elections civic competence and civic confidence building and awareness campaigns. The objective is to ensure that the entire citizenry is the force behind a new contract between the political duty bearers and the people.

- Strengthen downward focus on the citizenry through the Citizen Manifesto Initiative as a basis of guiding and encouraging citizens to elect the right leaders. CSO consultation meetings are held to launch the Manifesto across the country.
- Campaigning and media mobilisation for specific policy issues, such as the restoration of presidential term limits, or the ‘Respect your honour and return our money campaign’
- Assessment of the performance of the Parliament against the expectations of the citizens as outlined in the citizens manifesto. The Parliament watch bulletin was therefore launched to provide citizens with an idea of the performance of the Parliament and to keep reminding the parliamentarians of the need for them to be in tandem with the expectations of the citizens. The Bulletin which is widely circulated in the country and outside highlights the achievements and failures of parliament.
- Production of the annual ‘State of governance report’: this is the UGMP annual report produced and circulated to different stakeholders inside and outside the country. The report highlights the fact that democratisation in Uganda is hampered by the strained relationship between the state/leaders and the citizens.

Project started in: Jan 2010
End of support: ?

Budget MFS-II € 48,424 (HIVOS contribution for 2010 and 2011 together)
The programme is co-funded by five Dutch CFAs: CORDAID, HIVOS, ICCO EN KERK IN ACTIE OXFAM NOVIB, and CMC.

4. Data collection and analytical approach

The methodology applied during the baseline in 2012 and follow-up assessment in 2014 is a general one which is described in the methodological annex 1 (*note: still to be added*).

Key Outcomes selected for the contribution analysis

The key outcomes for the contribution analysis for all twelve CSOs under review during the endline in 2014 have been one related to Civil Society Strengthening and one related to advocacy and lobbying of policy makers.

In the case of UGMP only one key outcome has been selected for the contribution analysis: Citizen Mobilisation and Campaigning, in particular their contribution to the Citizens Manifesto and Black Monday Movement. The UGMP contribution analysis case study “Citizen Mobilization and Campaigning” is presented in the chapter 5.2.

5. Results

5.1. Relative changes 2012-2014

The assessment of relative changes has been done against the indicators used in the baseline; the descriptive part for the endline is provided in detail in Annex . The scores of relative changes are given in the following table. The table further below presents a short description of the highlights on which the assessment of the Endline relative changes is based including the score given in the endline.

Criterion	1a	1b	2a	2b	2c	3a	3b	3c	4a	4b	4c	Total
Baseline	2	2	3	3	1	3	2	2	2	2	1	2,09
Endline	=	+	=	+	=	=	=	=	+	=	+	4+

Score: **Baseline** 0-3 0 lowest score and 3 highest
Endline = no change;
+ 1 resp – 1 little change better resp worse;
+ 2 resp – 2 substantial change better resp worse

Short description of the highlights explaining the relative score of relative change 2012-2014

Evaluation Criterion	Explanation of score relative of relative change 2012-2014
I. Civic Engagement	<i>No overall relative change</i>
1a- social engagement	UGMP has not been able to reach out to the ordinary citizen. Their main channel of work is still the same as in 2012
1b- political engagement	There are a few but positive developments with regard to the engagement with government which is reported to be more open and direct.
II. Level of organisation	<i>Positive overall relative change: +1</i>
2a-organisational level	No change
2b-dialogue and communication	UGMP and their national and district partners have been able to start new campaigns and research activities
2c-financial and human resources	Overall the contribution by the five Dutch partners has gone down, but the members and partner organisations have been able to keep up with the work of Governance Monitoring showing their interest in this business. But the situation remains fragile as there is only one focal person within UNNGOF with no staff.
III. Practice of values	<i>No overall relative change</i>
3a-internal governance	No significant change with the exception of the adoption of a new management plan in 2013; but no direct results because of that
3b-transparency	No change
3c-internal management	No change
IV. Perception of Impact	<i>Positive overall relative change: +2</i>
4a-Responsiveness	On the basis of their extensive network of members and partners, UGMP has been able to integrate the citizen's opinions in the Black Monday Movement and in their reviews of NRM government, of the 9 th Parliament and the UGMP Opinion Poll. Through media actions citizen's could contribute to these findings.
4b-social impact	No change
4c-policy impact	Through their studies, research and communication efforts UGMP has been able to engage with politicians and policy makers at national level; through their members and partners they have been engaging at district level as well. Though the evidence of increased political engagement is mainly anecdotal.

5.2. Contribution Analysis

UGMP Citizen Mobilization and Campaigning

1. Case Background

In Uganda the UGMP is the driving force behind a number of campaigns based on citizen mobilization. The Citizens' Manifesto (CM) is an initiative of the Uganda Governance Monitoring Platform (UGMP) to hold leaders accountable by developing a manifesto that reflects citizens' political, social and economic demands against which leadership success or failure will be gauged.

In 2009, UGMP, responding to several years of monitoring on governance trends in Uganda, conceptualised the Citizens' Manifesto process as an initiative with a good prospect of placing Ugandan Citizens at the forefront of shaping the political future of Uganda. It was conceived in the wake of realizing that citizen apathy was a major hindrance to the quest for good governance and that the political system was not optimally responsive to the socio-economic demands of citizens. In the Manifesto, citizens set a political statement agenda with their demands before aspiring leaders to fulfill the promises made during the 2011 elections.

It is still difficult for the ordinary citizen for instance to connect lack of drugs in hospitals to money being stolen at Government level. People are becoming more vigilant for example in areas where the ruling party had more advantage people there are also becoming more critical of government performance.

As part of the African Peer Review Mechanism of the governance in Uganda, a good level of collective engagement by CSOs in the review process is being aimed at. UGMP members have also adopted 32 commitments from the list of commitments that the government makes and have agreed on a set of monitoring indicators for which they will track progress made in the event for good governance in Uganda. The outcome of UGMP monitoring is intended to articulate an in-depth Civil Society assessment in the APRM and good governance.

The various members of UGMP are organised in thematic clusters. In different places of the country there are different levels of appreciation and participation in analysis. UGMP brings together and enhances the interests organisations tackling issues of governance and has thus become a pillar of strength and collective advocacy and action. Through the networking ripple and cascading effect UGMP is estimated to reach approximately 500 CSOs bolstered through its partners platforms such as the anti corruption coalition, the NGO forum, the Hurrinet, etc.

2. Theory of Change

UGMP's approach is anchored around the conviction that effective lobby from below and above can engender transformative outcomes. The approach is three pronged: creating demands for transparency and accountability from below; improving existing engagements with the state; and making the most of linkages and networks at supranational level. In all these three levels, information sharing is vital - information sharing between UGMP members, with Government and other lobby targets, with donors, with supranational bodies etc.

The UGMP theory of change has broadly remained the same. However it has been characterized by the following aspects:

1. Creating demand from the bottom by building civically competent citizens that can make an informed choices. In creating demands for transparency and accountability from below, UGMP will build on community empowerment work of its members, especially in grassroots mobilization for transparency and accountability in order to strengthen a critical mass of citizens sufficiently hungry for better services and leadership responsibility. Members seek to enlighten citizens about their rights and responsibilities and promote citizen participation in monitoring and influencing decisions and programmes delivered by the state, within a rights framework.
2. Engaging with the state at sub and national level. UGMP will contribute to enhancing state capacity to deliver better governance. UGMP members will continue to engage in the policy process in order to improve policy and programme outcomes e.g. with the Internal Affairs Minister, Parliament, Police, Judiciary etc.
3. Strengthening civil society to be able to engage and also mobilize the critical mass that can actually demand for better governance and creating a conducive environment for civil society.
4. Entail on strengthening networking with agencies that can influence the state from above. Many of these are at supranational level and include regional bodies like the East African Community, African Union; and by building alliances with e.g. international agencies, development partners, international NGOs to strengthen pressure on government to act on citizen matters of better governance.
5. Strengthening existing political parties for good governance to be delivered. The real taste of democracy is in the primaries because most of the independent members of Parliament come from the disgruntlement that takes place in the primaries. Eventually independent members influence the decisions made in parliament and may seriously undermine democracy as they do not always stand in principled grounds to determine the position they assume in Parliament.

3. Results

Since it start in 2004, UGMP released a state of governance report each year in which it reflects the collective assessment of the governance in the country. All activities are implemented by the UGMP members. As part of the Citizens Manifesto 2011-16 campaign a number of activities were undertaken by UGMP as well as their participation in the Black Monday Movement. The main results achieved are the following:

Citizens Manifesto

In 2011 Citizens presented their Manifesto with 10 key development priorities which they felt needed

urgent attention by the next government in the period 2011-2016. A number of activities linked to the Citizens Manifesto 2011-2016 have been implemented by UGMP in the period 2012-2014. As the monitoring work by UGMP and its members and partners is expected to continue up to the end of the mandate of the current government and parliament in 2016, the presented results are intermediate ones.

- Citizens' Assessment of the NRM Government (Oct 2013)

The Citizens Assessment Report is addressing the question if “the NRM Government is on track towards fulfilling its commitments to Ugandan Citizens” after two-and-a-half years of being in office. In this report, citizens’ voices regarding how the services delivered by Government are being perceived. As such it is a bottom-up evaluation of accountability by ordinary citizens with regard to how they relate to the Ugandan Government. A previous Audit report was produced in May 2012 and triggered massive public debate on the performance of the NRM Government. For the purpose of this Citizens audit, UGMP decided to focus on the ten development priorities as formulated in the Citizens Manifesto. A representative sample of 100 households per a district was selected from 33 districts to answer a questionnaire, of which 97% responded. Also a total of 71 Focus Group Discussions were held with the participation of youths, women, elderly, and community and opinion

leaders. From the results presented in the report, out of a total of 50 commitments that were audited, the NRM government has made progress on 17, very limited or no progress on 23 and backtracked or realized negative gains on ten commitments. Thus the study shows that according to the Citizens opinion, the NRM government has made relatively little progress in most areas.

- Citizens' Assessment of the 9th Parliament (Sept 2014).

In the post 2011 elections epoch, UGMP has also used the Citizen's Manifesto charter as a benchmark for assessing the performance of the 9th Parliament which started in 2011 for a five year term. This mid-term audit of Parliament presents findings of the first three years up to 2014. UGMP has carried out the study of the performance of Parliament and the findings have been contained in a report titled "The Parliament Watch Bulletin". The report aims at increasing political accountability by the legislature to the concerns of the Ugandan citizens. The research carried out by the UGMP members takes forward pre-election citizens demands to the Members of Parliament. (Source: *A mid-term Citizens' Assessment of the 9th Parliament, 2014*)

- UGMP Opinion Poll Research Report (May 2014)

Another activity linked to the Citizens' Manifesto 2011-2016 has been the holding of an Opinion Poll which is a relatively uncommon phenomenon in Uganda. In this activity, UGMP partnered with two external parties (Monitor Publications Limited (MPL), and Research World International) to conduct a socio-political and governance opinion poll. The Poll tackles a number of issues including the economy, service delivery, corruption and accountability, electoral reforms. The poll was conducted as part of the periodic assessments that UGMP has been implementing in order to take the Citizens Manifesto agenda of 2011 forward, and keeping track of the government's commitments. UGMP sought to pick Citizens opinions on how the government is delivering on the economy and how they view the actual governance of the country. A total of 2,142 randomly selected persons across the country were interviewed of which 54% female and 46% male. The results of the Poll indicate that just over 50% of the interviewed persons believe that the Ugandan economy is better off than in 2011 and 48% are personally better off than at the start of the actual government; with respect to governance issues: overall the poll indicate that social services (education and health), road infrastructure and security has improved; however, with regard to democracy and in particular the role of Parliament and the fight against corruption, a majority was dissatisfied. The report concludes that service delivery is at the centre of expectations of the population but that "the long term dominance of a single political leader has impacted on prospects for any peaceful transition of power" (Source: *UGMP Opinion Poll, May 2014*)

In addition through research and analysis UGMP produces the State of governance reports in which it highlights and articulates key governance issues and challenges. For instance one of its State of Governance reports examined the questions of whether Uganda's democracy was progressing or backtracking. This publication came up as a UGMP policy statement and subsequently through media shows and breakfast meetings UGMP opened space for debate with government. UGMP's work has led to increased public awareness on corruption.

Black Monday Movement

UGMP, alongside with other CSOs in the country, has also been involved in the "Return our money" campaign. Over the last two years this campaign evolved into the popular Black Monday Movement (BMM) through which the Black Monday News letter was eventually born. The Newsletter is currently receiving nationwide distribution through the UGMP membership. The BMM is a social movement against the theft of public funds by government officials and leaders that is symbolized by wearing black cloths every Monday. It is a campaign of action around Uganda by citizens from many backgrounds including NGO activists, students, youth, women, religious and politicians to get rid of theft of public funds and other resources by public leaders. It started in October 2012 by citizens

tired and angry about continued massive theft of public funds by government officials after the OPM and Pensions scandals and came together to mourn the loss of integrity in leadership publicly.

Black Monday Campaign gathered momentum and has encouraged discourse on corruption in the country. Black Monday has harnessed support from a vast array of Ugandans including some government officials. Under the Black Monday a monthly Newsletter was published and widely distributed which stimulated dialogue on issues of public concern based on the monthly themes. These newsletters had overwhelming demand across the country and increasing citizen interest and actions against theft of public funds have since been witnessed and the monitoring of performance of government provision of social services as a result of these interventions .

The thematic focus of the Black Monday newsletters have at times drawn sharp focus on elements that directly impacting peoples livelihoods and often resulted into government responses such as was the case for abuse of workers' rights by private companies.

As a result of the Black Monday campaign government leaders have been tasked to account and respond to citizen issues through

- o Increased participation of leaders in NA meetings
- o Leaders coming back to consult and give feedback
- o Answers given to citizens concerns
- o Actions are taken to issues raised

Active communication

In 2012-2014 as a lobby and advocacy platform UGMP has continued to articulate the issues of governance that were highlighted as citizens priorities e.g. (fighting corruption, improving public service, respect for the rule of law, restoration of presidential term limits etc), in the citizens manifesto prior to the 2011 elections. UGMP carries out research on governance issues and presents research papers, talk shows, face to face discussions and - in collaboration with its members - it dialogues with various responsibility holders on the research outcomes. The platform runs an active website on which all its publications and annual reports are uploaded. In addition there has been increased and better engagements with the media like WBS, Monitor publications, Kfm, radio and TV talk shows . In all these cases UGMP and its members have been able to have continued, press conferences including, social media discussions on important social economic and political issues.

4. Contribution analysis

Implementation through partners

As a platform UGMP is dedicated to improving the state of governance in Uganda through research, lobbying and advocacy and promoting citizen/ public debate on important governance issues in the country. UGMP derives its strength from the fact that the 18 member organisations agreed to run UGMP as a platform, rather than an independent organisation, in which the members are responsible for implementation of Platform programmes and activities. Hence to run the platform the members contribute time and human resources, based on their area of specialty. The research and lobbying are principally based on the inputs and contributions of the partner and member organisations which provides a rich evidence of the issues at stake at the local level. The 18 member and 35 partner organizations use their own resources to take the work forward.

UGMP has no full time staff apart from one focal person supported by three other UNNGOF staff devoted to other work. In the long run this UGMP set-up will not prove to be sustainable as to have its own staff including 2 volunteers. UGMP is able to use the host organization (UNNGOF) for their

legal status and their general assembly. Within the UNNGOF assembly, issues related to the platform are being presented and discussed.

UGMP member organisations have continued to appreciate the platform for providing space to talk with one voice on matters of national significance while at the same time it cushions members from reprisals.

In terms of funding UGMP is not different from the rest of civil society in the country. It too is heavily dependent on external funding making it vulnerable in the event that external funding ceases. UGMP as a participatory platform has a relatively limited hierarchy as all members collectively decide and take an active role in all activities. The platform annual strategic retreat acts as the main strategic planning event at which a chairperson is elected and annual work programme agreed.

Political engagement

UGMP has been able to sustain engagement on key political issues such as reinstating of Presidential term limits and improving of electoral laws beyond elections. The platform has also been credited for its continuous generation of issues to shape political discourse thus creating increased visibility of:

- Citizens' priorities into Citizens' Manifesto
- Interface between leaders and citizens
- Exposure of corruption cases
- Campaigns such as Return our Money or Black Monday Movement
- Yard stick for 2016 preparation

Through engagements with district council members, MPs and their interface with the Internal Affairs Minister, Government has in some cases been using reports and findings from UGMP and its members NGOs. E.g. the Electoral Commission mentions UGMP as a source of reliable data. Moreover UGMP reports have been quoted by the ruling party spokes person and other government officials.

The Citizens Manifesto has continued to guide engagements between the duty bearers and rights holders, increased citizens demand for services and holding leaders accountable. The citizens' manifesto's approach of campaigning and audit work has also led to increased civic rights campaign.

The UGMP model focuses also on identifying and engaging eminent people, not necessarily be UGMP members, who would engage with the sensitive issues of political governance and accountability without being easily intimidated and threatened for fear of being deregistered. The platform has thus engaged prominent people such as renown Bishop Odama, Father Gaetano and women rights activists Rhoda Kalema. These prominent people have subsequently played a key roles in opening debate with government.

Some politicians have appreciated that UGMP can mobilize people and the fact that the platform has some influence on the people. Some Members of Parliament have approached UGMP to help them educate the people to stem off the hostilities that MPs face when they go to talk to the people.

As a result of UGMP and CSO's intensive lobby they now hold quarterly interface meetings with the Internal Affairs Minister and managed to hold face to face meetings with the Inspector General of Police (IGP, to tackle the issue of office insecurity for NGOs offices there were being intermittently broken into. UGMP work has thus resulted into more open direct engagement with government which was not the case two years before.

5.3. Relevance of results

The contribution analysis presented above shows a relatively mixed picture whether the UGMP campaigns have been successful or not and whether they have contributed to “building civically competent citizens that can make informed choices”

The mixed picture is coming from the following observations:

1. On the positive side there is increased civic competences as Civil Society Organisations use the Citizens’ Manifesto and the reports to keep their politicians and government accountable by asking them why certain investments or improvements have not taken place. Moreover, citizens use the Manifesto and reports as a guide to decide on which politician to vote or not to vote for. However, in the run up to the 2016 elections there will be need for an assessment of how the Citizens’ Manifesto has worked in reality, to define its success and how to take it forward as this is still not clear from the above contribution analysis. In addition to civic confidence, there is need to look at civic competence and to come up with strategies for sustaining civil society engagement with government.

2. Though UGMP is widely recognized as a vocal and important voice of civil society with the purpose of keeping the government accountable, UGMP depends very much on the contributions by its members and partners. As discussed above this is a very positive point as the Platform builds its evidence on the basis of the information provided by its partners and members. Besides, these CSO partners and members are actively involved in the implementation of the Platform activities. However, it has not become clear whether members and partners are contributing at the same level, or that UGMP depends on a few active members.

3. The various reports produced by UGMP – in particular the annual governance trends bulletins– are being recognized as a good source of information even as a reference to contribute to “an informed and civically competent citizenry that relates to leaders from a position of power and empowerment”.. As earlier indicated UGMP has been producing these trend bulletins through intensive research, and thereafter using the findings to lobby and engage concerned actors to improve the governance situation in the country. However, from the endline assessment, the impacts of the political engagement remain at an anecdotal level. Highlights of this engagement have been mentioned but whether transparency and governance by the Ugandan state have improved is still to be proven.

4. UGMP at the moment has a five year strategic plan 2013 – 2018 which clarifies what the platform desires to achieve. In addition, UGMP has been celebrating 10 years of existence in 2014 which reflects a platform that has come of age. This indicates that there is sign of sustainability of the UGMP platform but on the other hand the funding and staffing situation points as the contrary. The dependency of the Platform on a few Dutch organisations make them vulnerable to any external change in the Dutch CSO co-funding mechanism as will be the case by the end of MFS- II funding. Besides the lack of a permanent full-time coordinator make it difficult for UGMP to go beyond a project status.

6. Discussion

- *Design*

The design of the support to the UGMP is quite a particular one. First of all UGMP is not an organisation but a platform or coalition hosted by the Ugandan National NGO Forum. This being so, the support is more of a project under the UNNGOF than a basket support to an independent organisation. Notwithstanding this set-up is not unfavourable as the UGMP has a clear governance structure with a board being composed by its 18 partners. However, at the same time the five Dutch co-financing agencies are at the same time member and donor of the Platform. Though the Dutch CFAs can be commended for their continued and consequent funding of the Platform, the sustainability of UGMP depends fully on the Dutch CFAs as the Platform does not have the legal status to apply for additional or other funding.

- ***Future funding***

UGMP being a platform of a coalition of like-minded Civil Society Organisations and moreover being highly dependent of ultimately one source of funding, future funding should pursue a more solid legal set-up providing the Platform to diversify its funding base. As such the role and performance of the UGMP is very important and relevant which implies that future funding should absolutely be considered by the five Dutch CFAs. One way could be to involve the CFAs international sister organisation to whom each of the Dutch CFAs is being allied to. Many of these –for instance Oxfam – have an interest in political engagement by CSO in Uganda as well.

- ***Recommended changes in project design***

One of the elements which is clearly missing in the UGMP set-up is a close monitoring of their results in terms of political engagement. Throughout the research for the MFS II evaluation it became apparent that the successes of the Citizens Manifesto and Black Monday Movement remained rather anecdotal despite the fact that these are widely known and supported campaigns.

- ***Improvement of impact evaluation***

See recommended changes

- ***Causal mechanisms***

The only one specific causal mechanism which has proven to be quite particular has been the set-up of UGMP as a coalition with allied members and partners being responsible for the implementation, dissemination and further political engagement. The 18 allied members are guiding the campaign process on the basis of their commonly agreed strategic plan. This set-up has strengthened the ownership of the Platform by their members and promoted the active involvement of the 40+ partners which is quite unique. As such it has become clear that a good level of mutual trust has been created amongst the members which makes it possible for the CSOs to speak with one voice. Quite often a platform or coalition becomes an organisation in itself with its own organisational structure and funding which in the end may alienate the coalition members from the central structure. This has certainly not been the case for UGMP as has been shown that UGMP has been a vibrant and performing coalition over the past decade.

7. Conclusion

Changes in Civil Society Strengthening 2012-2014 for UGMP

With respect to the changes in Civil Society Strengthening according to the Civil Society Index framework and the indicators used in the baseline in 2012 and the endline in 2014 the following conclusions can be drawn in the case of the UGMP support:

1. With respect to Dimension 1 (Civic Engagement) we have not observed any significant changes: with respect to their social engagement there has no improvement despite the fact that UGMP realizes that it is difficult for ordinary citizens to connect to the findings of their reports and to use them for more transparency and accountability in their day-to-day reality. Besides UGMP's way of engaging

with government and policy-makers has in essence not changed. They are still using the same approach as in 2012 during the baseline.

2. With respect to Dimension 2 (Level of Organisation) UGMP has been able to intensify, continue and expand their contribution to the campaigns through ground-making research and information campaigns through their network of members and partners. In particular they are able to come up with broadly share reports and communication efforts can only be commended. However, with regard to funding the only way UGMP is able to survive is through the contributions made by their constitution of members and partners.

3. With respect to Dimension 3 (Practice of Values) there has been no change at all. The internal democratic set-up has not changed and the Chairperson has remained the same as in 2012.

4. When it comes to the Perception of Impact (Dimension 4), there has been a rather positive development when compared to the baseline in 2014. This has been in particular the case for the Responsiveness (4.1) and Political Engagement (4.3). UGMP has been able through their different campaign activities such as the follow-up studies of the Citizens Manifesto campaign and their contribution to the Black Monday campaign to insert the citizens' opinions in their reports and advocacy messages for accountability and transparency. Through the Citizens' Opinion Poll they also have able to bring about the opinion of the population on the economic and political situation in the country. Also in terms of Impact of their political engagement efforts, a number of successes – though anecdotal – have been recorded.

Attribution of changes to UGMP

Through the Citizens Manifesto and later the Black Monday Movement as well as the publication and circulation of information that are critical of the behavior of government, UGMP has significantly contributed to citizen empowerment and capacity building. Awareness created through the BMM at district and sub county levels has built on the earlier citizens empowered and led into cascading demand for accountability from duty bearers at those various governance levels.

Relevance of the changes

The relevance of the changes have been analyzed and presented in the case study of 5.2 and in 5.3. From the analysis of the contribution appears a relative mixed picture of on the one hand an important, widely known and accepted Platform with relevant campaigns but with relatively only anecdotal impacts on the citizen empowerment and on the policy-making processes at different levels. It has been concluded that the monitoring of the impacts of the campaign work of UGMP should be further elaborated. If not UGMP becomes more of a political research platform than a coalition for action and political change, accountability and transparency.

Explaining factors to identified changes

UGMP has been able to play an important role in their goal to strengthen civil society engagement in enhancing transparent governance and accountability. As indicated in Chapters 5.2 and 5.3 this has mainly been possible through their constituency of Civil Society Organisations throughout Uganda, their dedication to contribute to the campaigns with a national outlook and the effective communication strategy on the basis of the outcomes of their research and studies. The combination of these three elements have materialized into widely known campaigns.

Assessment of project design

Statements	Scores
The project was well designed	7
The project was implemented as designed	8
The project reached all its objectives	6
The observed results are attributable to the project interventions	5
The observed results are relevant to the project beneficiaries	8

Scale of Scores: 'Not at all' (1) - 'Completely' (10)

Annexes

- 1. Research methodology applied**
- 2. Description and scoring of relative changes CSS 2012-2014**
- 3. List of people interviewed**
- 4. List of documents consulted**

Annex 1: Brief description of methodology applied

Introduction

During the baseline 2012 and the endline 2014 a general methodology has been developed for the Civil Society Strengthening SPO studies in Uganda which has been applied to all SPOs in more or less the same way. This methodology has followed the Civil Society Index methodology with a major focus on the perception of social and political impacts as a result of the activities of the SPO under review. A methodological guide has been developed based on the earlier developed Baseline Methodological Guide and discussions with the Wageningen University CDI studies for Civil Society Strengthening, in particular contribution analysis (*see Methodological Guide Endline 2014*). As has been described in the Baseline report, the Uganda study intends to make a comparison of the changes of the five Civil Society Index (CSI) dimensions over the period 2011-2014. In 2012 the Evaluation Framework has been developed on the basis of the Civil Society Strengthening Assessment Framework also known as the CSI as developed by Civicus. The five pillars as prescribed by the MFS II evaluation framework has been elaborated into a set of 25 indicators (excluding the context description). The CSS Evaluation Framework for Uganda has been applied unchanged in both the baseline phase as well as the endline.

In the endline of 2014 the focus has been on the dimensions of Civic Engagement (social engagement and political engagement; dimension I) and the Realised (or perceived) Impact of their social and political engagement (dimension IV). But the scoring and description of relative changes has been done for all 25 indicators including dimensions II (Level of Organisation) and III (Practice of Values).

No monitoring has been undertaken in 2013 as there was no budget available. Furthermore, the period between the baseline and the endline was already relatively short to assess impact.

Endline 2014 SPO selection and reporting

In the baseline 2012, 17 SPOs had been randomly selected from the long list of about 120 SPOs being supported by the Dutch MFS consortia. In addition the 8 SPOs under the 5C study have also been addressed with regard to their Civil Society Strengthening. From the original 17 SPOs under the CSS study, 13 have been retained for the endline study at the start of the endline.

The Criteria which have been used for the selection of the SPOs to be included in the endline were:

- a) Selecting the SPOs that will be part of the process tracing exercise (before fieldwork).
- b) Selecting the specific outcomes that will be analyzed using the process tracing methodology.

From the 13 SPOs retained for the endline, finally 3 organisations have not been included. It appeared to be too complicated and time-consuming to include the two SPOs of the Capacity Building exercise. They could only be included towards the end of the endline exercise as the Uganda CapDev ETC team was still working with these organisations. A third SPO was left out as they did not wish to collaborate during the endline exercise also for reasons of being included in the MDG evaluation. Finally only eight out of ten remaining organisations have been reported upon for the endline 2014 as the lack of data consistency for the two remaining made it impossible to sufficiently address the evaluation questions.

Methods/ techniques

During the baseline 2012 and the endline 2014 the following methods have been used:

1. Before/ after comparison

Upon completion of the 2012 CS baseline study a clear picture of the Civil Society Strengthening efforts by the individual SPOs both in terms of Civil Society engagement as well as lobbying and advocacy (political engagement) had been made. This was realized by taking stock of what was the

situation in 2012 since the start of the individual projects one or two years earlier on the basis of the indicators as formulated for the baseline.

A similar assessment has been made in 2014 during the endline analysis when a description has been made of the changes in the period since the baseline 2012. On the basis of these changes a score has been given for positive/ negative changes or no change at all. The relative changes 2012-2014 have been further analysed to understand what has contributed to these changes in the

2. Case studies

The case studies are described in most of the studies on the basis of the “stories” of the beneficiaries and / or partner organisations as well as representatives of the “lobbying targets”. The 2012 baseline include descriptions of specific cases which have identified and described to illustrate the activities, outputs and outcomes of the SPO in question. In 2014, these cases have been further elaborated to assess the contribution of the SPO to the realization of the achieved outcomes through a contribution analysis.

3. Focus Group Discussions

Focus Group Discussions have been used to interview several stakeholders in order to capture the opinion or meaning of various persons at a time. FGDs have been held in the first place with the staff of the partner organisations in order to address the issue of relative changes 2012-2014 (including timeline analysis) as well as the theory of change which was being applied by the SPO.

Secondly, FGD have been held with groups of the beneficiaries of the SPO in order to assess their opinion on the changes in their organisation and/ or communities.

4. Individual interviews

Both during the 2012 Baseline and the 2014 Endline Individual interviews have been held with selected stakeholders on the basis of the research questions as formulated in the CS research guide. These interviews have been used for the assessment of the relative changes 2012-2014 in the contribution analysis.

5. Timeline analysis

In both the baseline 2012 as well as the endline 2014 and timeline analysis has been done in order to understand the development of the organisation over time in the face of both internal and external developments. The latter timeline analysis has been used to understand better the relative changes, the implementation of concrete activities based on the theory of change as well as to assess the contribution of the SPO to the realization of the intended outcomes.

Sampling of beneficiaries/ informants

During the baseline 2012 and endline 2014 a similar approach to the sampling of beneficiaries and informants has been applied. The sample of the beneficiaries to be interviewed was done by the Ugandan consultants. It was agreed in the Baseline Methodological guide that a wide range of stakeholders would be interviewed, either during the ‘staff analytical workshop’ with the attendance of as many staff member relevant for management, programme implementation and financial management. A similar approach has been used during the endline 2014.

Moreover, focus group interviews were held with beneficiaries at their location, or with responsible staff of beneficiary organisations (eg primary schools teachers, cooperative board members, health workers, extension workers). In a few instances board members have been contacted and interviewed on their role and vision on the organisation. Other stakeholders from government agencies such as local government staff or ministerial staff have been interviewed on an individual basis.

The selection of groups/ individuals to be interviewed was often made on the basis of the availability, relative proximity (most research was done during the rainy season and in regions with very poor transport infrastructure).

Annex 2: Description and scoring of relative changes CSS 2012-2014 UGMP

Indicator	Assessment (baseline)	Score 0-3	Assessment (Endline)
Dimension 1: Civic Engagement		2	Overall Relative change Dimension 1: = (no change)
1a – diversity of socially based engagement		2	Change =
<p>1. Degree to which the needs of beneficiaries / target groups are included in SPOs analysis, planning and implementation.</p> <p>2. Degree of participation of target groups in analysis and planning of SPOs.</p>	<p>UGMP is a platform made up of 18 CSOs some of them are platforms in their own right and others are independent organisations. Its target beneficiaries are the people of Uganda who it perceives are at the moment denied the opportunity to being governed well. UGMP does its work through these 18 members who are responsible for the implementation. In that respect its work directly benefits its members. As a consortium the organisation articulates issues that are in the interest of the members. Each year UGMP releases a state of governance report in which it reflects the collective assessment of the governance in the country. All activities are implemented by the UGMP members.</p> <p>The various members of UGMP are organised in thematic clusters. In different places of the country there are different levels of appreciation and participation in analysis. It is still difficult though for ordinary citizens to connect e.g. the lack of drugs in their hospitals to the money stolen in the various government offices. Urban populations are however a little more enlightened and analytical. UGMP however notes that in the areas of the country where the ruling government enjoys greater support the people are less critical about the shortcomings of government.</p>	<p>1. UGMP is a network which has 18 members who inform most of its work and vice versa. Further there are Citizens’ Manifesto partners who are the channels through which UGMP’s work is done. These include 35 district partners and 5 interest groups. These 40 in addition to the 18 are the organizations through which UGMP’s work is done.</p> <p>2. While UGMP hasn’t officially said so they have stopped producing annual reports as for the last two years they have not done so. In addition to the annual governance monitoring report, there are other specific assessments that UGMP takes up such as the implementation of the NRM manifesto, performance of parliament, performance of local government and several others</p> <p>3. It is still difficult for the ordinary citizen to connect such as lack of drugs in hospitals due to the money being stolen. Out of campaigns like Black Monday awareness has been increased.</p> <p>4. One member CODI refocused its strategies to build citizens competence with funding from UGMP.</p>	
1b – diversity of political engagement		2	Change +1

Indicator	Assessment (baseline)	Score 0-3	Assessment (Endline)
3. Number of dialogue platforms with local or national government that SPO is participating in.	<p>UGMP is made up of a membership who are also platforms made up of both national and district based CSOs. UGMP is not a member of other platforms although its members are members in other platforms and often represent UGMP in those platforms as well. The UGMP secretariat is housed in the NGO forum national office and this gives it access to the various other CSOs and networks that form part of the NGO forum national membership.</p> <p>Considering that UGMP brings together many organisations that are focused on issues of governance, it becomes a pillar of strength and collective advocacy and action.</p>		<p>UGMP now has quarterly interface meetings with the Internal Affairs Minister. Engagements also take place with district council members, MPs.</p> <p>Meetings with the Inspector General of Police when NGOs were being broken into. More open and direct engagement with government than was the case two years ago.</p> <p>The Campaign “Return our money” on the theft of public money gave birth to Black Monday Movement.</p>
4. What is the intensity of involvement in dialogue platforms or sectoral networks?			
Dimension 2: Level of Organisation		2,3	Overall Relative change Dimension 2: = +1 (positive)
2a – Organisational level of civil society		3	Change =
5. Degree of participation of the SPO (and possibly CFAs) in sectoral networks of civil society organisations.	<p>The work of the UGMP enhances the interests of its member organisations/ platforms and other members and constituents too. At the moment UGMP is assumed to reach at least another 500 CSOs through the networking ripple and cascading effect.</p> <p>Some of the platforms in which UGMP members take part include: The anti corruption coalition, the NGO forum, the Hurrinet, etc.</p> <p>UGMP members are mainly focused on MDG 1 (poverty reduction) and highlight poor governance as a major cause of extreme poverty. Considering that implementation of UGMP activities is through the membership, therefore UGMP too is focused on the same MDG theme. The main focus of the network however is governance.</p>		<p>UGMP participated in the African Peer Review Mechanism process with Bishop Zac as the team leader in 2012.</p> <p>Further no significant changes</p>
6. Nature of the relationship between the SPO (and possibly CFAs) and sectoral networks/umbrella organisations in the MDG/theme.			
2b – Dialogue and communication		3	Change +1
7. Degree to which a shared analysis of situation in society exists	UGMP carries out research on governance issues and presents research papers, talk shows, face to face discussions and - in		Over the past two years, UGMP and their partners have been able to start new Advocacy campaigns such the campaigning for free and fair

Indicator	Assessment (baseline)	Score 0-3	Assessment (Endline)	
8. Degree of joint activity as a result of joint analysis	<p>collaboration with its members - it dialogues with various responsibility holders on the research outcomes. UGMP has for instance carried out a first study in the performance of the 9th parliament and the findings have been contained in a report titled "The Parliament Watch Bulletin". The bulletin aims at increasing political accountability by the legislature to the citizens. The research carried out by the UGMP members takes forward the demands that the citizens made to the MPs prior to the elections.</p> <p>UGMP is involved in other advocacy campaigns strategically linked to its own advocacy agenda. The most recent advocacy platform in which UGMP is involved in is the "Return our money campaign" to which the CSOs in the entire country contributed. It has also distributed 40,000 fliers.</p> <p>UGMP undertakes research and analysis of key governance issues and articulates these issues in its reports. The most recent State of Governance report examined the question whether Uganda's democracy was progressing or backtracking. This publication came up as a UGMP policy statement as an outcome of the shared analysis by different stakeholders. Through media shows and breakfast meetings UGMP endeavours to engage the government.</p>		<p>elections, the Black Monday campaign, the quality public education campaign, and the Public Order Management Act (POMA) campaign.</p>	
9. Mode, nature and quality of dialogue / communication			<p>Research includes NRM Manifesto Audit (2013), Mid-Term Citizen's Assessment of 9th Parliament (2014) or the Social political governance opinion poll that was launched recently. As a result there is an increase in volume and availability of information on governance in Uganda through the reports by UGMP. Engagements have been realized with the media like WBS, Monitor publications, Kfm, radio and TV talk shows have continued, including press conferences, and the use of social media.</p>	
2c – financial and human resources		1	Change =	
10. Composition of current financial resource base of SPO	<p>UGMP has only one permanent staff who takes charge of the secretariat. This person is a degree holder in Public Management and Planning. However, implementation of UGMP programmes is undertaken by the staff of its member organisations.</p> <p>UGMP is currently heavily dependent on external funding. Even though the platform receives contributions from its</p>		<p>Funding from dutch partners has gone down. UGMP benefits from DGF which receives some of its funding from the dutch government through MFS II. Most of the work continues to be done largely by the members and 35 partner organizations who actually use their existing resources to take the work forward. Whatever comes from DGF or any other source is complimentary. This implies that there is a limitation on what we can be done because funding is small.</p>	
11. Degree of dependency of external funding				12. Human resources management by the SPO

Indicator	Assessment (baseline)	Score 0-3	Assessment (Endline)
	<p>members, even those members depend on external funding which implies that ultimately all the funding that is received is external in source.</p> <p>In 2012, UGMP receives \$15,000 from its Dutch consortium partners under the MFSII funding programme. This funding constitutes approximately 1% of overall UGMP budget. Additional funding is received as contribution from the member organisations.</p>		UGMP has no staff but just a focal person supported by three people who do other UNNGOF work. UGMP need to have staff who are paid salaries. There should also be a strategy of attracting at least 2 volunteers from the source of funding.
Dimension 3: Practice of Values		2,3	Overall Relative change Dimension 3: = (no change)
3.a - Internal Governance		3	Change =
13. Degree to which organisational structures are involved in strategic management of the SPO	<p>UGMP is a participatory platform in which there is limited hierarchy and all members take an active role in all activities. The platform is managed through a participatory approach through which all decisions are agreed collectively. Membership participates at an annual strategic retreat at which a chairperson is elected. A new strategic plan is due for approval and it establishes a board. In addition, a panel of eminent people will be elected to work as the face of the platform.</p> <p>UGMP actively shares information on governance with its stakeholders. Information is contained on its website, its publications and annual reports. UGMP also takes part in meetings and takes part in governance focused lobby and campaigns.</p>		<p>The Chairperson is still the same and he has not yet been recalled by DENIVA. Last year 2013 the strategic plan was adopted which describes the management structure. The platform structure is still the same.</p> <p>The idea was to identify some eminent people that may not necessarily be UGMP members because the work is now engaging in is sensitive and needs some individuals that can stand their ground i.e. not easily threatened to be deregistered.</p> <p>Different persons have been engaged. On some occasions these people have played a key role so UGMP only needs to say that these are the people they have agreed upon and then engage them officially.</p>
14. Degree of sharing of information to staff (structured and regular)			
3b- Transparency		2	Change =
15. Independent external (financial) auditing being done	<p>UGMP is housed by the NGO Forum and it receives financial management support including auditing from the NGO Forum.</p> <p>During the study, UGMP did not exhibit clear activities that point to a direct transparency towards its beneficiaries. UGMP</p>		<p>UGMP fronts the host organization (Uganda NGO Forum) on issues related to legal status and general assembly. Within the UNNGOF assembly, issues related to the platform are also presented.</p>
16. Degree of transparency towards beneficiaries			

Indicator	Assessment (baseline)	Score 0-3	Assessment (Endline)
17. Extent of upward and downward accountability by SPO	accountability is mainly towards its board made up of the 18 partner member organisations.		
3c – Internal financial and human resources management		2	Change =
18. Extent to which internal written procedures for financial and human resource management are being respected	The UGMP Secretariat is housed in the National NGO Forum offices and it utilises their financial management system.		No change
Dimension 4: Perception of Impact		1,7	Overall Relative change Dimension 4: +1 (positive)
4a – Responsiveness		2	Change =
19. Degree of incorporation of priorities of target groups in plans and activities	The issues of governance that were highlighted in the citizens manifesto as priorities for the Ugandan citizens (fighting corruption, improving public service, respect for the rule of law, restoration of presidential term limits etc) have been reflected in the various UGMP campaigns and publications. While the government has declared zero tolerance to corruption and although the fight against corruption forms a central tenet of UGMP's work, there is still difficulty in collaborating with the State. There is a need for continued engagement especially during UGMPs participation in the invited spaces where it relates with the government.		UGMP has been able on the basis of their extensive network of members and partners, to integrate the citizen's opinions. This has been visible in particular in the Black Monday Movement but also in their reviews of NRM government (2013), the Mid-term review of the 9th Parliament (2014) and the UGMP Opinion Poll (2014). Through media actions citizen's could contribute to these findings.
20. Degree of alignment with government policies (planned and implemented)			
4b – Social impact		2	Change =
21. Target group satisfaction regarding fulfilment of their primary social and/or personal concern	Representatives of the UGMP member organisations interviewed during this evaluation, all appreciated the platform as a space that allows them to talk with one voice on matters of governance that affect the entire country. The platform raises the profile of the issues discussed while at the same time it enables the distribution of the burden among different organisations. Thus reducing the possibility of one organisation being targeted by those least interested in an accountable and		The 9th Parliament has been analyzed through the District networks which are being the partners of UGMP. Citizen engagement has been improved. One individual success was reported: The school lunch campaign at Kiboota Primary School made parents start lunches and contributed to better UPE results in 2013. This campaign was reportedly inspired by the Black Monday and Quality Public Education campaigns success stories.
22. Degree to which empowerment of target groups towards public and/or private sectors have been enhanced			
23. Degree of sustainability of the social impact			

Indicator	Assessment (baseline)	Score 0-3	Assessment (Endline)
	<p>transparent public sector.</p> <p>Through its promotion of the citizens manifesto and the various post election actions that UGMP has promoted such as the engagement with selected government departments and the publication and circulation of information and publications that are critical of the behaviour of government, The platform has invested significant effort in citizen empowerment and capacity building. At district and sub county levels citizens are now able to demand for accountability from duty bearers at those levels. UGMP members are invited to various parliamentary committees and there has been occasions where UGMP has organised events to which the government officials have been invited and they have honoured the invitation.</p> <p>There is emerging evidence that points to the fact that the UGMP members are utilising the UGMP positions to inform their own strategies. This can be regarded as one of the very initial efforts at sustaining the UGMP work. In addition when communities take up action to demand for accountability from their political leaders is another indicator of sustainability. The overall impact will however be seen in the longer term when the performance of the 9th Parliament is analysed.</p>		Further there is no evidence of any social impact
4c policy impact		1	Change +1
24. Level of influence of SPOs towards major policy changes	Government has started inviting CSOs and therefore is opening up of spaces for CSOs engagement at district and national level.		Some highlights of UGMP’s political engagement results: <ul style="list-style-type: none"> • Members of the ruling party now also want presidential term limits. • UGMP member organizations are involved in oil and gas issues such as Action Aid. These had a big impact during the discussions
25. Degree to which SPOs are holding government (national and local) and private sector accountable	It is however not yet clear what impact UGMP’s work is having on the private sector.’ A major demand that was carried in the UGMP led Citizen’s		

Indicator	Assessment (baseline)	Score 0-3	Assessment (Endline)
	<p>manifesto was the restoration of Presidential term limits. While at the onset it was seen as a non starter even to draw attention for discussion in Parliament, at the moment many Members of parliament have shown clear inclination towards restoration of the term limits.</p>		<p>on the Oil and Gas Act.</p> <ul style="list-style-type: none"> • Government is using reports and findings from NGOs as back-up for their work e.g. Electoral Commission reports have CSO work as their source; the UGMP opinion poll 2014 has been quoted by Ofwono Opondo and other government officials • Halt on the creation of new districts • The Black Monday Movement and its predecessor campaign “return our money” has made Government becoming more responsive on governance issues including corruption • Black Monday publications have also focused on elements that are directly implicating the private sector e.g. labor which was focusing on hotels and how they treat their workers. • There is partial government compliance to the international, regional and national mechanisms (UPR, APR, ICESCRI etc).

Annex 3. List of people interviewed

<u>Name</u>	<u>Position / Organization</u>
1. Kaboyo Patrick	COUPSTA
2. Ekapu John Robert	HURINET-U
3. Akello Koinonia	HURINET-U
4. Job Kijja	UNNGOF
5. John Mary Odoy	UJCC
6. Rashid Bunya	FHRI
7. Muzinduki Patrick	KRC
8. John Segujja	CODI
9. Lynn Najjemba	PANOS EA
10. Sarah Pacutho	UNNGOF

Annex 4: List of Documents consulted

Still to be added

Joint MFS II Evaluation: Civil Society Strengthening –Uganda

Technical report on Uganda Catholic Medical Bureau’s Civil Society Strengthening

1. Introduction

Organisation	Uganda Catholic Medical Bureau (UCMB)
Contact Person	Dr Sam Orochi Orach, Executive Secretary Email: sorach@ucmb.co.ug Phone: +256-772-437154
Address	UCMB – Catholic Secretariat P.O. Box 2886, Kampala
Phone number	+256-415-105706; +256-415-269705
Email	adminucmb@ucmb.co.ug
Website	www.ucmb.co.ug
MDG	4, 5 and 6 (health)

The Ugandan Catholic Medical Bureau is the Health Department of the Uganda Episcopal Conference (UEC - Conference of Catholic Bishops in Uganda) which is jointly owned by the Catholic Bishops in Uganda. UCMB was founded in 1955 and became a self-accounting department under the UEC in 1971. The different UEC departments and units are overseen by their respective Commissions, established by the Episcopal Conference. In the case of UCMB this is the Commission for Medical and Health matters, chaired by a Bishop appointed by the UEC.

UCMB coordinates and provides technical assistance to Catholic health units in Uganda, assists in personnel training and the evaluation of facilities, and represents and advocates for Roman Catholic health care services nationally and internationally. A scholarship fund provides financial support to medical staff seeking further training and education; technical assistance includes assistance with financial software and web-based e-mail. Information about hospitals, clinics, and diocesan resources is available on UCMB's website. The biannual UCMB Bulletin publicizes the bureau's work and discusses public health issues. UCMB is occasionally partners with the Uganda Protestant Medical Bureau (UPMB), with whom it established the now-independent Joint Medical Store to provide low-cost medical supplies and training to church-related health facilities. (*source www. UCMB.org*)

UCMB member health facilities include 13 health training institutions, 32 hospitals (about a quarter of all hospitals in Uganda) and 249 health centers which are coordinated through 19 Diocesan Health Offices (DHO) and with a total of over 8000 health workers. Health services of the Catholic Church form part of the national health system. These facilities have all a quality certificate through an accreditation system – the first in the Uganda health system. These health facilities also have community-related (public health) programs. (*source: UCMB Annual Report 2013*). Total expenditure by the UCMB facilities amounted to 147.9 billion shillings (about EUR 45,5 Million) in FY 2013/14 which is 12,6% up from the previous year. The main sources of income for the health facilities are the users’ fees (48,7%), Government of Uganda (10,4%) of UCMB, with the remainder (40,8%) coming the Catholic church and donor contributions (*source: Min of Health Annual Health Sector Review 2013/14*).

Purpose and outline of technical report

This report is presenting the contribution of the Uganda Catholic Medical Bureau to the strengthening of service delivery by their Network of more than 280 Health Facilities. This has been realized by their lobbying and advocacy activities at international, national and district levels as well as through the implementation of the ICT Enhancement Project. Both strategic activities of UCMB will be analyzed through the presentation of two Contribution Analysis cases as well as the assessment of Relative Changes over the period 2012-2014 from baseline to endline.

2. Context

The Government of Uganda with the stewardship of the Ministry of Health has developed the second National Health Policy (NHP II) that covers a ten year period 2010/11-2019/20. Based on this national policy the National Health Sector Strategic Plan 2010-15 (HSSP III) has been formulated to operationalize this policy. The HSSP III provides an overall framework for the health sector and its contribution to the National Development Plan (NDP). The National Health System (NHS) in Uganda constitutes of all institutions, structures and actors whose actions have the primary purpose of achieving and sustaining good health. It is made up of the public and the private sectors including the Private Not-for Profit providers (PNFP) such as the UCMB.

In the National Health Policy, the Government of Uganda commits to having a stronger working relationship with the Private-Not-For-Profit sub-sector. The government has formalized commitments to the health sector through memoranda of understanding and service level agreements with the view of ensuring that government subsidies are linked to agreed outputs by the PNFP Health facilities. With regard to health care services, the National Health Policy gives priority to preventive health care and commodities for basic curative care. One of the Government facilities of support to the PNFP facilities is the Public Health Care (PHC) facility which provides a credit line for the supply of medicine and medical facilities (*Source: GoU HSSP III*).

The Uganda Minimum Health Care Package emphasizes improving Child and Maternal morbidity and mortality and consolidating the existing health services and re-orientation of service delivery to primary health care. The Decentralization and the National Health Policies define the roles and responsibilities of the Health Centers and districts in health service delivery. The lower levels of service delivery right from the community to parish (Health Centre II), Sub-county (Health Centre III), County (Health Centre IV) or referral facility (Hospital). The Ministry of Health sets standards for each level which ensures uniform health delivery in all districts.

The Government of Uganda owns and manages 242 health centres and 59 hospitals compared to 613 health facilities and 46 hospitals by PNFPs – mainly the Medical Bureaus, and 269 health centres and 8 hospitals by Private for Profit Health providers. Utilization of public health facilities is rather limited due to poor infrastructure, lack of medicines and other health supplies, shortage of human resources in the public sector, low salaries, lack of accommodation at health facilities and other factors related to the quality of service delivery.

About 80% of the UCMB health facilities are in the rural areas where 84% of the population live and where poverty levels are higher than the national average (*source: UBOS, Statistical Abstract 2010*). Because of the higher poverty levels in rural areas, expenditure on health constitutes a greater segment of total household expenditure (8%) compared to urban areas (4%). This is also due to the greater disease burden among the poor rural communities.

The poverty indicators show that most of the UCMB health facilities and the majority of private-not-for-profit facilities cannot expect a full cost recovery from user fees to sustain their cost of services. UCMB indicates that after a sharp increase of government allocations to PNFP health facilities between 1997 and 2003 (twenty-fold budget increase), the allocations have stagnated since in absolute terms (and despite inflation). As a result the contribution by government to the funding of PNFP facilities has decreased from more than 30% (in 2003) to about 11% in 2013 (*source: UCMB 2013 Annual report*).

In terms of utilization of health facilities the national trend indicates that recently there has been a small decline in the number of attendance (in 2013 minus 2%). This decline is mainly attributed to the decrease of malaria cases as a result of improved control and prevention measures, better treatment by village health teams (VHTs) and Insecticide Treated Bed-net usage which has significantly increased to more than 50% over the past decade (source: UCMB 2013 Annual Report).

The stakeholders in the Health Sector are revising the national Health Management Information System (HMIS). UCMB is part of this process and is actively participating in the development of new electronic tools for the revised HMIS, termed "District Health Information System" which is contributing to make the NHMIS more functional than before.

3. Project description

In this review of the MFS II funding 2012-2014 to UCMB, two projects are of relevance:

1. Cordaid core funding to the UCMB Operational Plan 2012-2014
2. C4C consortium ICT Enhancement project (C4C consortium with Cordaid, IICD and AKVO)

1. Cordaid Support to UCMB Operational Plan 2012-2014

Cordaid UCMB has developed a Strategic Plan 2012-2016 which has been translated into an Operational Plan 2012-2014 which has been the guiding document for UCMB with six broad objectives and goals :

1. UCMB made more competent and sustainable.
2. Effective Corporate Governance and Management.
3. Health services within the Roman Catholic Health Network meet the National and UCMB service delivery quality standards
4. Greater recognition and visibility of the Catholic Health Network within the national health delivery system and within the Roman Catholic Church.
5. Effective Strategic Partnerships developed and maintained.
6. Strengthened human resource capacity for health service delivery.

Cordaid has supported this Operational Plan on an annual basis in 2012, 2013 and 2014.

Project period: Jan 2012 – Dec 2014

Budget: €225,000 in 2012 for the UCMB Operational plan 2012-2014, and
 €250,000 in 2013
 € 300,000 in 2014 (estimate)

2. C4C ICT Enhancement project

The overall objective of the C4C Integrated Health ICT Enhancement project is to strengthen and train health workers to use ICT for Health Management Information System (HMIS) and staff

development for teleconferencing. The enhanced use of ICT enables health workers to adequately plan, analyze and use the information in an effective and efficient way. A start has been made to improve the HMIS through the integration of the system within UCMB Health facilities (both Hospitals and Lower Level Health Units).

The specific objectives of the C4C ICT Enhancement project are:

1. To develop capacity and skills of staff (medical and non medical) through continuous capacity development (CME&CPD) and information sharing within the UCMB network at a sustainable cost
2. To provide means by which Roman Catholic Church (RCC) facilities can seamlessly collect data and provide complete, accurate, up-to-date and timely information needed for decision making on key indicators, and access aggregated reports to support decision making.
3. To improve capture and management of patient records at the Health facilities to support functions of medical staff and management for better service delivery

Beneficiaries of the ICT Enhancement project are all 284 UCMB Health facilities and 587 Healthcare staff. They are expected to be able to apply the proposed ICT innovations and offer innovative services.

This project is a follow-up phase of an earlier ICT support to UCMB which focused on the digitization of reporting by health facilities. (source: C4C website)

Period: 1 Sept 2011 – 30 June 2015

Budget MFS-II: € 573,041 for C4C program (ICT-support)

4. Data collection and analytical approach

The methodology applied during the baseline in 2012 and follow-up assessment in 2014 is a general one which is described in the methodological annex 1 (*note: still to be added*).

Key Outcomes selected for the contribution analysis

The key outcomes for the contribution analysis for all twelve CSOs under review during the endline in 2014 have been one related to Civil Society Strengthening and one related to advocacy and lobbying of policy makers.

In the case of UCMB the two key outcomes which have been selected for the contribution analysis are:

1. Development of the National Policy on Public Private Partnership in Health, and
2. ICT for Health Strengthening

Both of these key outcomes and the contribution of UCMB are being presented in Chapter 5.2.

5. Results

5.1 Relative changes 2012-2014

The assessment of relative changes has been done against the indicators used in the baseline; the descriptive part for the endline is provided in detail in Annex . The scores of relative changes are given in the following table. The table further below presents a short description of the highlights on which the assessment of the Endline relative changes is based including the score given in the endline.

Criterion	1a	1b	2a	2b	2c	3a	3b	3c	4a	4b	4c	Total
Baseline	2	3	2	1	3	3	2	3	3	2	3	2,45
Endline	=	=	+1	+1	+2	=	=	+1	+1	+1	+1	+8

Score: **Baseline** 0-3 0 lowest score and 3 highest
Endline = no change;
+ 1 resp – 1 little change better resp worse;
+ 2 resp – 2 substantial change better resp worse

Short description of the highlights explaining the relative score of relative change 2012-2014

Evaluation Criterion	Explanation of score relative of relative change 2012-2014
I. Civic Engagement	<i>No relative change overall</i>
1a- social engagement	UCMB has a 5 year strategic plan, which has been reviewed after the first 2 years. It works on the basis of a 3-year operation plan; no major change with regard to its formulation process.
1b- political engagement	UCMB carries out central advocacy for Catholic Health services especially for resources and on policy and policy-related matters. But no major change.
II. Level of organisation	<i>Very positive development: +4 overall</i>
2a-organisational level	UCMB is a link between Catholic Health Services in Uganda and other players in health at national and international level – partnerships, platforms, Associations, etc. UCMB is now on the Board of the African Christian Health Association Platform
2b-dialogue and communication	The website is being upgraded to be compliant with portable devices such as phones and will have articles from the various units of UCMB. It will also be on social media.
2c-financial and human resources	Diversification of donors is taking place; dependency on Cordaid and C4C funding is gradually reduced; staff number has almost doubled with the expansion of new projects.
III. Practice of values	<i>Positive overall relative change: +1 overall</i>
3a-internal governance	No change
3b-transparency	No change
3c-internal management	Various manuals have been revised to cater for the Uganda Catholic Secretariat requirements
IV. Perception of Impact	<i>No overall relative change: 0 change</i>
4a-Responsiveness	UCMB has taken up the responsibility as one of the major HIV/ AIDS project implementors through the PEPFAR mechanism. It has continued to respond to organisational strengthening needs of its health facilities.
4b-social impact	UCMB has been able to improve the performance of the health facilities indirectly through various support activities including the support to the Performance Based Funding, ICT project and other improvements. Patient Satisfaction remains high.
4c-policy impact	UCMB has played an important role towards the development of various government policies. In the Private-Public Health Policy (PPHP), UCMB spearheaded the development of the guidelines for the Private-Not-For-Profit (PNFP) Health Facilities. UCMB maintained its position as Key player in Health Policy Advisory Committee of MoH and continued contributing to policy processes.

5.2 Contribution Analysis

Case study I: Uganda Catholic Medical Bureau (UCMB) contribution to the development of the National Policy on Public Private Partnership in Health (PPPH)

1. Background

Together with the other faith-based umbrella organizations operating in Uganda – the Ugandan Protestant Medical Bureau (UPMB) and the Uganda Muslim Medical Bureau (UMMB), UCMB and its counterparts oversee more than 500 hospitals, health centres, and other clinics, thus providing nearly half of the nation Private Not-for Profit Health Service Facilities in the country. Established in 1979, UCMB and UPMB operate the Joint Medical Store (JMS) which is a strong alternative to the National Medical Stores.

The Government of Uganda has been providing support to the Catholic and Protestant health facilities but for a long time with no formal arrangement in place. The relationship between government and the faith-based bureaus was revitalized when the Ministry of Health Partnership Platform was formed in 2000 under the Health Sector-Wide Approach. The development of the PPPH policy started in 2001 after the realization that the PNFP health facilities were no longer able to serve people in the way they used to do before. In 2011, an Agreement (Compact) has been signed between the Government of Uganda and its Health Sector partners including Development Partners, Not-for-Profit, Profit and (International) Civil Society Organisations for the implementation and monitoring of the Health Sector Strategic Plan III 2011-2015.

Nevertheless, the faith-based PNFP medical facilities are experiencing financial challenges including a decline in Government funding for their health facilities which led to the initiation of collaboration with local governments in some districts. Although a National agreement was reached with the Government of Uganda to provide delegated funds including the Primary Health Care (PHC) Conditional Grant and Drug and Laboratory Credit Lines to 24 faith-based medical facilities, there was no formal agreement with the Government of Uganda for their collaboration with the Private Not-for Profit organisations. In this context UCMB initiated the process of having a formal relationship with government which led to the Ministry of Health (MoH) setting up a committee to work on the policy with UCMB, UPMB and later, the Uganda Muslim Medical Bureau (UMMB). As the lead agencies of the Private-Not-For-Profit (PNFP) institutions, UCMB and UPMB have are members of the Health Policy Commission (HPC) and later the Health Policy Advisory Committee (HPAC).

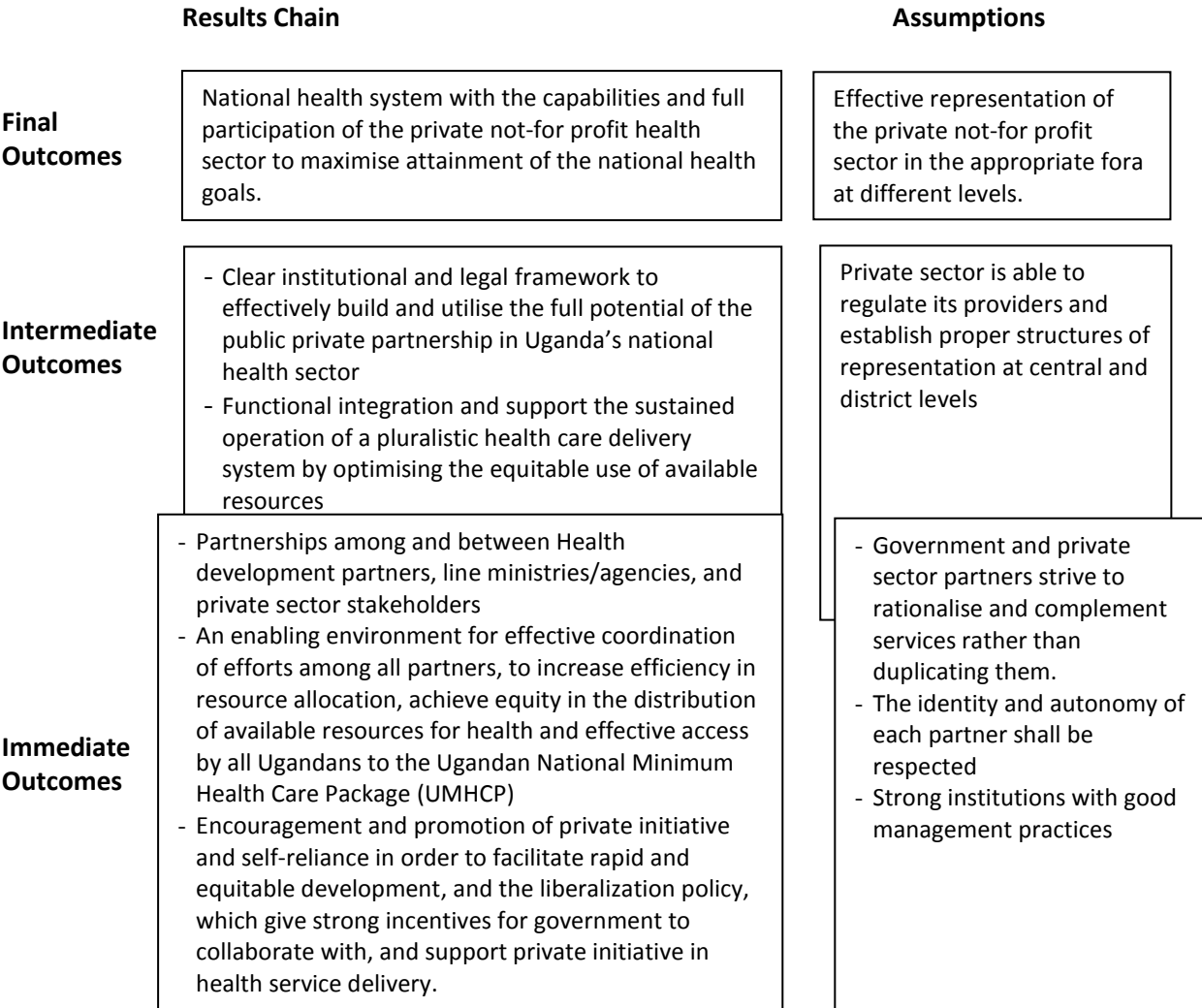
One of the important activities of UCMB within the context of the National Health System is to engage with the Ministry of Health to maintain a policy dialogue, promote joint planning, implementation and monitoring of the HSSP III. As a member of 80% of the Ministry of Health Technical Working Groups and forums, UCMB is an active advocate and lobbyist on behalf of the network of Catholic health facilities in Uganda. UCMB lobbies for funding from government for their health services in accordance to the government policies with respect to funding of Private Not-for Profit (PNFP) health facilities. One example is the lobby for the renewal of the funding (Credit lines) for medicines and medical supplies through Joint Medical Stores (JMS). During the development of the PPPH, UCMB spearheaded the development of the guidelines for the Private-Not-For-Profit (PNFP) Health Facilities which include recognition of the career progress of health workers of PNFP Health Facilities by government and not establishing a similar Health Facility within the vicinity of a PNFP Health Facility.

At district level UCMB has taken initiatives to encourage and support health facilities and diocesan offices to engage in lobbying. Different dioceses are involved in the organizing health assemblies as advocacy events. Several hospitals organized hospital open days mainly to interface with the communities they serve. Political and Civic leaders from all districts in the respective dioceses are invited. In some instances high-level government Ministers are attending. Through the improved engagement with various stakeholders Diocesan Health Offices now directly approach the Ministry of Health on some specific issues regarding support to the PNFP facilities in their district.

In 2001, the Committee came up with a Draft White Paper for Cabinet which led to the Medical Bureaus being part of the various government frameworks including the 1st Health Sector Strategic Plan. However, there was a 2-year delay in signing the White Paper which led to the formation of an Advocacy Committee which engaged with the Ministry of Health on the important of having a framework to guide the partnership that already existed between the MoH and the PNFPs. However, the political leadership in the MoH insisted on having a partnership policy which caters for both the Private Health Practitioners (PHPs) and the Traditional and Complementary Medicine Practitioners (TCMPs) which led to having the two sub-sectors’ stakeholders in the development of the PPPH policy.

The PPPH policy provides a general policy framework for partnership with the private health sector as whole which is the foundation for further development of specific areas of partnership and strategies to make the best use of available resources and utilize the full potential of the three sub-sectors: the PNFP providers (both faith and non-faith based), the PHPs and the TCMPs. The policy also defines the framework for partnership, the rationale, guiding principles, goal and objectives of the partnership and presents the areas and strategies of partnership implementation for each sub-sector, which will be further developed in the Implementation Guidelines by each sub-sector.

2. Theory of Change



Outputs

- Capacity building needs fully and effectively addressed
- District and Health Sub-District (HSD) management teams supported in line with the decentralized policies and arrangements
- Community level effectively reached with essential health services
- Access, quality and financing especially for the most vulnerable groups of the population
- Geographical access and adequate human resources and infrastructure
- Addressing economic, social, cultural, and gender issues that create barriers to accessing services
- Government and private sector partners coordinate and rationalize public and private sector programs and inputs
- Private sector providers strive to offer quality services following the minimum quality standards set by the Ministry of Health and the Uganda National Minimum Health Care Package (UNMHCP)
- Private sector providers contribute to sustainability by maintaining complementary networks of facilities and services that can withstand social, political and economic shocks that may adversely affect the public sector.

- Private sector institutions mobilise communities, demand accountability, and impart skills that empower communities to access their rights to services and to fulfil their role in managing and supporting these services.
- District authorities are empowered to delegate the responsibility for provision and management of health services to the private sector as by the Health Sector Strategic Plan (HSSP) and the HSD concept

3. Results

Through the Joint Review Commission (JRC) which facilitates dialogue between government and the private health sector partners, discussions to formalize the subsidy the government gives to the PNFP facilities were initiated. UCMB initiated the development of the PPPH policy so as to formalize the support the PNFP facilities receive from government, what government needs from the PNFP facilities and what the PNFP facilities need from government.

Comprehensive PPP Health Policy developed

In 2012 a National Public Private Partnership in the Health Sector has been finalized and adopted. The detailed policy stipulates the way the Government of Uganda and the different private sub-sectors in the Health Sector will collaborate. The policy has been prepared by members of the Technical Working Group on Public Private Partnership in Health under the guidance of a Steering Committee. The policy is meant to guide this process with the aim to strengthening the national health system and provide the highest possible level of health services. The policy stipulates the background of each sub-sector and the specific framework for partnership, defining rationale,

guiding principles, goal and objectives of the partnership for the sub-sector (*source: PPPH National Policy*).

Enhanced collaboration and coordination

Those who were interviewed for the evaluation also noted that the PPPH policy has led to collaboration between the PNFPs, private sector, CSOs and the MoH. Beginning this year (2014), the MoH has started giving Primary Health Care (PHC) grants to lower level health facilities and is also providing drugs for severe malaria treatment through the Uganda Joint Medical Stores. There has also been trainings in diarrhea management for the lower level health facilities. The MoH is also involving the Bureaus in their trainings which was not the case before. Those interviewed for the evaluation noted that UCMB did not only make a contribution to the sections for the PNFP partners but made substantial contribution to the sections for the other sub-sectors as well and also had consultations with different stakeholders including government officials and the PHPs.

Policy-makers to better understand the Private Health Service Providers

The development of the PPPH policy was noted to have energized the thinking about the public private partnership with government getting to learn how the PHPs function. As a result of the partnership developed, with the backing of the MoH, the World Bank is providing funding for the PHPs. The PPPH policy has, therefore, resulted into government and the PHPs establishing partnership on the basis of improved knowledge of PHP operations and functioning. Those who were interviewed for the evaluation noted that UCMB made sure that the lobbying process involved political leaders who make decisions regarding the enactment of the various policies thus being able to have the policy on cabinet agenda.

PPPH Desk established

The development of the PPPH policy also led to the establishment of the PPPH Desk at the MoH which is acting as a secretariat of the PPPH TWG and the Sub-Groups and is responsible for: advocating and facilitating partnership at different levels; liaising with private sector partners, collecting and disseminating information; and facilitating operations research into specific PPPH issues. With the development of the Implementation Guidelines for the different sub-sectors, the policy will be operationalized. As a result of UCMB leading the process of developing the PPPH policy, it has been co-opted on various MoH committees and working groups including the Health Policy Advisory Committee (HPAC), the Advisory Board on Health and the National Health Assembly through which it is providing input in various government programmes hence playing an important role in the health sector in the country.

4. Contribution Analysis

UCMB expertise and leadership

Those who were interviewed for the evaluation noted that each sub-sector drafted the relevant section with UCMB leading the process of drafting the section for the PNFP providers. It was also noted that UCMB had better skills in policy development than other stakeholders in this sub-sector and contributed over 80% of the ideas in the section as other Bureaus were usually under-represented in the meetings of the Technical Working Group (TWG) that was formed to develop the policy. The other Bureaus were also weaker in skills compared to UCMB as both the Moslem and Orthodox Bureaus were new and therefore, not able to make substantial contributions. To be able to understand how UCMB needed to contribute to the development of the policy, visits were organized for its staff to other African countries including Ethiopia, Malawi and Ghana which gave them insight of how other countries' PPPH policies were developed and are operationalized. As a result, UCMB was well informed about the process and also used the information from its health facilities to engage with the MoH in the development of the policy. Through the HMIS data submitted to the MoH and the Patient Satisfaction Surveys done by UCMB, the MoH gets informed

about how the PNFPs are functioning. The PPPH policy has, therefore, resulted into more clarity of the contribution that the PNFP Providers are making to the health sector.

Stakeholder involvement

While the process of developing policies guiding government operations and partnerships is the responsibility of government, the development of the PPPH policy involved many stakeholders including the PHPs such as the Uganda National Private Medical Practitioners and the Uganda Private Midwives Association; the PNFP Providers (both faith and non-faith based), and the TCMPs including the Traditional Herbalists and Traditional Birth Attendants (TBAs) which formed Sub-Working Groups which gave input in the relevant sections in the policy. The traditional medical agencies were involved in the process of developing the policy despite the fact that their operations are not guided by any legal framework. As a result, they did not have formal representation which led to their instability in the TWG leading to delays in getting their sections in the policy finalized which delayed the finalisation of the policy.

The process of developing the PPPH policy also involved stakeholders at the district level. Those who were interviewed for the evaluation noted that given the fact that UCMB is a strong and well established institution, it played a critical role from the very beginning when the development of the policy was started by attending all TWG meetings thus ensuring that issues relevant to PNFP Providers were effectively addressed in the policy. UCMB also ensured that staff in UCMB's health facilities in the various districts participated in the consultations that were done at district level. It was further noted that since UCMB has a national representation, it took the lead in the discussions with the MoH. UCMB was also credited for consistently following the process and representing the other Medical Bureaus (the Protestant and Muslim Bureaus) in various discussions with government. It was also noted by those who were interviewed for the evaluation that UCMB attended all the TWG meetings and took the lead in the development of the section for the PNFPs in the policy and advocated for the policy in other forums and in the Network. They noted that without UCMB, the policy would not have been developed.

As a result, the policy developed has good guidelines and has helped to operationalize what is being done. However, having the different stakeholders involved in the process of developing the policy delayed the policy development process as different stakeholders had different ideas. There was also a challenge as the objectives of the policy were not very clear for the PHPs and the TCMPs. As a result, they could not easily define the mutual benefits leading to delays in getting their sections in the policy finalised.

Political will

Both the National Health Policy (NHP) I° (1999), and the NHP II° (2010) acknowledge the role of the private sector in health and the need of a National Policy to provide a legal framework for linkage of the public and private sectors with the establishment of a functional integration between the public and private sectors, in health care delivery, training and research being considered as an important strategy for strengthening health systems. The Health Sector Strategic and Investment Plan (HSSIP III) recognizes that effective provision of the Uganda National Minimum Health Care Package (UNMHCP) is not only the responsibility of the MoH and that the partnership with the private sector is a critical determinant of the successful implementation of the Plan. It stresses the urgency for government to strengthen partnerships with all stakeholders and strengthen the policy and legal environment, conducive for PPPH, in order to achieve the set objectives.

Role of the Ministry of Health

The policy was developed from 2001 and was almost ready in 2004 but for almost 5 years, there was no progress in getting it approved by Cabinet. The process of developing the policy was delayed

largely due to lack of commitment by the Ministry which from 2005 to 2010 had various challenges relating to accountability which led to slow progress in developing policies. In addition, the MoH is developing many policies, including the Malaria and Maternal Care policies which led to the delay in getting the PPPH policy finalized and enacted by Cabinet. As prime responsible of the policy-making process the role of the MoH was paramount to enact such a policy recognizing the importance of the private sector in the provision of services and get the partnership formalized. When the process was resumed in 2010, it took another two years of consultations before the PPPH policy finally was finalized and adopted. It was published in 2012.

Case Study II: Health Systems Strengthening through ICT for Uganda Catholic Medical Bureau Health Facilities

1. Background

The UCMB Health facilities of hospitals and Lower Lever Units (LLU) are generating a lot of data on a daily basis from patients which needs to be recorded, analyzed and reported. Before the ICT project, data collection in the UCMB health facilities was being done manually using paper based registers. For doctors and other staff this made later reference to the records very cumbersome. There was duplication of records because each time a patient visited a health facility, a new set of information was recorded irrespective of the previous visits. The manual process of handling data therefore compromised the accuracy of the health facilities' data. In addition, many times, patients lost their medical forms leading to staff having to search heaps of records physically which increased the time patients spent at the facility. Tracking the patient's history was, therefore, complicated yet health workers always have to refer to the patients' history as failure to get accurate patient history poses a risk of misdiagnosing and administration of wrong medicines therefore.

In terms of Health Management Information (HMI), UCMB was providing feedback to facilities and other stakeholders on the HMI through web based applications but the process of capturing it in the registers on a daily basis and later summarizing and transferring it to excel sheets was tedious, time consuming and compromised the accuracy of the data. This problem was aggravated by lack of enough computers and a reliable internet connectivity which affected accessibility and use of this information in monitoring performance indicators for decision making purposes.

Timely access to a complete and accurate Health Management Information System (HMIS) data by managers is crucial in health service delivery including in drug management, defective drug recall by suppliers and epidemic surveillance reports. Access to complete and accurate information therefore, leads to health workers making better treatment decisions; hospitals providing higher quality and safer care; governments becoming more responsive to health needs; information systems supporting the development of effective, efficient and equitable health systems; policymakers and the public becoming more aware of health risks; and individuals having better access to the information and knowledge they need to make informed choices for their own better health.

However, capacity and ICT skills were a very big challenge for the UCMB health facilities. The fact that these facilities are dependent on information on performance indicators for patient care, decision making for the facility and feeds into the health monitoring systems at the district, Diocesan Health Office, UCMB and at the national level, makes information management and communication processes crucial. As a result, support to Health Systems strengthening through access to relevant information and sharing of knowledge and skills through ICT is one of the core functions of UCMB.

With funding from CORDAID, under the Communicate for Change (C4C) Consortium, UCMB is implementing a project to strengthen its health system using ICTs. The C4C project provided infrastructure such as Local Area Network, computers, modems/servers, audio devices for video and Tele-conferencing services, an Electronic Patients Management System and a web based HMIS for facilitating timely reporting.

2. Theory of Change

	Results Chain	Assumptions
Final Outcomes	Access to equitable, quality and efficient health services	Accurate and sufficient information is generated by the health facilities
Intermediate Outcomes	<ul style="list-style-type: none"> · Faster decision making · Improved planning · Improved governance and management (stewardship) · Improved monitoring and evaluation · Improved knowledge and skills sharing 	<ul style="list-style-type: none"> · Phobia of technology by some management staff will be addressed · Skills building in ICT will motivate staff
Immediate Outcomes	<ul style="list-style-type: none"> · Complete, timely, accurate, relevant and easily accessible information · Effective data management · Web enabled HMIS system · Skills development · Knowledge and resource sharing 	<ul style="list-style-type: none"> · All health workers and facility managers trained in ICT effectively use the skills · Power black-outs decrease
Outputs	<ul style="list-style-type: none"> · Number of patients reached by ICT · Health staff trained in ICT · Health facilities/care outreach program with improved datasystem · Health indicators computerised 	<ul style="list-style-type: none"> - No delays in financial support and acquisition of necessary infrastructure - No misuse of project facilities including computers and internet - Stakeholders participate actively in C4C partner network

3. Relevance and Results

The ICT project targeted health systems strengthening in the UCMB network and, as mentioned above, provided equipment (computers, modems, local area network and audio devices) and training in basic use of computers and in use of web-based applications for patient data management and reporting. The project was aimed at facilitating access to relevant timely information and sharing of knowledge and skills through continuous education and technical support. To be able to deliver quality healthcare, there was need for accurate and timely information to support decision making by facilitating fast data collection and quick access to collected data by developing a web based tool HMIS data collection tool and having access to online medical information and to patient satisfaction data/analysis to support decision making.

ICT Capacity Development

At the health facility level, the ICT project started with strengthening human resources through training for the systems administrators. The ICT project enabled the staff of the UCMB health facilities to have ICT skills by training trainers who in turn trained the staff in the various health facilities that benefited from the project. A total of 450 staff were trained in basic computer skills in 2012 and 2013. As a result, UCMB has spearheaded the process of collecting data in the health sector for planning purposes.

“UCMB was recognized by the Ministry of Health for improving information sharing in the Health Sector and was, as a result co-opted on the Ministry’s e-Health Technical Committee”.

*Mr Jenard Ntacyotugira,
Assistant ICT Project Coordinator*

UCMB developed ICT Training materials for tutorials (computer operations, MS office, internet use, emails). These were used for the training of Lower Level Units (LLUs) staff and were distributed for future reference. Furthermore, the ICT C4C project made it possible to purchase and distribute ICT equipment: Five hospitals implementing EPRMS received 7 computers while 125 Laptops were distributed to LLU and Diocesan Health offices. Local Area Network (LAN) installation for EPRMS has been realized in five hospitals (*source: UCMB Annual report 2013*).

ICT system operational

The project assured the provision of adequate ICT equipment and internet connectivity and training for clinical staff including on the Care2x software followed by technical support to ensure that the system works. As a result of this project, the beneficiary health facilities are using ICT in the Out-Patient Department (OPD), laboratory and pharmacy and for billing which they have done in phases. Those who were interviewed for the evaluation noted that it is now easy to track the patients and to ensure that they go to all the required departments such the laboratory to get the tests that they need to be done since they are captured in the system.

Improved efficiency through computerized systems

UCMB compiles the report for the Private Not For Profit (PNFP) health facilities which includes the Uganda Protestant and Muslim Bureaus which are yet to computerize their health facilities for submission to the Ministry of Health (MoH). With 60% of the lower level units of UCMB being able to collect data, UCMB is compliant with the MoH reporting requirements. In addition, the reporting system which includes basic record keeping, communication and use of the same EPRS for patient record keeping, enables the verification and validation of the data that is kept. As a result, even when there was a ban on e-Health in 2012, UCMB was given the go-ahead by the Ministry of Health (MoH) to use the Electronic Patient Record Management System (EPRMS). The ICT project has, therefore, enabled the UCMB health facilities to generate and submit reports promptly to UCMB and subsequently, to the MoH and has also enabled UCMB to highlight the contribution it is making to Uganda’s health sector. Those who were interviewed for the evaluation confirmed that monthly reports are produced for the clinical departments while user rights help in ensuring that only those who are supposed to use the data are able to access it. The evaluation team was informed that the results generated by the health facilities are not only satisfactory to the Diocesan Health Offices, they are also satisfactory to the District Medical Offices of Local Governments.

There is an increase in OPD attendance in the UCM health facilities since, due to the EPRMS, no step in the OPD processes is skipped as patients can no longer skip the clinician, laboratory or pharmacy leading to better treatment and recovery. There has also been an improvement in billing. In addition, with the guidance given on-line by the Diocesan Health Coordinators, some health facilities have been able to write proposals which they were not able to do before the ICT project was in place. For example, one health facility developed a proposal and got an ambulance.

UCMB has piloted electronic Patient Satisfaction Survey (PSS) in two Dioceses (Fort Portal and Lugazi), which will improve the process of patient satisfaction survey and promote timely analysis and feedback to the Health Facility managers. The PSS tool has been revized to make it more relevant.

Patient monitoring improved

The ICT project and the training that was done for the health facilities' staff was aimed at enabling them to come up with data that can be monitored using indicators such as changes in OPD attendance and user fee collection. It was also aimed at enabling staff to enter hospital data into the electronic data bases and prepare and conduct Continuous Medical Education (CME) sessions on their own without being supported by the ICT staff as well as being able to use internet for both hospital work such as sending reports and retrieving mails. As a result, staff in departments that have not yet been computerized are demanding for computers to be able to have EPRMS and internet in their departments, a sign that they realize the benefits of having ICT in their departments.

More efficient training and communication through ICT

The ICT project has also enabled UCMB to conduct trainings cheaply online as well as using video and the teleconferencing facilities. UCMB and the health facilities also used to hire a projector for making presentations during trainings but are no longer doing. The ICT project has, therefore, enabled UCMB and its network to conduct trainings at a cheaper cost. Those who were interviewed for the evaluation noted that the trainings have motivated staff since they do not have to pay for the trainings they have had. The staff of UCMB and its network are also interacting more through email communication and exchange documents which was not the case before the ICT project was put in place.

The ICT project has also enabled UCMB and its network to communicate both internally and externally at low cost and to create awareness on the activities of the various health facilities. As a result, various development partners including UNICEF would like to partner with UCMB on Performance Based Financing (PBF) while CUAMM (Doctors with Africa) has provided co-funding for some interventions such as training and for purchase of extra solar panels and batteries in Aber Hospital to enable the hospital to effectively operate the EPRMS.

Patient Satisfaction monitoring

The health facilities' staff are also able to carry out research which informs decision making and also improves their skills through Continuous Medical Education (CME). Those interviewed for the evaluation noted that during the CME sessions held in the health facilities every Friday morning, staff who make presentations do give researched information which would not have been possible if the ICT project was not in place. The ICT project has also enabled the health facilities to effectively carry out annual Patient Satisfaction Surveys which inform management decisions. The surveys focus on both clinical and environmental issues including cleanliness and whether the patient is willing to recommend a close relative to go to the health facility for treatment. In addition, using the facilities provided by the project, the health facilities are able to carry out sensitization for patients by showing them videos on health issues.

Outstanding issues

Due to lack of resources, not all departments in hospitals have been computerized. OPD, pharmacy and laboratory have been computerized in all health facilities whereas In-Patient and Maternity Wards as well as HIV and antenatal clinics have not yet been computerized in most health facilities. There is, therefore, the need to further mobilise additional financial resources to enable them to get the required computer and training to computerize the whole health facilities. There is also need to have sustainability plans so as to replace any equipment that needs replacement. Currently, not all

staff in the health facilities are computer literate. There is need to train all staff so as to ensure sustainability in terms of staffing.

4. Contribution Analysis

A comprehensive strategy

The ICT project has effectively addressed the need for complete, timely, accurate, relevant and easily accessible information and effective data management. It has led to the existence of a web-enabled HMIS system and has also built staff capacity in ICT which has led to knowledge sharing. However, there are various challenges that are being experienced which need to be addressed if the final outcome of access to equitable, quality and efficient health services is to be attained.

Articulation with national HMIS

The Ministry of Health developed an HMIS tool for e-health. However, data demand by the development partners in the Health Sector through the Ministry of Health has led to the HMIS tool being continuously updated. This means that UCMB's ICT systems that feed information to national systems have to be continuously adjusted. An e-health Society was formed by some health workers in 2010 with the mission of advocating, popularizing the use of ICT for improving the health and quality of people of Uganda. The e-Health Society which is registered as an NGO, is however not active despite the important role that it is designed to play in promoting e-health. As noted, UCMB has pioneered e-health in the PNFP health facilities as both the Protestant and Muslim Bureaus are yet to computerize their health facilities. Despite the feeding-in issues, UCMB has contributed substantially to the further development of the national e-health system thinking and implementation.

National statistics

Information provided by UCMB is used by government for decision making as the MoH does not have up-to-date data. For example, while the MoH website shows that UCMB has 4,258 health workers, it shows that government has only 3,661 health workers, which is an indication that the MoH does not have correct data for its health facilities as this number is an underestimate. As a result, UCMB has become a reference point for the national level which has attracted the attention of the MoH.

Challenges in project implementation

However, the ICT project created additional demands with some staff including doctors and nurses initially resisting computerization, which meant that ICT adoption in the health facilities was not as fast as was planned. There were also delays in signing agreements with CORDAID and release of funds therefore, which led to delays in project implementation. The Uganda Catholic Secretariat also came up with new procurement procedures which led to delays in the purchase of the ICT equipment.

There were also challenges related to the reporting requirements as the indicators that were developed by Connect for Change (C4C) for reporting did not take into account the community based interventions.

Moreover, the fine-tuning of the ICT systems and the specific requirements and data availability to be managed took a lot of effort. For instance, the EPRMS tool included modules like pharmacy and billing which were different in terms of the requirements and thus had to be rewritten from scratch. The demand/ needs in patient records was more than what was planned for. As a result, customization was needed in pharmacy and antenatal records. In addition, the information that could be retrieved did not match the MoH requirements; and the Anti-Retroviral Therapy (ART) Clinic needed separate entry into the records system.

High turnover of staff

While the majority of staff who have been working in the health facilities for many years did not have ICT skills, they are now able to use ICT following the training they had. However, the very high staff turnover affects project implementation. Due to lack of standard pay scales for health workers nationally, there is instability in the workforce within the UCMB network and other PNFP health facilities with staff leaving for both public facilities or private enterprises.

Other implementation issues

There is also a challenge relating to software purchase as suppliers marketing their software confuse facility managers on appropriate ICT tools to use. As a result, some health facilities end up having ICT tools that are not suitable for the EPRMS. Load shedding too, which is common especially in rural areas affects electronic record keeping. As a result, the health facilities need to have back-up systems (generator or solar) which are costly and with the prices for electricity and fuel being increased regularly by the electricity company and government respectively, the health facilities have increased operational costs. There are also challenges relating to internet connection in some parts of the country. There have been several incidences of the ICT equipment being struck by lightning thus needing replacement. In addition, the existence of bad roads in some parts of the country, which are inaccessible during the rainy season affects activity schedules.

Local Area Network

The health facilities have more than one building which makes the establishment of the Local Area Network (LAN) very expensive compared to if they were located in one building. In some cases such as the Aber Hospital in Oyam District, they have been able to purchase equipment for connecting the different buildings to the LAN but other health facilities have not yet been able to do so.

5.3 Relevance of Results

The contribution analysis presented above shows the UCMB has been quite successful in both Policy Advocacy as well as Civil Society Strengthening.

Policy Advocacy

1. UCMB has been able to promote the interests of the Private Not-for-Profit Health facilities in its negotiations with the Ministry of Health and has significantly contributed to the realization of an overall agreement between non-state actors and the Government of Uganda. UCMB has played a lead role on behalf of the three other Medical bureaus and through its consistent and professional approach been able to finalize a long standing negotiation with the Ministry of Health.

2. As has been testified by various stakeholders, UCMB has the necessary skills in policy development necessary for advocacy and lobbying. Developing policies requires a lot of consultations not only at national but at district level as well. The first draft of the PPPH policy was discussed at district level which led to the policy being improved by the contributions.

3. Currently, there is a focal person for the PPPH policy in the MoH as a result of the lobbying work but there is need to create a Unit that can work with the various stakeholders. UCMB has been quite instrumental in supporting the collaboration between different stakeholders of each sub-sector to enable the MoH to take the leadership that it is supposed to take in policy formulation. Also UCMB has made a substantial effort to learn from experiences in other African countries in order to be able to bring this to the forefront during the policy-formulation process.

4. The PPPH policy has energized the thinking about partnership between the different stakeholders in the health sector. UCMB has played a pivotal role in the facilitation of these collaboration efforts. It has led to various partnerships and to formal institutional arrangements between the different stakeholders in the health sector. There is also now collaboration between government and the private sector which was not the case before. The Joint Medical Store is another example.

5. Policy Development needs the commitment of all stakeholders as it takes a long time. There is also need for the different stakeholders to understand the policy making process, to exploit any window of opportunity and not to be discouraged. The PPPH policy was developed with the input of all stakeholders but it is not easy to implement as there are challenges relating to getting the TWG and the various committees both at national and local government levels to meet. However, under the leadership of UCMB, the implementation guidelines for the PNFP stakeholders are ready while those for the PHPs and the TCMPs are not yet ready.

Strengthening of Private Not-for-Profit Health Facilities through ICT

1. UCMB in close collaboration with the C4C partners has been instrumental in setting-up and improving digitized Health Management Information Systems and web-based communication (a.o. teleconferencing) in the Catholic Health facilities. The development of an Electronic Patient Records Management Systems (EPRMS) has proven to be a major improvement of the handling of patient data and increased the efficiency of many health facilities.

2. Improved data management has contributed to a better planning, monitoring and evaluation because of the availability of more timely, accurate, relevant and easily accessible information. This is in particular the case for the improved monitoring of patient dossiers and making the information available to the Ministry of Health. Without the C4 ICT project data management in many health facilities would still be a headache.

3. However, the introduction of ICT-based HMIS systems did not come without its challenges despite the fact that the health facilities that were taken on for the pilot phase, were those with the best systems. The change from using paper reporting to ICT based reporting was more challenging than was anticipated.

4. In addition to the challenges related to the different tools including the EPRMS tool, starting the computerization process was not easy as it needed a lot of sensitization of both management and staff of the health facilities. Ample time needed to be given to training of staff before starting the computerization process. As a result, there was need to have the computerization process done in phases.

5. Given the high staff turnover, UCMB changed strategy and trained more staff in each beneficiary health facility rather than training one or two staff centrally. However, the project created demand for technical support on HMIS computer use resulting into UCMB staff having to make regular visits to the health facilities to provide technical support. For the computerization process to succeed, there is need to look at the organization in a holistic manner thus involving all decision makers in the organization in the computerization process.

6. Discussion

- ***Design***

The design of the two projects by Cordaid and C4C are very suitable for UCMB. The core funding makes it possible for UCMB to implement its strategic and operational plans and be flexible during the implementation period according to internal and external preferences and changes. The core funding also provides continuity to the organisation whereas it may cater for other more project oriented funding without jeopardizing the sustainability of the organisation.

The C4C ICT project serves a different purpose, one of strengthening the health facilities through the use of ICT technology. Overall, the project has been designed in a flexible way making it possible to respond to practical issues which emerged during implementation and by making use of expertise available both in Uganda and internationally.

- **Future funding**

Future funding for UCMB is certainly recommended in particular core funding of the Strategic Plan. However, core funding by Cordaid should not exceed about 25-30% of total institutional funding (so with the exception of PEPFAR funding) in order to avoid dependency on one donor. Project funding – such as C4C ICT - should be complementary and time-bound with a clear objective to strengthen the Catholic health facility network.

- **Recommended changes in project design**

None

- **Improvement of impact evaluation**

It was a pity that the Patient Satisfaction Survey results were not available for the MFS II evaluation. It would have been interesting to analyze trends in satisfaction over a longer period of time (e.g. five years) in order to be able to assess changes over time.

Secondly, given the staff turnover of health facility staff a similar Survey could have been set-up to analyze changes in staff satisfaction and opinions about their operations and the functioning of the Catholic health facilities.

- **Causal mechanisms**

As an umbrella organisation UCMB has been able liaise with their member organisations – i.e. the 280+ health facilities – and represent and defend the interests of these facilities at district and national level. This is done on the basis of their excellent connections with policy-makers as well as the national and international networks of which UCMB is a member. They are thus able to translate local interests to the policy arena on the basis of evidence and close knowledge of what main concern and requirements exist in the health facilities. Their strategic and operational plans reflect these main concerns both at the level of social engagement as well as political engagement.

7. Conclusion

Changes in Civil Society Strengthening 2012-2014 for UCMB

With respect to the changes in Civil Society Strengthening according to the Civil Society Index framework and the indicators used in the baseline in 2012 and the endline in 2014 the following conclusions can be drawn in the case of the UCMB support:

1. With respect to Dimension 1 (Civic Engagement) we have not observed significant changes: UCMB social engagement has not changed much as they have continued operating on the basis of their strategic plan 2012-16 and their operational plan 2012-14 as before. Also with respect to UCMB's political engagement there have not been major changes: UCMB carries out central advocacy for

Catholic Health services especially for resources and on policy formulation and policy-related matters. The strategic choices as set out in the strategic and operational plans have proven to be well vested in the network of Catholic health facilities and based upon their interest.

2. With respect to Dimension 2 (Level of Organisation) UCMB has made major steps forward. It has been able to increase and intensify their national and international networks and has played a lead role on many occasions (Indicator 2.1). It has improved its communication towards the outside world by upgrading its website and by making use of social media (indicator 2.2). UCMB has achieved a major success by keeping their funding at the required level, diversify its sources of funding, by reducing the dependency of Cordaid/ C4C as their main donor and to increase and improve staff levels.

3. With respect ot Dimension 3 (Practice of Values) there has been relatively few developments (no change of Indicators 3.1 and 3.2). The main change has been in improving a number of procedural manuals (Indicator 3.3).

4. When it comes to the Perception of Impact (Dimension 4), there has been a very positive development when compared to the baseline in 2014. This has been the case for all three indicators. As decribed above, UCMB has been able to respond to the needs, priorities and requirements of their network of Catholic health facilities (Indicator 4.1), it has contributed to the service and data management improvements of the individual health facilities (Indicator 4.2) and it has played an important role in the lobbying and advocacy towards the Ministry of Health (Indicator 4.3).

Attribution of changes to UCMB

The contribution analysis of the two cases presented in Chapter 5.2 indicates the important and pivotal role of UCMB in the realized changes; both in terms of social engagement by contributing to the enhanced efficiency of service delivery by health facilities as well in terms of political engagement with national and district policy-makers.

Relevance of the changes

The relevance of the changes have been analyzed and presented in the case study of 5.2 and in 5.3.

Explaining factors to identified changes

UCMB has been able to play an important role in their goal to strengthen health service delivery to the population throughout Uganda through improved efficiency in access to information and data management. As indicated in Chapters 5.2 and 5.3 this has mainly been possible through their dedicated ICT project responding to the needs and requirements of individual health centres as well as the piloting of new ICT tools. Also with respect to policy engagement UCMB has pursued its persistant approach of maintaining and expanding good ties with national and lower level policy makers.

Assessment of project design

Statements	Scores
The project was well designed	9
The project was implemented as designed	8
The project reached all its objectives	9
The observed results are attributable to the project interventions	7
The observed results are relevant to the	7

project beneficiaries	
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Scale of Scores: 'Not at all' (1) - 'Completely' (10)

Annexes

- 1. Short description of the MFS II CSS baseline and endline methodology**
- 2. Description and scoring of relative changes CSS 2012-2014**
- 3. List of people interviewed**
- 4. List of documents consulted**

Annex 1: Methodology applied

Introduction

During the baseline 2012 and the endline 2014 a general methodology has been developed for the Civil Society Strengthening SPO studies in Uganda which has been applied to all SPOs in more or less the same way. This methodology has followed the Civil Society Index methodology with a major focus on the perception of social and political impacts as a result of the activities of the SPO under review. A methodological guide has been developed based on the earlier developed Baseline Methodological Guide and discussions with the Wageningen University CDI studies for Civil Society Strengthening, in particular contribution analysis (*see Methodological Guide Endline 2014*). As has been described in the Baseline report, the Uganda study intends to make a comparison of the changes of the five Civil Society Index (CSI) dimensions over the period 2011-2014. In 2012 the Evaluation Framework has been developed on the basis of the Civil Society Strengthening Assessment Framework also known as the CSI as developed by Civicus. The five pillars as prescribed by the MFS II evaluation framework has been elaborated into a set of 25 indicators (excluding the context description). The CSS Evaluation Framework for Uganda has been applied unchanged in both the baseline phase as well as the endline.

In the endline of 2014 the focus has been on the dimensions of Civic Engagement (social engagement and political engagement; dimension I) and the Realised (or perceived) Impact of their social and political engagement (dimension IV). But the scoring and description of relative changes has been done for all 25 indicators including dimensions II (Level of Organisation) and III (Practice of Values).

No monitoring has been undertaken in 2013 as there was no budget available. Furthermore, the period between the baseline and the endline was already relatively short to assess impact.

Endline 2014 SPO selection and reporting

In the baseline 2012, 17 SPOs had been randomly selected from the long list of about 120 SPOs being supported by the Dutch MFS consortia. In addition the 8 SPOs under the 5C study have also been addressed with regard to their Civil Society Strengthening. From the original 17 SPOs under the CSS study, 13 have been retained for the endline study at the start of the endline.

The Criteria which have been used for the selection of the SPOs to be included in the endline were:

- a) Selecting the SPOs that will be part of the process tracing exercise (before fieldwork).
- b) Selecting the specific outcomes that will be analyzed using the process tracing methodology.

From the 13 SPOs retained for the endline, finally 3 organisations have not been included. It appeared to be too complicated and time-consuming to include the two SPOs of the Capacity Building exercise. They could only be included towards the end of the endline exercise as the Uganda CapDev ETC team was still working with these organisations. A third SPO was left out as they did not wish to collaborate during the endline exercise also for reasons of being included in the MDG evaluation. Finally only eight out of ten remaining organisations have been reported upon for the endline 2014 as the lack of data consistency for the two remaining made it impossible to sufficiently address the evaluation questions.

Methods/ techniques

During the baseline 2012 and the endline 2014 the following methods have been used:

1. Before/ after comparison

Upon completion of the 2012 CS baseline study a clear picture of the Civil Society Strengthening efforts by the individual SPOs both in terms of Civil Society engagement as well as lobbying and advocacy (political engagement) had been made. This was realized by taking stock of what was the

situation in 2012 since the start of the individual projects one or two years earlier on the basis of the indicators as formulated for the baseline.

A similar assessment has been made in 2014 during the endline analysis when a description has been made of the changes in the period since the baseline 2012. On the basis of these changes a score has been given for positive/ negative changes or no change at all. The relative changes 2012-2014 have been further analysed to understand what has contributed to these changes in the

2. Case studies

The case studies are described in most of the studies on the basis of the “stories” of the beneficiaries and / or partner organisations as well as representatives of the “lobbying targets”. The 2012 baseline include descriptions of specific cases which have identified and described to illustrate the activities, outputs and outcomes of the SPO in question. In 2014, these cases have been further elaborated to assess the contribution of the SPO to the realization of the achieved outcomes through an contribution analysis.

3. Focus Group Discussions

Focus Group Discussions have been used to interview several stakeholders in order to capture the opinion or meaning of various persons at a time. FGDs have been held in the first place with the staff of the partner organisations in order to address the issue of relative changes 2012-2014 (including timeline analysis) as well as the theory of change which was being applied by the SPO.

Secondly, FGD have been held with groups of the beneficiaries of the SPO in order to assess their opinion on the changes in their organisation and/ or communities.

4. Individual interviews

Both during the 2012 Baseline and the 2014 Endline Individual interviews have been held with selected stakeholders on the basis of the research questions as formulated in the CS research guide. These interviews have been used for the assessment of the relative changes 2012-2014 in the contribution analysis.

5. Timeline analysis

In both the baseline 2012 as well as the endline 2014 and timeline analysis has been done in order to understand the development of the organisation over time in the face of both internal and external developments. The latter timeline analysis has been used to understand better the relative changes, the implementation of concrete activities based on the theory of change as well as to assess the contribution of the SPO to the realization of the intended outcomes.

Sampling of beneficiaries/ informants

During the baseline 2012 and endline 2014 a similar approach to the sampling of beneficiaries and informants has been applied. The sample of the beneficiaries to be interviewed was done by the Ugandan consultants. It was agreed in the Baseline Methodological guide that a wide range of stakeholders would be interviewed, either during the ‘staff analytical workshop’ with the attendance of as many staff member relevant for management, programme implementation and financial management. A similar approach has been used during the endline 2014.

Moreover, focus group interviews were held with beneficiaries at their location, or with responsible staff of beneficiary organisations (eg primary schools teachers, cooperative board members, health workers, extension workers). In a few instances board members have been contacted and interviewed on their role and vision on the organisation. Other stakeholders from government agencies such as local government staff or ministerial staff have been interviewed on an individual basis.

The selection of groups/ individuals to be interviewed was often made on the basis of the availability, relative proximity (most research was done during the rainy season and in regions with very poor transport infrastructure).

Annex 2. Description and scoring of relative changes CSS 2012-2014

Indicator	Assessment (baseline)	Score 0-3	Endline assessment
Dimension 1: Civic Engagement			Overall Relative change Dimension 1: = (no change)
1a – diversity of socially based engagement			Change: =
1. Degree to which the needs of beneficiaries / target groups are included in SPOs analysis, planning and implementation.	UCMB has a strategic plan 2012-16 with an explicit financing strategy. The process of developing the strategic plan is based on an analysis of the external context, past achievements and review of existing documentation; on consultation of staff and other stakeholders, on key informant interviews as well as a strategic planning workshop. This workshop brings together various stakeholders including community representatives and beneficiaries (men and women). Final approval is done by the General Assembly. Lower level Catholic Health Centres are invited to share their interests and issues on the basis of their planning done by a Management Committee which has community representatives who include youth, women, and religious and local leaders.		Although UCMB has a 5 year strategy, it has been reviewed after the first 2 years. Issues arising from the first 2 years feed into the next 3 year plan. The process of developing the 3-year strategic plan follows the same procedure as the 5-year one.
2. Degree of participation of target groups in analysis and planning of SPOs.			
1b – diversity of political engagement			Change: =
3. Number of dialogue platforms with local or national government that SPO is participating in.	UCMB is a member of the highly relevant Ministerial platforms and thematic working groups. The Ministry of Health and other agencies recognise this important role and therefore invite UCMB to give an input in all important decisions regarding health service delivery and health education. The Diocesan Health Offices hold annual Health Assemblies which bring together Members of Parliament, local leaders, District leaders, community representatives and the District Health Offices to discuss issues related to health services in the District. This enables the engagement of the Network partners and local and district leaders on health care issues.		UCMB is representing Uganda’s medical bureaus on various platforms being the Ministries of Health, Public Service, Finance and Planning, and Education and Sports as well as district representatives and development partners. These include the Health Policy Advisory Committee and Technical Working Groups and the Inter-ministerial Standing Committee for Human Resource. UCMB carries out central advocacy for Catholic Health services especially for resources and on policy and policy-related matters. Representation of Catholic Health services in various Policy fora; holds discussions related to resources in the health sector and does joint national planning and M&E with MoH, HDPs etc
4. What is the intensity of involvement in dialogue platforms or sectoral networks?			
Dimension 2: Level of Organisation			Overall Relative change Dimension 2: +4 (very positive)
2a – Organisational level of civil society			Change: +1

Indicator	Assessment (baseline)	Score 0-3	Endline assessment
5. Degree of participation of the SPO (and possibly CFAs) in sectoral networks of civil society organisations.	At the country level, UCMB is a member of the religion-based medical bureaus and the network for pharmaceutical bodies. Internationally, UCMB is a member of the African network of Christian organisations involved in in the area of health. UCMB is a lead organisation in health management and in building the capacity of the members of the African Church Health Association Platform who learn from UCMB's experience.		UCMB is a link between Catholic Health Services in Uganda and other players in health at national and international level – partnerships, platforms, Associations, etc. UCMB is representing Southern Civil Society in the International Society Consultative Group for IHP+ housed by WHO Geneva and supported by the World Bank. The network focuses on planning, policies, implementation, resource mobilisation and sharing on health matters. UCMB is now on the Board of the African Christian Health Association Platform and is a member of the human resources for health technical working groups.
6. Nature of the relationship between the SPO (and possibly CFAs) and sectoral networks/umbrella organisations in the MDG/theme.			
2b – Dialogue and communication			Change: +1
7. Degree to which a shared analysis of situation in society exists	UCMB shares information with the members of the above networks and with the various government working groups to which it is a member. UCMB represents health care givers in the various platforms of the Ministry of Health. UCMB produces 1,500 copies of the newsletter (UCMB Bulletin) and an annual report. UCMB has a outdated website: www.ucmb.co.ug with 45,713 hits as at 7 th September. 2012 (since in 2009).		The website is being upgraded to be compliant with portable devices such as phones and will have articles from the various units of UCMB. It will also be on social media. Though in some instances web-pages are still empty, e.g. on projects. Annual reports for 2012 and 2013 are comprehensive and available to download.
8. Degree of joint activity as a result of joint analysis			
9. Mode, nature and quality of dialogue / communication			
2c – financial and human resources			Change: +2
10. Composition of current financial resource base of SPO	In 2009, the share of MSF funding of international donor funding was 78%. It went down to 66% in 2010 but rose again to 79% in 2011 due to the contribution of 26% to the ICT Enhancement Project. UCMB was able to raise 28% in 2009, 29% in 2010 and 21% in 2011 of its overall income from local sources. UCMB has 11 staff members including support staff. Most have qualifications at MSc, BA or diploma levels. The Human Resource function of the Bureau is autonomous and staff is carefully selected which leads to high staff retention. Despite it national mandate it remains a relatively small organisation in terms of the number of staff.		While the funding for the HIV/AIDS (PEPFAR) comprises 80% of UCMB's total funding, Cordaid provides core funding for the institutional support. This funding plays a key role in strengthening the health system of the network. In 2013, total Cordaid institutional (i.e. non-PEPFAR) support was 24% with 19% being for the C4C ICT Enhancement Project. Local resources were 12% in 2013. Overall this implies a reduction of dependency on one donor (Cordaid/ C4C). To a good extent diversification of donors is taking place, e.g. Mildmay and TB Reach funding. UCMB has a total of 27 staff. The position of Assistant Executive Secretary was filled in August 2013. Two staff passed on while the organisation has recruited 10 staff in 2012 and is in the process to recruit 3 more staff to coordinate new projects supported by the Strengthening Decentralisation System (SDS) project and Christian Relief Services (CRS). Due to lack of resources, the position of Finance Management Advisor is not yet filled. Horizont 3000, an Austrian organisation is in the process of recruiting a volunteer to fill the post.
11. Degree of dependency of external funding			
12. Human resources management by the SPO			

Indicator	Assessment (baseline)	Score 0-3	Endline assessment
Dimension 3: Practice of Values			Overall Relative change Dimension 3: +1 (positive)
3.a - Internal Governance			Change: =
13. Degree to which organisational structures are involved in strategic management of the SPO	The Health Commission of the Uganda Episcopal Conference is the policy and oversight body of the UCMB. The Health Commission which meets twice a year is chaired by a Bishop with representatives of diocesan and hospital boards, hospital managers and training institutions The Health Commission has five supervisory Committees. UCMB has an Annual General Assembly which brings together representatives of hospitals, health units, health training schools, diocesan health departments and the health commission. Staff meetings are held once a month to review performance for the previous month and plan for the following month, apparently with a very open communication style which enables staff to regularly share and consult management on the various issues concerning their work.		UCMB has a new Health Commission under the auspices of the Uganda Catholic Secretariat which meets quarterly to review the activities of UCMB and other departments of the Uganda Catholic Secretariat. The management of the various departments of the Uganda Catholic Secretariat (including UCMB) meet every Monday to review the operations of the various departments operating under Secretariat.
14. Degree of sharing of information to staff (structured and regular)			
3b- Transparency			Change: =
15. Independent external (financial) auditing being done	UCMB has an annual external audited financial report. UCMB shares reports and budgets with the management committees that oversee the running of the health facilities. UCMB also shares the various budgets in its newsletters. Through their bulletin, UCMB reports on the various activities that are accomplished by the Bureau. Reports too are submitted to the Health Commission of the Episcopal Conference, the Diocesan Health Board members and the Health Units' management committee members.		UCMB has project specific and institutional audits which cover all the projects of the department. The reports of the audits are shared with the funders, the Annual General Meeting (AGM) and the Bishops' Conference. The AGM is attended by representatives including the governing bodies of all Health Facilities. A summary financial report is included in UCMB's newsletters.
16. Degree of transparency towards beneficiaries			
17. Extent of upward and downward accountability by SPO			
3c – Internal financial and human resources management			Change: +1
18. Extent to which internal written procedures for financial and human resource management are being respected	Internal financial and narrative procedures are followed in accordance to the financial manual of the Uganda Catholic Secretariat and the donor reporting requirements. There is an elaborate Code of Conduct for all Office Bearers in the Catholic Health Services including the members of the Board of Governors of the Hospitals/ Health Units and the and Diocesan Health Boards and for the employees of the Catholic Health Services including the UCMB staff.		The financial manual was revised to cater for the Uganda Catholic Secretariat requirements and was reviewed by international experts from HARSAs, an international finance company, to ensure that it meets international accounting standards. A procurement manual was also developed for the Secretariat. A Procurement Committee takes responsibility for procurement. A Transport policy was also developed for the department.
Dimension 4: Perception of Impact			Overall Relative change Dimension 4: +3 (very positive)
4a –Responsiveness			Change: +1

Indicator	Assessment (baseline)	Score 0-3	Endline assessment
19. Degree of incorporation of priorities of target groups in plans and activities	<p>The hospitals and health centres supported by UCMB provide 40% of the medical services of Uganda and is thus an important player in the health sector. This important role is recognised by the Government of Uganda which has, as a result, gone ahead to have the representation of UCMB in the various committees and working groups of the Ministry of Health.</p> <p>UCMB conducts an annual survey to get feedback from the beneficiaries of the health facilities of their hospitals and health units. The concerns of the beneficiaries are addressed through the relevant boards and committees.</p>		<p>Given the demand for HIV related treatment, UCMB is implementing an HIV/AIDS project. UCMB is operating within government policies and frameworks including the use of reporting tools and laboratory equipment as well as service delivery including Anti-Retroviral Therapy (ART), Prevention of Mother to Child Transmission (PMCT), HIV testing protocols and support for Orphans and Vulnerable Children (OVC) under the HIV/AIDS project.</p> <p>UCMB's contribution to Uganda's health service delivery is 27.7% for admissions, 17.3% for the Out-Patient Department, 25.3% for deliveries and 27.3% for immunizations and 20.8% for antenatal care. UCMB also developed a training manual in leadership, governance and management for health care institution Managers.</p>
20. Degree of alignment with government policies (planned and implemented)			
4b – Social impact			Change: +1
21. Target group satisfaction regarding fulfilment of their primary social and/or personal concern	<p>Through UCMB support to Health Units these have been able to improve their management practices and hence provide better health services. UCMB does so by funding medical equipment and motorcycles, providing ICT hardware and software for managing and processing of data resulting into provision of timely and accurate information. Through the UCMB accreditation program, the health units are able to benefit from the Government's PHC grants.</p> <p>The users of UCMB health services pay a user-fee which is 'subsidized' (not covering full costs) hence affordable by the poor. Health Units are able to focus on the impact of their services and to provide information on various indicators and on related to costs in a timely manner. The ICT system also facilitates financial management including billing which helps in systems audit.</p> <p>UCMB is pays substantial attention to the sustainability of its interventions by the strengthening of all the six building blocks of health systems and has gone ahead to focus on income generating activities through the introduction of user fees and diversification of sources of funding.</p>		<p>Through the HIV/AIDS project, UCMB is supporting 19 Health Care Facilities and 34 lower units to be able to take care of the health needs of the those infected and affected by HIV and AIDS. UCMB meets the operational costs including human resource, drugs and technical assistance needed in the delivery of such services. UCMB acquired laboratory equipment, renovated pharmacies and laboratories for 8 facilities and also conducted training in HIV prevention and implementation of safe male circumcision.</p> <p>The ICT Enhancement project with Cordaid under the C4C consortium achieved substantial progress through the introduction of the EPRMS, Installation of Video conferencing, the web-based HMIS and digitization of the patients satisfaction survey.</p>
22. Degree to which empowerment of target groups towards public and/ or private sectors have been enhanced			
23. Degree of sustainability of the social impact			
4c policy impact			Change: +1
24. Level of influence of SPOs towards major policy changes	<p>UCMB is a member of several committees of the Ministries of Health and Education. At the district and local levels, the Annual Assemblies give an opportunity to the beneficiaries of the health units to engage government and local leaders on matters related to health facilities.</p>		<p>UCMB has played an important role towards the development of various government policies. In the Private-Public Health Policy (PPHP), UCMB spearheaded the development of the guidelines for the Private-Not-For-Profit (PNFP) Health Facilities which include government recognizing the career progress of health workers of PNFP Health Facilities and not establishing a similar Health Facility within the vicinity of a PNFP Health Facility.</p>

Indicator	Assessment (baseline)	Score 0-3	Endline assessment
			<p>UCMB maintained position as Key player in Health Policy Advisory Committee of MoH and contributes to policy processes. It maintained its role as member of Technical working groups and Taskforces for MoH: HRH, PPPH, M&E, ICT, Taskforce on NHIS etc.</p> <p>Approval of the PPPH policy – and its implementation guidelines was a major success as UCMB has participated in drafting the policy and advocated for its approval together with other health partners.</p> <p>UCMB participated in drafting of the Health Sector ICT policy.</p>

Annex 3: List of people interviewed

Contribution Analysis: Development of Public Private Partnerships in the Health sector

1. Dr Sam Orach, Executive Secretary, Uganda Catholic Medical Bureau
2. Dr Filippo Curtale, Health Sector Advisor, Belgian Technical Cooperation (BTC Uganda)
3. Ms Robinah Kaitiritimba, Executive Director, Uganda National Health Users'/Consumers' Organisation (UNHCO)
4. Mr Geoffrey Bulayi, Coordinator, Uganda National Association of Private Hospitals (UNAPH)
5. Mr Christopher Ssendendo, Executive Secretary, Uganda Community Based Health Care (UCBHCA)
6. Ms Penninah Atiku, Administrator, Uganda Community Based Health Care (UCBHCA)
7. Dr Peter Lochoro, Country Director, CUAMM
8. Dr Timothy Musila, Senior Health Planning/PPPH Policy Officer, Ministry of Health.

Contribution Analysis: ICT Enhancement for Health Facilities

1. Mr Jenard Ntacyotugira, Assistant ICT Project Coordinator, UCMB
2. Mr Godfrey Begumisa, System Administrator, UCMB
3. Ms Regina Bakita, Diocesan Health Coordinator, Kampala Archdiocese
4. Mr Deogratias Ssemwogerere, System Administrator, Rubaga Hospital
5. Dr Robert Asaba, Medical Director, Kisubi Hospital
6. Mr Frances Ssekandi, Public Relations Officer, Kisubi Hospital
7. Dr Emmanuel Onapa, Medical Superintendent, Aber Hospital
8. Sr Rose Nassuna, Administrator, Aber Hospital
9. Mr Jacob Bobby Okello, System Administrator/Medical Records Officer, Aber Hospital

Annex 4: List of documents consulted

Contribution Analysis: Development of Public Private Partnerships in the Health sector

1. Government of Uganda. National Policy on Public Private Partnership in Health (PPPH)

Contribution Analysis: ICT Enhancement for Health Facilities

1. Project Proposal: Health Systems strengthening in the RCC health network through use of ICTs to promote access to equitable, quality and efficient health services. June 2011.
2. Patient Satisfaction Data 2012-2014
3. 2012 UCMB Survey
4. Project Proposal: Using ICTs to improve on the Continuous Quality Improvement process: A case of automating Patient satisfaction Survey. 2013
5. Project Extension Proposal for Year 2014: Health Systems strengthening in the RCC health network through use of ICTs to promote access to equitable, quality and efficient health Services. May 2014
6. C4C ICT Project Report. Health Systems Strengthening in the RCC health network through use of ICTs. July 2014.
7. www.ehealth society.ug

Annex 5: ...

Joint MFS II Evaluation: Civil Society Strengthening –Uganda

Send a Cow Uganda

Technical report on SACU's Civil Society Strengthening

1. Introduction

Address	Plot 1 Ssemawata road, Ntinda P.O. Box 23627 Kampala – Uganda
Phone number	+256 414 286887, +256 392 700627/8
Website	www.sendacowuganda.org
MDG	MDG 1 (poverty reduction)
Funding	

Send a Cow Uganda (SACU) is a Non-Governmental development Organization registered in Uganda and affiliated to Send-A-Cow United Kingdom. It presents itself as being founded on Christian principles. SACU partners with farmer communities to develop knowledge and skills to overcome poverty and malnutrition. SACU works with groups of vulnerable people. Priority is given to areas that have suffered calamities such as conflict, HIV/AIDs and natural disasters. Send a Cow began working in Uganda in 1988 and the country is its longest standing programme. Over more than 25 years SACU has worked in Uganda in 42 districts across the central, eastern and northern regions to overcome poverty and malnutrition in a sustainable manner through animal production and organic farming. SACU works directly with about 4,000 farmers in Uganda. Founded on a principle of sharing and imparting knowledge and skills from one farmer to the next, SACU claims that their impact has reached over 400,000 people in the country (*source: Send A Cow Annual Review 2013-14*).

Purpose and outline of technical report

This report is presenting the context of operation of the Oxfam Novib funded SACU project in the period 2011-2014. The project funding relates to SACU's work in 10 districts in the northern part of Uganda (Lango, Acholi and West Nile sub-regions) where it is aiming to reach out to about 50 groups 2000 households. Northern Uganda has gone through a period of civil war of more than 20 years with stability having returned only in 2007. This report looks at the way SACU has supported the population of Northern Uganda to re-establish their livelihoods. The project includes activities that promote sustainable organic agriculture, livestock keeping and social development.

The impact evaluation focuses on SACU's work in Acholi and Lango Sub-regions as SACU had started their activities at an earlier stage in December 2010 and where the baseline study was done. In chapter 5 this report presents the findings of the relative changes for the period 2012-14 (the baseline also includes the preceding years) and presents one case study that illustrates the contribution of SACU to the realisation of their objectives.

2. Context

Northern Uganda has by far the highest share of rural poverty incidence in Uganda. In all of the Northern districts for which data is available 65% of the rural population live in poverty as compared to the national average of 31%. In two of them - Moroto and Nakapiripirit – this figure is almost nine out of ten. In absolute terms there are more than 3 million rural poor in the North out of a total of 7.5 million rural nationally; thus the Northern region represents 42% of all rural poor in Uganda whereas the share of the total rural population is only 23%. Also the depth of poverty is higher than in the rest of the country. Indicators such as life expectancy and adult literacy also point at lower levels of human development (UNDP, 2009). Furthermore, indicators such as population growth and fertility rate are significantly higher than national figures. The education quality indicators point at a lower standard of education in the North as compared to other Ugandan regions. Furthermore, progress on many development indicators have lagged behind in the North (ODI, 2009).

This lack of progress in the North stems from a vicious cycle of conflict and massive displacement, which has hindered agriculture and trade activities and undermined service delivery. The area were significantly affected by the 1980-85 guerrilla war and the subsequent rebellions by various rebel groups. Conflict between the Lord's Resistance Army (LRA) and the Uganda military forces displaced up to 1.8 million people in the 1990s and 2000s, in some places up to twenty years. Massive international relief assistance has been provided to villagers living in refugee camps thus creating conditions of dependency and lack of initiative. Internal displacement, death, rape, abduction of children, injury and hunger have left many village dwellers with trauma. Many youth have been brought up without attending school as a consequence of the lack of formal education services.

The civil war in the North has had a devastating impact causing the virtual shut down of agriculture with most farmers being confined to IDP camps, or only farming on the margins. Further, a lack of government investment, targeting of children and human rights abuses has added to suffering.

With peace coming to the region in 2007-2008 and many refugees having returned to their village, the socio economic and political environment in the Northern region has improved considerably though many challenges still remain. Plenty of attention is being directed to the area by the government and hence there is plenty of government good will towards all actors that desire to respond to the rehabilitation and resettlement needs of the region. The government itself lacks the resources to tackle everything. At the moment the north is the most marginalized part of the country facing a huge breakdown of most social infrastructure and the people are trying to rebuild their communities and lives. In such a situation the people need support from others especially the state. However the breakdown of social economic and political infrastructure also implies that there are insufficient institutional frameworks to represent and articulate their voice to the state.

SACU's work in the region is therefore well received and the local and national political environment very supportive. In addition while during the time when people were in IDPs there were many relief organisations, when the peace returned and people begun to be resettled many of these organisations have left. This created big gaps both in funding of recovery activities and also placed a lot of responsibility on the few local organizations that remained.

3. Project description

SACU operates through their extension workers who implement community level work and who work closely with the groups and households at sub-county and parish levels. The Group approach is coupled with capacity building at household level. Focus is on households through a sequence of

capacity building steps in close collaboration with local CBOs. SACU is working on income generation by providing livestock, seeds and information. Individual households are to achieve certain targets/ milestones in order to become eligible for livestock placement. These milestones are based on achievements related to 1. Hygiene and sanitation, 2. Farming: production of sufficient food and vegetables. Once livestock placement is done households are expected to 'Pass on the gift' emphasizing accountability, suitability and self reliance. After the groups have developed they are weaned off and encouraged to sustain their operations (usually after 3 years).

The SACU projects in Northern Uganda (Lango, Acholi and West Nile) focuses mainly on organizing farmers into producer groups and training them on leadership and managerial skills, building their capacity to improve their living conditions (sanitation, cooking stoves, housing) and availing them with agro-inputs like high yielding crop seeds and animal types. Using SACU methodology of reaching out to vulnerable households, the project promotes adoption of health and hygiene practices, promote Sustainable Organic Agriculture where communities are taught on developing backyard/ kitchen gardens to grow vegetables and other foods for nutrition, food security and increased income. In the past, SACU was solely concerned with food security and nutrition but is now looking to tutor farmers into collective marketing and value addition, emphasising "farming as a business".

Moreover, project activities also aim at the reduction of domestic violence, better sharing of household tasks, greater appreciation for women/girls rights including inheritance rights. The SACU extension workers are supporting attitude changes through the reduction of stigma towards people with disabilities, PLWHAs, child mothers and widows. Substantial attention is being given to improved leadership, in particular by women, not only within SACU's group structure but also in local and community politics. Psychosocial support is available through SACUs extension workers who have gotten counselling skills in trauma healing (in extreme cases they refer to specialized entities).

After being selected to receive an animal, SACU provides each family with training on social and business skills, husbandry and environmentally sustainable farming methods in the context of a 3-yr support programme to households as part of a group. The family then constructs a shelter for the animal and grows pasture and fodder trees before they receive the animal. There is also a deliberate effort to integrate animal production with crop agriculture, which has allowed farmers to recycle nutrients and increase yields. The project promotes zero-grazing management and the collection of animal dung so that farmers use organic fertilisers on their fields. In turn, these families are required to pass on young livestock and training to others, which not only builds stronger communities but also allows us to help even more people.

SACU is also active in district based, national and regional level networks and coalitions such as PELUM, Food rights Alliance, UWONET, Agri-profocus, FOWODE, CSO-BAG and the National NGO Forum. This enables them to share experience widely. SACU also collaborates with a wide range of development organisations which focus on poverty reduction. At district level, specifically in Northern Uganda, SACU's collaborates with local government structures such as the District Planning Offices

Expected Project outcomes:

1. Improved food and income security
2. Improved hygiene, health and sanitation standards
3. Improved self-esteem and confidence, conflict settlement and broadened understanding of gender roles and sharing of roles and responsibilities within the household

By end of 2015, the project intends having supported 37 groups in Acholi and West Nile sub-regions. Total beneficiaries are 740 households with 5,180 farmers (on average there are 20 members per group). In the Lango sub-Region SACU is working in five districts with around 500 households with

3,050 households organized in 12 (?) groups. In Lango sub-region the groups are substantially bigger with 40-45 households per group. This endline evaluation focuses on the SACU Northern programme because this is where MFSII funding is directed.

Total budget OxfamNovib

Period I	€ 200,000 (Dec 2010 – Dec 2012)	Lango sub-region
Period II	€ 366.800 (Dec 2012 – March 2015)	Lango, Acholi and West-Nile sub-regions

Both projects are co-funded through MFS- II

SACU activities in Uganda are co-funded by Heifer Netherlands, Oxfam Novib and Self Help Africa (SHA). SHA supported SACU in the Northern Region (Amuru District) with about € 200,000 with 300 households as beneficiaries.

4. Data collection and analytical approach

The methodology applied during the baseline in 2012 and follow-up assessment in 2014 is a general one which is described in the methodological annex 1 (note: still to be added).

Key Outcomes selected for the contribution analysis

The key outcomes for the contribution analysis for all CSOs under review during the endline in 2014 have been one related to Civil Society Strengthening and one related to advocacy and lobbying of policy makers. However, in the case of SACU there has been only one case study of the contribution analysis on Civil Society Strengthening as advocacy and lobbying only plays a very minor part of SACU’s work.

The SACU case study focuses on the entire set of activities they are implementing under the community approach based on the graduation model with milestones ultimately leading to livestock placement and weaning off of the group after 3 years of support. As the three main objectives of this approach – food security, hygiene and sanitation and social development - cannot be separated from each other, the case study has been looking at the results and impact of the SACU group approach as a whole. The contribution of SACU to these results are being presented in Chapter 5.2.

5. Results

5.1 Relative changes 2012-2014

The assessment of relative changes has been done against the indicators used in the baseline; the descriptive part for the endline is provided in detail in Annex . The scores of relative changes are given in the following table. The table further below presents a short description of the highlights on which the assessment of the Endline relative changes is based including the score given in the endline.

Criterion	1a	1b	2a	2b	2c	3a	3b	3c	4a	4b	4c	Total
Baseline	3	2	2	2	2	3	2	3	2	3	2	2,36
Endline	+1	=	=	=	-1	+1	-1	=	+2	+1	=	+3

Score: **Baseline** 0-3 0 lowest score and 3 highest
Endline = no change;
 + 1 resp – 1 little change better resp worse;

+ 2 resp – 2 substantial change better resp worse

Table: Short description of the highlights explaining the relative score of relative change 2012-14

Evaluation Criterium	Explanation of score relative of relative change 2012-2014
I. Civic Engagement	<i>Positive development: +1 overall</i>
1a- social engagement	Instead of targeting specific groups SACU has changed to the broader concept of a more inclusive community approach. Further, SACU has changed its approach by focusing on placements of cattle and goats, organic agriculture, and Village Savings and Loan Associations.
1b- political engagement	
	Advocacy work is not a prime objective of SACU. Though SACU establishes local government in their work and informs them about their work. The SACU budget is being reflected in the District budgets.
II. Level of organisation	<i>Negative development: -1 overall</i>
2a-organisational level	No change
2b-dialogue and communication	No change
2c-financial and human resources	There has been a shift from basket fundign to project funding. One major donor SHA has ended funding in 2014 and Oxfam is funding on an annual basis tile March 2015. In terms of human resources, staffing has reduced from over 50 to about 30, though productivity has increased.
III. Practice of values	<i>No overall relative change: 0 change</i>
3a-internal governance	SACU is now part of the global Send a Cow organisation with an expected better integration and exchange between the different countries. Staff can participate in the global monthly meetings through video conferencing (expected to be operational in Northern Uganda shortly)
3b-transparency	
	No major change; however the website does not provide much information on activities and achievements in Uganda.
3c-internal management	No change
IV. Perception of Impact	<i>Very positive development: +3 change</i>
4a-Responsiveness	Program activities such as VSLA, organic agriculture, hygiene and sanitation, and social development are responding very well to the needs of households who have experienced a long-standing war period. SACU is conforming to the new PRDP 2 program which started in 2012 in northern Uganda
4b-social impact	
	Increase of 20% of households graduated after one and a half year. 39 groups have graduated collectively. School gardening at 26 schools.
4c-policy impact	No change

A more elaborate description of the relative changes 2012-2014 can be found in Annex 2.

5.2 Contribution Analysis

Case study: SACU approach to community development

1. Case Background

SACU's main activities are focused on restoring hope and creating stronger communities for the future by teaching beneficiaries the skills they need to free themselves from poverty and hunger and

by providing training, livestock, seeds and support. Training and provision of inputs are mainly targeting women, orphans, people living with HIV/AIDS and disabled persons enabling them to own production assets. The training is further centred on social development to deal with issues that impede development within the group and the family (such as housing, water and sanitation; food and nutrition), on sustainable agriculture and on animal husbandry. Conditionally training events have to be attended by at least two people from each member household (including one man and one women). Specialised training in gender equality is provided to all households following a gender analysis at the beginning of the project implementation. Participants are also trained to carry out advocacy and lobbying.

SACU works with 10 districts in the northern part of the country where it targets 34 groups and reaches 2000 households. Under the sustainable agriculture programme the organisation supports groups to appreciate reduction of farming expenses, improved nutrition and balanced diets. Under the livestock programme SACU supports its target people in improving animal management. SACU collaborates with organisations that share similar aims, objectives, and activities and believe that poverty can be alleviated through environmentally sound livestock management systems. At district level in Northern Uganda, SACU's collaborates with local government structures such as the District Planning Offices.

The Lango people where SACU programmes are located, are traditionally pastoralists and ownership of cows is considered as an important indicator of social well-being. Cows provide animal traction and thus enable farmers to open large areas for agriculture. However over the years and especially during the insurgency period most cows were either rustled or stolen.

2. Theory of Change

Overall SACU aims to support rural communities to achieve improved food security, household nutrition and household income through sale of farm products; better family and gender relations; environmental management and land use; reduced social stigma, improved self-esteem, value and respect. In the Lanjo sub-region SACU works in 5 districts with 5 livestock extensionists, 5 social workers and 2 agricultural extensionists, thus reflecting the production and social goals.

In 2012 SACU's theory of change focused on promoting food security through a group development approach targeting already formed groups and giving agriculture inputs such as animals. SACU also planned to focus on Collaboration with others at the district / national levels, and engagement with sectoral ministries e.g. MAAIF. SACU, however, noted that through the group approach it was rather difficult for district leaders to see and appreciate its work.

In 2014 SACU's theory of change was changing from group development approach to project funding approach although at the time of the evaluation it was still applying a mix of the two. In addition through working with Self-Help Africa (SHA), value chain development and social development approaches have been introduced. Through the Community development approach, as opposed to two years ago, SACU now identifies and targets an entire community and eventually such community may form groups. The shift was drawn from SACU's work with SHA.

Another shift in the SACU theory of change has been the introduction of the Value chain development approach. While in 2012 SACU placed emphasis on household food security, it emerged that once Household got food secure the next step was to take their surplus to the market. Through the value chain approach groups are encouraged to select an enterprise e.g. ground nuts and they are helped to conduct a thorough value chain analysis of the enterprise so that they can take informed decisions about participation in its value chain.

In addition SACU has in 2014 introduced the Village Savings and Loan (VSLA) in its target communities. By the time of the review approximately 30 million shillings was in circulation among the different SACU supported groups . The cycle starts in January. The VSLA is aimed at:

- ❖ Increasing savings from sale of produce,
- ❖ Forging harmony / cohesiveness unity among farmers.
- ❖ Self financing of value chain rather than use banks.
- ❖ Resource mobilization for inputs.
- ❖ Increase community members ability to handle emergencies.

SACU has also revived the Training for Transformation (TFT) methodology through which the community are exposed to a number of was able to realize that rather than selling or leasing to someone to come and cut down the trees which were a loss, the community realized that we can have an apiary project to deal with HIV / AIDS and also domestic violence dealt with.

3. Results and effectiveness

Improved Food security and income

SACU is credited for having promoted household food security in the communities where it works. While in the past people's diets were poor, the increased varieties and amounts of foods that SACU target farmers are producing enable better diets. In addition new seeds and new methods of farming have been introduced and people have adopted farming as a business. According to SHA data food-secured households increased from 70% two years ago to 90% in 2014. SACU has given people heifers which have started producing milk, agronomic training which have enabled farmers produce vegetables gardens around their homes and hence tackled both income and nutrition at the same time. Farmers in parishes where SACU is working have received from SACU cows and ploughs and thus getting back an invaluable sense of economic well-being. The monitoring frame shows that majority of HHs now have 3 meals a day. With new resources and skills, the farming families SACU supports are now producing more food of a greater diversity. Hence their diet is more balanced: on average, each person eats one portion of animal protein per day, plus vitamin-rich vegetables.

SACU has introduced the value chain approach in which people produce with a focus of the market and they are able to market together and maximise their profits. Crops being marketed together include beans, maize, vegetables and greens. In promoting access to market SACU is careful to emphasise that this should not compromise household food security and it is encouraging its farmers save food. Many of the respondents met felt that the most outstanding aspect of SACU's work has been the improvement in income of the beneficiaries. Several reasons were mentioned for the improved food security and household income such as an increased acreage as a result of using oxen for ploughing, reduced animal diseases hence reduced cost of production, improvement in crop yield due to use of good agronomic practices e.g. manure, diversification of agricultural practices, improved nutrition due to diversification of agricultural practices and increased production, etcetera.

SACU in Agwata sub-county

SACU's work is implemented in 3 out of 7 parishes in Agwata Sub County in Lira district and it entailed trainings accompanied by provision of agricultural inputs such as animals. SACU has one group in each of the three parishes and has led to improvements in peoples livelihoods. Farmers mentioned that home gardening has contributed significantly to the availability of food throughout the year and to income generation as carrots are being sold at the local market. They also said that SACU has worked very hard through training and social support. "Now we have a better life" and "Men and women are better working together". Children are being checked and also taught to visit toilets. Best farmers have also been recognised and exchange visits have been organised for them to

visit other farmers in Uganda. The best SACU farmer for 2013 came from Agwata Sub County and she was taken to Kampala for a meeting with the Finance Minister. *From: interview with farmers in Agwata Sub-county*

Savings and credit

SACU is commended by interviewed community members for having introduced and promoted VSLA among its beneficiary groups. Major impact has been on promoting savings and interest household economic growth. Though not an innovative activity, SACU encouraged target groups to participate in VSLA in addition to their agriculture productivity work. The VSLA has enabled community members to save and borrow money and progressively build a capital base. In Agwata sub county SACU started with 3 groups composed of a total of 114 members (40, 40 and 34) members, mainly women. These three groups have inspired other community members to form VSLA groups and to set up Income Generating Activities such as cassava roasting by the road side. Members are encouraged to borrow for a period of 12 months, but for small businesses and credit for family problems credits are usually for 1-3 month. Per saving round about 20-40k USh (6-12 EURO) are being collected and borrowed against interest rates of 10% per month. Women interviewed during the evaluation indicated that they have been trained how the VSLA works and how to administrate the savings and the lending of money to their members. They all indicated that the VSLA made it possible for almost all women to borrow money for a well-defined project. One group mentioned the proposed purpose are presented by the borrower; sometimes the whole group goes to the house of the borrower in order to assess its feasibility. In 2014 there was no problem with repayment of loans, though delays have occurred. Overall, the VSLA initiative was considered by the interviewees as a great achievement including the start-up of a good number of Income Generating Activities. Women mentioned that the Savings Cooperatives known as SACCO do not work anymore and are mainly dominated by men.

In Alito sub county accessing loans is easy and the person getting the loan simply asks for a loan to do business and they get it. There are so many groups that have learnt from SACU's experience and have also started their own savings groups. In the Sub County we have registered over 200 women's groups dealing with VSLA. The only problem is that most of these groups are not trained in VSLA but they are doing it in their own way. Therefore what SACU is doing has influence in the whole community. Other Sub Counties have also borrowed that idea of saving and are also implementing it. In Alito Sub County SACU is supporting two groups with 80 members. Some members of SACU groups are also members in other savings groups and can be members in up to 5 different groups. Due to the fact that they belong to SACU groups, they also influence other groups. All these groups don't have bank accounts but save the money in a box. The money is rarely in the box as it is borrowed immediately after saving it. This has helped the members to grow their business skills. Therefore through SACU's work, the general livelihood of people in the Sub County has improved. *Source: interview with farmers of Alito sub-county*

Social development and gender

In addition SACU is credited for transforming the social behaviour of men and enabling them to realize that they can make money from farming. It was said that in the past "most men would wake-up and either go for drinking or simply sit while women worked and farmed". SACU has enabled them to appreciate the fact that household food insecurity arose from farming work being carried by women alone.

In Amuru district when SACU was using the Group approach its impact was not really felt. However when the shift was made to a community approach the impact was easily felt by the local leadership. For instance the promotion of energy saving and stoves building raised SACU's visibility

resulting in a further scaling up in the district. The community Approach is cost effective, provides visibility and encourages competition as people are invited to copy from their neighbours and sometimes even strive to do the same even be better. In the community approach, groups in communities better manage donations, and jointly make it feasible to build infrastructure e.g. stores. Through the collaboration with SHA the Group approach led to visible and concentrated impact. It has also been easier to mobilize communities, to organize exchange visits and for beneficiaries to offer one another peer support. The latter is often done through the selection of peer farmers who have shown a keen interest in a specific technology and assist their neighbours but also other communities. For instance the construction of improved stoves was often facilitated by peer farmers. Interviewees indicated that they wanted their neighbours to benefit as well. Collective marketing has also proven to be easier in the group approach.

Community members also benefit from other cross-cutting issues such as HIV /AIDS awareness, awareness on Gender Based Violence and counselling. These interventions have led to reduction in domestic violence and contributed to more stable homes in which there is more sharing of roles between men and women. The issue of land wrangles is also addressed by SACU as they are on the increase. In Acholi since people have left the IDP camps they have become increasingly interested in commercial farming which causes land disputes as claims of ownerships after so many years of war are not clear. SACU is hiring experts to come and sensitize people about land rights. There are now structures to deal with these which did not exist before.

SACU's trainings and other interventions such as VSLA are not limited to SACU target beneficiaries alone since non members too benefit from them at no cost hence delivering cross cutting impact.

When interviewing the sub-county leadership they confidently indicated that SACU has made sufficient impact on the way they conduct social development. They are willing to adjust the sub county budget to provide support to groups in the parishes where SACU is not working. Nevertheless the sub-county leaders desire that SACU extends its program to at least one or two new parishes not yet covered.

Hygiene and sanitation

Due to SACU's work there is a general improvement in the household sanitation. Households now have in-house furniture (couch and chairs made of mud) energy-saving cook stoves, rubbish pits, urinals, bathrooms and toilets. Children too are trained of how to use the sanitation facilities and hence there is general involvement of every one. Reduced child mortality of beneficiaries' children is being observed. Household members are proudly showing the improvements in and around their houses which have been realized with the help of SACU. In particular through home visits and trainings they have been able to motivate households to improve their living conditions and sanitation. Non SACU target members are often invited and benefit as well from the hygiene and sanitation trainings. Many go back to their homes and apply that knowledge to improve their household sanitation too. The impact of the improvement of hygiene and sanitation situation was according to the interviewees widely felt: children have less diarrhoea, adults have less stomach aches have reduced and they are all less ill. Women tell that the cooking stoves has a lot of advantages: the use of firewood is much less and there is no smoke anymore in the kitchen, resulting in a significant health improvement.

School garden activities

Since 2012 SACU has introduced for the first time a school garden activity in collaboration with SNV who wanted to develop a school garden model. SACU are a partner in this SNV programme and provide oxen to the participating schools. The purpose of this was to both empower parents nutritionally and also so that they can keep their children at school (retention). There are currently 26 schools that have embraced this school garden activity. The intervention was not to give them

cows but to develop a school garden model. The garden which is at school is a demonstration garden for parents to come and learn from it. Parents come to the school on a weekly basis and now they are not only coming to the school for PTA meetings. While being at school, they gain skills from the demonstration garden as well as issues that are affecting the school such as no teacher houses, etc. In Lango sub-region, parents have contributed 110 million shillings towards issues affecting their children's schools. The parents have even formed VSLAs to keep them together as parents.

Increased self confidence

At both HH and community levels increased self-confidence and hope for the future has been vested as was testified by several households. To that extent the Social development workers of SACU have been supporting mind set changes and enhanced individual leadership potentials and ability to inspire others, through envisioning. This has been in particular the case for women. For example the case of a lady who was put into the leadership of a certain group but where the men expected her to fail so that they could take over the group. The lady has since grown in confidence and now effectively leads the group.

Also the SACU impact study confirms that "women, who make up the majority of smallholder farmers, are at the heart of the process. In three out of every four households, women and men are now equal partners in making decisions about how to use the family's land, and how to share workloads within the family. Women become respected within their homes, communities, and wider neighbourhoods". Data from the same report indicate that in Uganda joint decision-making about the use of land is up from 25% before to 74% now; joint decision-making on workload is up from 17% before to 73%; and a (much) better relationship between men and women is being reported in 80% of the households (SACU impact report 2013-14).

Replication and scaling-up

One interesting phenomenon is that non-beneficiaries are trying to copy SACU interventions. This is both in Acholi and Lango Sub-Regions. They do for example stop SACU extension workers on their motor cycles and inquire from them. Home hygiene is one major activity that non beneficiaries are copying such as separation of bathroom from urinals. Another is the construction of energy saving stoves. The peer farmers who are experienced with this construction are invited by households of neighbouring communities to assist them in building similar stoves in their houses as they have learned about the benefits.

Other community groups have approached SACU supported groups such as WEKOMERE for support how to make kitchen gardens. The advice was given by SACU trained groups and now some have also set up kitchen gardens. Many non SACU target groups have also adopted SACU promoted practices such as setting up two hygiene shelters. SACU needs to capture this scale up so as to determine more accurately its overall impact. It may also deliberately include it in its sustainability strategy.

Efficiency

It has been observed by several interviewees that the SACU programme is focusing on relatively few parishes within a district and yet the needs are spread allover. Besides, reaching the entire community is a problem because the area is very wide and yet the funding is limited to cover only a few parishes. As indicated SACU in Lango sub-region is reaching out to about 500 Households organized in 12 (?) groups. This is done with 12 field workers. SACU has introduced the community approach as a way to be more inclusive. But how to scale-up the successful approach to reach a wider number of households remains a major challenge.

Besides no effect has been observed of the value chain approach which was introduced in the course of the project period under review. There was mention of the introduction of cash crops such as

soybean or green grams, but only at a limited scale. A value chain approach is much more comprehensive including the facilitation of regular interaction between farmers and traders, service providers and the financial sector. No evidence could be found that SACU was facilitating this interaction.

Further individual testimonies of SACU beneficiaries can be found in Annex 5.

4. Contribution analysis

SACU Graduation Model Approach

The SACU support to farm household groups during three years is based on a graduation model. Farmers are expected to graduate from one level to the next after respectively one, two and three periods:

P-1: improvement of household hygiene and sanitation situation

P-2: improvement of Food Security through diversification, homestead gardening and organic agriculture

P-3: placement of livestock with construction of stable

This approach provides a clear and tested perspective for the group members participating in the SACU programme. Interviewed farmers all have testified that thanks to the 3-year training based on the graduation with eventually livestock placements according to their choice has greatly contributed to the improvement of their homesteads, food security situation and finally has made livestock placement possible. The graduation model from one level to another has been completed within one and a half year by 90% of the participating households thus illustrating the successful approach of the SACU intervention. The consistent set of milestones promoted by SACU serves as a good incentive for households to become active participants and not passive recipients of the development activities.

SACU staff closely collaborating with community groups

A second important element of the SACU approach has been the presence of full time extension workers on the ground closely collaborating with the communities. The success of this approach is a combination of three factors: 1. The extension staff is selected by the communities and paid (though indirectly SACU pays for the extension workers); 2. The extension workers represent both technical skills (agriculture and livestock) as well as social development thus being able to train technical skills for food and livestock production and social skills at household level, group dynamics and leadership; and 3. The extension workers are working closely with the communities as one technical staff and one social development staff together cover around four community groups which they visit on a weekly basis.

These factors contribute to the fact that the community groups feel that they have ownership over the extension workers and their activities. The community groups for instance have created a bank account in which SACU deposits the money of the salaries of the extension workers. With this money the groups can pay their extension staff and thus have an influence over their functioning. In case the group is not satisfied with the extension staff they may end the work agreement. Extension staff testified that they had no problems with this arrangement, on the contrary they also felt it beneficial to both parties involved

Introduction of the VSLA

The introduction of the Village Savings and Loan Associations in all the community groups has had a very positive reception and a major impact on Income generating activities or social expenditure (such as school fees, funeral costs or health-related expenses). In the past community members have had very poor experiences with savings and credit. They have been cheated of their savings by people who purported to be micro-finance providers; also the government-supported SACCOs often

did not function and in many cases savings have disappeared. Though not an innovative activity, SACU choice to support the creation of VSLA by trainings and its continued monitoring of performance has had vested a highly appreciated rotating credit and savings scheme at community level of which in particular women are members. When asked women of the two groups visited testified that there had been no cheating within their groups and that they were able to solve problems around delays of reimbursement.

The VSLA approach empowers the people to save their money, manage it and control its use themselves. This approach has received overwhelming support from the communities. This is linked with the appreciation by many people that being in saving and credit groups actually has many advantages: it enables community members in their Income generation, it is easier to train people and it increases visibility of the members. But foremost the members of the group know each other which enhances trust to make deposits of their savings to the group.

Thus VSLA has proven to be a good initiative, broadly community driven and which liberates poor people from solely depending on money lenders for financial resources. It also promotes a culture of saving even for people who for a long time have always been defined as too poor to even have anything to save and makes funds available for investment into other livelihood ventures.

For SACU VSLA is relatively cheap activity and yet delivers immediate visible outcomes. Therefore SACU should consider scaling it up and especially using it as the entry strategy for expansion into new programme areas.

The SACU programme links well with an ongoing government restocking initiative through which one qualifying household per village is given a heifer. The heifers though given to the entire household are particularly assigned to women. In addition a veterinary officer is specifically assigned to offer support to the women in looking after their animals.

Group approach

SACU is using the group approach as their main approach to work with communities. As opposed to two years ago (2012), SACU now identifies a community and the entire community is targeted even if eventually such community also comes up to form groups. The justification is that when it was tried out with SHA, this approach led to visible and concentrated impact. It is also easy to mobilize, organize exchange visits and for beneficiaries to offer one another peer support. Collective marketing is also easier in a group approach even among the members.

Now Groups are graduated as a whole which also creates peer pressure to abide to the conditions set by SACU. Upon graduation groups in principle become self-reliant but SACU still is monitoring their situation. What happens to the graduated group is that funding stops but SACU doesn't lose contact, the link is not as strong as before but it remains there. SACU uses also graduated members as mentors for other groups, for instance for exchange visits. Graduated groups are not paid but its only the peer farmers that are paid.

The groups that SACU is supporting are all registered as CBOs at the Sub County (Local Government level 3). This is important for them because as registered CBO they are better known, their location and their activities. Most of the government programs - such as NUSAF 2 and NAADS - are supporting people who are in groups. So if registered at the Sub County can these CBOs can get support in case something is up. There are many types of CBOs registered and also VSLA groups are registered at the Sub County.

SACU claims that its shift from group to community approach has had a major impact as SACU can reach more people and groups. This has been confirmed by members of the groups and by the fact that proposed developments are being replicated and scaled-up through expert farmers.

External contributing factors

SACU is credited for reviving the spirit of working together that existed in the 1960s' when people used to grow cotton and were organised under cooperative unions and cooperative societies. But the government is also promoting the group approach as a basis for effective service delivery and community development. For instance through the Northern Uganda Social Action Plan (NUSAF 2) and NAADS programmes, community members are encouraged to form groups of at least 14 people and then varying forms of support and agricultural inputs based on identified community needs are provided. In particular the government is also stepping up its support for VSLA as a basis for uplifting the standards of peoples lives. To this end a Community Development Officer at the Sub County has been specifically trained and posted to promote VSLA. The CDO trains groups across the sub county and more funding to this activity is proposed in the next financial year.

It has therefore been easy for SACU to receive support from local leaders to mobilise and bring people together. SACU has developed good collaboration with local government leadership at sub country and district levels through sharing their plans and reports. This sharing builds transparency and trust and at the time of the review SACU was due for invitation to the Sub County technical planning and sectoral committees of production and marketing. This would enable integration of SACU's work plan into the Sub County development plan.

The impact of SACU's work is greatly appreciated by the government especially in giving farmers more income and reducing poverty considering that the area suffered a lot from the insurgency and it is on the government priority to tackle poverty in the area.

5.3 Relevance of Results

The contribution analysis presented above shows a relatively comprehensive picture why the SACU interventions have been quite successful and have achieved impacts to the food security, income generation and health situation of participating households.

The contributing factors point at:

1. A consistent approach of achievable and well-thought through milestones to be reached by the households with support from SACU extension staff, but also neighbours and other community members. The graduation model of the SACU provides a clear perspective to individual households how they can improve; ultimately they are rewarded by a livestock placement according to their choice;
2. The milestones do not only relate to one dimension of livelihood improvement but do relate to social development issues, hygiene and sanitation around the house as well as agricultural production, livestock keeping and marketing. Hence it is a comprehensive approach responding to the multiple needs of the targeted communities;
3. Ownership of the quality and type of extension work by the beneficiary groups through the employment of extensionist workers by the group themselves;
4. The group approach to include an entire community as the beneficiaries of the programme; everyone can volunteer to become a member of the group but has to abide with the graduation model approach;
5. The introduction of the well-known approach for Savings and Credit through the VSLAs in the communities has responded to the need of community members for savings and credit in order

to be able to make small investment for income generating activities possible or to be able to make larger or unexpected expenses.

6. Discussion

- **Design**

In the context of SACU it is barely appropriate to speak of a project approach. SACU is promoting a comprehensive approach to community development (in terms of production, health and social development) which is being applied all over the country. In total they have worked in over 40 districts with a similar approach. This is being reflected by the way SACU had organized their funding base which was mainly basket funding by different donors including Oxfam Novib. Now that donors are more inclined to go for project funding the funding situation and management and administration of the individual projects – which are more geographically targeted – changes dramatically with higher overhead costs in terms of reporting requirements and accountability.

As has been presented in Chapter 5.2 and 5.3 the SACU activities and approach are very well responding to the needs and requirements of the targeted communities of Northern Uganda who are still recovering from a dramatic and traumatic war situation which has lasted for decades.

- **Continuation of funding**

It is highly recommended that funding for this type of projects is being continued. In particular the clear graduation model with an ending after three years provides a good perspective for groups to mature and achievements to be sustained and replicated.

- **Recommended changes**

The main issue that has emerged from the impact evaluation is the issue of efficiency and scale of SACU interventions. SACU has opted for an intensive support of three years to community groups with extension workers collaborating very closely with the target communities on a weekly basis. Therefore SACU should be able to reflect on the way how to scale up this approach in order to reach out to more communities. Though this is simpler said than done as the close collaboration is one of the strongholds of the SACU approach. SACU could at least do a study of the groups they have been supporting for instance for than five years ago and look at successful replications by other communities and the way this has been done. For instance the peer farmer training on the construction of improved cooking stoves by “farmer experts” seems to be one of the successful replication models.

- **Improvement of impact evaluation**

This impact evaluation could have better coordinated with the approach SACU has taken itself to evaluate the impact of their interventions. Though the results of their Impact Evaluation 2013 has been incorporated in this impact evaluation under indicator 4b Social Impact.

- **Causal mechanism**

There are several interesting phenomena of the SACU approach which stand out in comparison to other SPO project approaches:

1. The community group approach is mainly being used to reach out to a wider number of households in order to train and share knowledge and skills; the project does not start by setting up collective activities such as joint marketing or whatsoever. The intervention level is basically the household level. Once trust has been established within the communities that they can work together collective activities such as the VSLA or bulked marketing are being introduced.
2. Secondly, by requesting the community group as CBO to be responsible for the recruitment and payment of the extension workers, ownership has been created.

3. The graduation model makes the beneficiaries active participants of their livelihood improvement and not a passive recipient. With the clear milestones to be achieved the households know exactly of what is expected from them in order to be eligible for support.
4. And finally, right from the beginning it is clear that the ACU support will last only for three years thus not creating the dependency relationship of a perpetual project.

7. Conclusion

Changes in Civil Society Strengthening 2012-2014 for Send a Cow Uganda

This section refers to the Relative changes as presented in Chapter 5.1 and more elaborate in Annex 1. In the case of SACU the relative changes over time are mainly with respect to the dimension Four of the Civil Society Strengthening analytical model, responsiveness (4a) and social impact (4b). It has become clear that under dimension One SACU is almost exclusively focusing on social engagement (1a) targeting community groups in the sub-counties of their intervention. It is also clear that the Graduation Model approach as such has not changed dramatically with the exception of how they engage with their beneficiaries. In the past this was exclusively done with specific target groups of vulnerable households now they are creating the opportunity for all members of a certain community to participate in the SACU programme. With regard to policy engagement it has become apparent that this has not SACU prime attention. They are interacting with Local Government at District and Sub-county level but not with the purpose of lobbying for certain changes.

With respect to Dimension Two (Level of Organisation) it has become clear that there have been no changes with regard to indicators 2a (networking) and 2b (dialogue and communication), but more so with regard to indicator 2c (financial and human resources). The latter has changed dramatically to the negative side to the extent that previous basket funding is now changing to project funding with severe implications for the SACU mode of operation, reporting and accountability leading to higher overhead costs. Secondly the level of funding has come under threat with Self-help Africa funding stopped and Oxfam Novib funding more than halved and coming to an end by December 2015. It is not known whether new sources of funding have already been found to make a continuation of activities possible, though the new set-up where SACU – just as the other Send a Cow country offices – has become part again of Send a Cow UK, might create new and better opportunities to source funding.

With respect to Dimension Three (Practice of Values) there is a mixed picture. On indicator 3a (Internal Governance) there certainly has been improvement with the new management and governance set-up. However, when it comes to transparency (indicator 3b) the lack of progress in particular the lack of relevant information on the Send a Cow website as compared to other programmes is presenting a negative outlook. No change has been reported on the financial and human resources management (indicator 3c).

As earlier said the main positive development has been realized under Dimension Four in particular with respect to Social Responsiveness (4a) and Social Impact (4b). Chapter 5.2 and 5.3 present the cause for this assessment. With respect to Political Impact (4c) the lack of any concrete activity illustrated that SACU is not engagement politically.

Attribution of changes to SACU interventions

With regard to the attribution of the changes there is a need to distinguish between the different dimensions analyzed:

1. With regard to Dimension Four (Perception of Impact) it is clear that the approach of SACU interventions as described and analyzed in Chapters 5.2 and 5.3 have greatly and significantly contributed to the achievements of a better Food Security, improved health through better hygiene and sanitation as well as a more balanced decision-making and collaboration at household level between spouses. Moreover, income generating activities have been enhanced through the Savings and Credit associations.

2. However, with regard to Dimension Two (Level of Organisation) and in particular it is not yet clear whether the organisation changes of the new International Send a Cow (instead of individual country entities) realized in April 2014 will be able to respond to the negative trends of donor funding.

Relevance of the changes

The relevance of the changes have been analyzed and presented in the case study of 5.2 and in 5.3. Particular attention should be given to the spontaneous replication and scaling-up of programme interventions by neighbouring communities and households.

Explaining factors to identified changes

One of the most interesting factors of the succes of SACU in the Acholi sub region has been the use of a consistent and clearly defined approach graduation model. Chapter 5.3 further elaborates on the contributing and explaining factors to project achievements with regard to Civil Society Strengthening in particular Social Impact.

Assessment of project design

Statements	Scores
The project was well designed	10
The project was implemented as designed	8
The project reached all its objectives	8
The observed results are attributable to the project interventions	9
The observed results are relevant to the project beneficiaries	10

Scale of Scores: 'Not at all' (1) - 'Completely' (10)

Annexes

1. Short description of the MFS II CSS baseline and endline methodology
2. Description and scoring of relative changes CSS 2012-2014
3. List of people interviewed
4. List of documents consulted (still to be added)
5. Testimonies of SACU beneficiaries

Annex 1: brief description of methodology applied

Introduction

During the baseline 2012 and the endline 2014 a general methodology has been developed for the Civil Society Strengthening SPO studies in Uganda which has been applied to all SPOs in more or less the same way. This methodology has followed the Civil Society Index methodology with a major focus on the perception of social and political impacts as a result of the activities of the SPO under review. A methodological guide has been developed based on the earlier developed Baseline Methodological Guide and discussions with the Wageningen University CDI studies for Civil Society Strengthening, in particular contribution analysis (*see Methodological Guide Endline 2014*). As has been described in the Baseline report, the Uganda study intends to make a comparison of the changes of the five Civil Society Index (CSI) dimensions over the period 2011-2014. In 2012 the Evaluation Framework has been developed on the basis of the Civil Society Strengthening Assessment Framework also known as the CSI as developed by Civicus. The five pillars as prescribed by the MFS II evaluation framework has been elaborated into a set of 25 indicators (excluding the context description). The CSS Evaluation Framework for Uganda has been applied unchanged in both the baseline phase as well as the endline.

In the endline of 2014 the focus has been on the dimensions of Civic Engagement (social engagement and political engagement; dimension I) and the Realised (or perceived) Impact of their social and political engagement (dimension IV). But the scoring and description of relative changes has been done for all 25 indicators including dimensions II (Level of Organisation) and III (Practice of Values).

No monitoring has been undertaken in 2013 as there was no budget available. Furthermore, the period between the baseline and the endline was already relatively short to assess impact.

Endline 2014 SPO selection and reporting

In the baseline 2012, 17 SPOs had been randomly selected from the long list of about 120 SPOs being supported by the Dutch MFS consortia. In addition the 8 SPOs under the 5C study have also been addressed with regard to their Civil Society Strengthening. From the original 17 SPOs under the CSS study, 13 have been retained for the endline study at the start of the endline.

The Criteria which have been used for the selection of the SPOs to be included in the endline were:

- a) Selecting the SPOs that will be part of the process tracing exercise (before fieldwork).
- b) Selecting the specific outcomes that will be analyzed using the process tracing methodology.

From the 13 SPOs retained for the endline, finally 3 organisations have not been included. It appeared to be too complicated and time-consuming to include the two SPOs of the Capacity Building exercise. They could only be included towards the end of the endline exercise as the Uganda CapDev ETC team was still working with these organisations. A third SPO was left out as they did not wish to collaborate during the endline exercise also for reasons of being included in the MDG evaluation. Finally only eight out of ten remaining organisations have been reported upon for the endline 2014 as the lack of data consistency for the two remaining made it impossible to sufficiently address the evaluation questions.

Methods/ techniques

During the baseline 2012 and the endline 2014 the following methods have been used:

1. Before/ after comparison

Upon completion of the 2012 CS baseline study a clear picture of the Civil Society Strengthening efforts by the individual SPOs both in terms of Civil Society engagement as well as lobbying and advocacy (political engagement) had been made. This was realized by taking stock of what was the

situation in 2012 since the start of the individual projects one or two years earlier on the basis of the indicators as formulated for the baseline.

A similar assessment has been made in 2014 during the endline analysis when a description has been made of the changes in the period since the baseline 2012. On the basis of these changes a score has been given for positive/ negative changes or no change at all. The relative changes 2012-2014 have been further analysed to understand what has contributed to these changes in the

2. Case studies

The case studies are described in most of the studies on the basis of the “stories” of the beneficiaries and / or partner organisations as well as representatives of the “lobbying targets”. The 2012 baseline include descriptions of specific cases which have identified and described to illustrate the activities, outputs and outcomes of the SPO in question. In 2014, these cases have been further elaborated to assess the contribution of the SPO to the realization of the achieved outcomes through an contribution analysis.

3. Focus Group Discussions

Focus Group Discussions have been used to interview several stakeholders in order to capture the opinion or meaning of various persons at a time. FGDs have been held in the first place with the staff of the partner organisations in order to address the issue of relative changes 2012-2014 (including timeline analysis) as well as the theory of change which was being applied by the SPO.

Secondly, FCD have been held with groups of the beneficiaries of the SPO in order to assess their opinion on the changes in their organisation and/ or communities.

4. Individual interviews

Both during the 2012 Baseline and the 2014 Endline Individual interviews have been held with selected stakeholders on the basis of the research questions as formulated in the CS research guide. These interviews have been used for the assessment of the relative changes 2012-2014 in the contribution analysis.

5. Timeline analysis

In both the baseline 2012 as well as the endline 2014 and timeline analysis has been done in order to understand the development of the organisation over time in the face of both internal and external developments. The latter timeline analysis has been used to understand better the relative changes, the implementation of concrete activities based on the theory of change as well as to assess the contribution of the SPO to the realization of the intended outcomes.

Sampling of beneficiaries/ informants

During the baseline 2012 and endline 2014 a similar approach to the sampling of beneficiaries and informants has been applied. The sample of the beneficiaries to be interviewed was done by the Ugandan consultants. It was agreed in the Baseline Methodological guide that a wide range of stakeholders would be interviewed, either during the ‘staff analytical workshop’ with the attendance of as many staff member relevant for management, programme implementation and financial management. A similar approach has been used during the endline 2014.

Moreover, focus group interviews were held with beneficiaries at their location, or with responsible staff of beneficiary organisations (eg primary schools teachers, cooperative board members, health workers, extension workers). In a few instances board members have been contacted and interviewed on their role and vision on the organisation. Other stakeholders from government agencies such as local government staff or ministerial staff have been interviewed on an individual basis.

The selection of groups/ individuals to be interviewed was often made on the basis of the availability, relative proximity (most research was done during the rainy season and in regions with very poor transport infrastructure).

Annex 2. Description and scoring of relative changes CSS 2012-2014

Indicator	Baseline status	Score	What exactly happened or changed
Dimension 1: Civic Engagement		2,5	Overall Relative change Dimension 1: +1 (positive)
1a – diversity of socially based engagement		+3	Change +1
<p>1. Degree to which the needs of beneficiaries / target groups are included in SPOs analysis, planning and implementation.</p> <p>2. Degree of participation of target groups in analysis and planning of SPOs.</p>	<p>Among SACU's targets are women groups, orphans and vulnerable children, HIV Aids victims, both men and women, whose marginalization is compounded further by their health status. The SACU strategic plan is developed through a widely consultative process and includes generating responses from the beneficiary communities. To this end beneficiaries undertake an active role in defining the organization's agenda. One of the effects of beneficiary participation in shaping SACU's agenda has been the gradual evolution of SACU from an over focus on cows to include other animals such as goats and pigs as well as sustainable agriculture. SACU also encourages communities to form groups which in turn are the SACU entry points. Through its group approach SACU provides capacity building training and encourages group cohesion and self-direction both as an early preparation for sustainability but also as a way of ensuring that real needs of the beneficiaries are addressed. Field interviews revealed that groups are quite self-driven and undertake independent analysis of their situations and actions. SACU supported groups have to have self- organization and approach SACU for support. Hence the motivation to form the groups is normally internal which creates a basis for ownership of interventions. Groups hold regular meetings develop their own action plans and practice rotational leadership all of which efforts help to create transparency in the groups.</p>		<ul style="list-style-type: none"> • SACU now targets both men and women in mixed community groups. • The gradual evolution has thrown out some of the livestock component i.e. pigs, poultry and strengthened sustainable organic agriculture to bring on board value chain development and mainstreamed gender, DRR (Disaster Risk Reduction), and VSLA. These have gained momentum in the last 2 years. These days SACU is now focusing on giving out cows and goats as they realized that people could not afford pigs and poultry. The challenge was that pigs feed like humans on things such as potatoes; cassava hence instead of someone selling the potatoes or cassava has to feed it to the pigs. This resulted into malnourished pigs as people were just selling the potatoes and cassava and not feeding the pigs properly. • In addition to group approach, the community approach has been embraced. • Social development has continued to be one of the pillars of the community development approach.
1b – diversity of political engagement		+2	Change =
<p>3. Number of dialogue platforms with local or national government that SPO is participating in.</p>	<p>SACU is a member of the District NGO forums both in the districts where it operates and also at the national level. SACU is an advocacy organisation and it uses the experiences from its work with communities to lobby and advocate to government and other responsibility holders for the benefit of small holder farmers. SACU also takes an active part in the gender and advocacy component by getting involved in a number of advocacy network initiatives with partner organisations including government departments. It has established links with the ministry of gender and social development, and actively participated in the national dialogue on sexual and gender based violence.</p>		<ul style="list-style-type: none"> • SACU is primarily a development organization but also does advocacy work.
<p>4. What is the intensity of involvement in dialogue platforms or sectoral networks?</p>			<ul style="list-style-type: none"> • SACU has established links with parliamentary committees on Agriculture and Natural Resources Management to address issues on environment and genetically modified organics and also links with Local governments and lower local governments. There is already a Memorandum of Understanding with Amuru district. There is also a lot of collaboration with local governments even when developing concepts. In Amuru district, the SACU budget is reflected in the district budget.

Dimension 2: Level of Organization		+2	Overall Relative change Dimension 2 : -1 (negative)
2a – Organizational level of civil society		2	Change =
5. Degree of participation of the SPO (and possibly CFAs) in sectoral networks of civil society organisations. 6. Nature of the relationship between the SPO (and possibly CFAs) and sectoral networks/ umbrella organisations in the MDG/ theme.	Although in its earlier years SACU was not active in other networks, the organisation decided to seek more active membership in other networks. It is a member of the PELUM Association, a network of CSOs involved in promoting sustainable agriculture, UWONET, a network that focuses on women’s rights, and AWEAPON. For instance in PELUM Association SACU is a member of the management board and is also one of the lead agencies on the sustainable organic agriculture component.		<ul style="list-style-type: none"> No change occurred
2b – Dialogue and communication		2	Change =
7. Degree to which a shared analysis of situation in society exists 8. Degree of joint activity as a result of joint analysis 9. Mode, nature and quality of dialogue / communication	Most of the networks that SACU collaborates with are thematic which implies that they undertake joint analysis of issues that affect their thematic area of focus. Some of the issues on which SACU and its partners in the various network take joint action on include: Advancement of right to food and sharing of best practices, participation in drafting/formulation of a national nutrition policy and jointly advocate for land access and reversal of budget cuts in agriculture. SACU also collaborates with other networks that promote alternative energy sources such as biogas as a way of uplifting livelihoods. Because SACU is able to bring to the fore its experiences from working with groups, its contributions are evidence based . In networks such as PELUM SACU is regarded as the organisation that has the evidence which often forms part of advocacy strategies for the entire network. Major collaboration and networking is in the area of Gender and Advocacy. SACU has been active in the national dialogue on Sexual and gender based violence.		<ul style="list-style-type: none"> This is more at the strategic / national level hence the northern regional office can’t explore this at the moment.
2c – financial and human resources		2	Change -1
10. Composition of current financial resource base of SPO 11. Degree of dependency of external funding	SACU is a fairly large organisation with a diverse number of donor partners. External donor resources constitute about 98% of total resources. At the moment <i>MFSII funding constitutes 13%</i> of overall institutional budget. Other donors and their contributions are: Send A Cow UK 31%, Self Help Africa 4%, Heifer Netherlands 2%, SNV/UNICEF 2%, GORTA Irish 27%, DFID 6%, RIHO 1% and Local income 2%. It has a well-established financial and human resource management system. Although SACU went through a period of restructuring which led to the departure of some staff, the organisation has been able to retain a highly competent team of technical staff most with bachelors and masters degrees. It has over 50 staff spread all over the country.		<ul style="list-style-type: none"> On the whole the transformation of SACU from being SACU Uganda to being SACU international implies that the organisation resource base has grown. The opening up of a SACU office in the US further affirms to this. A new partnership with Oxfam Novib was signed in 2013. It is a 3-year commitment but it is signed annually. However funding from Oxfam Novib dropped by 60% in 2014. In Acholi SACU won’t be able to do as much as before and they are scaling down in West Nile. There was a shift from basket funding to grant influx. The reason here is that donor preference had shifted to projects from basket funding; Previously all that money was channeled into one basket. At the moment SACU has to

			<p>account to each donor separately and undertakes independent audits for each of its donors.</p> <ul style="list-style-type: none"> • In July 2014 the Self Help Africa (SHA) project ended.
12. Human resources management by the SPO			<ul style="list-style-type: none"> • From over 50 staff to over 30 staff across the country. This meant that some positions remained redundant, some departments were merged and other positions scrapped. Previously SACU northern region had 33 groups and no schools but now there are 46 groups and 26 schools. This is a very significant change. The staff reduction has led to staff being more productive and aggressive in handling their work.
Dimension 3: Practice of Values			Overall Relative change Dimension 3 : 0 (no change)
3.a - Internal Governance		3	Change +1
13. Degree to which organizational structures are involved in strategic management of the SPO	<p>SACU is an independent CSO although its founding was mainly through the efforts of Send A Cow UK. The organisation is now independent with an independent Board of directors that defines and shapes the agenda of the organisation. The BOD is composed of a chairperson and seven other people composed of Ugandans and representatives of SACU UK. It approves plans and budget and oversees the implementation of plans and policies and is responsible for appointing the chief executive and other senior staff. The board meets quarterly to provide direction and guidance to the management. Different stakeholders participate in strategic planning processes thus opening space to them to set the direction of the organisation every five years.</p> <p>On the basis of the five year strategic plan SACU uses 3 year roll over plans which are translated into annual activity plans in order to achieve the envisaged outcomes. SACU reviews its activities and results every quarter and annually in order to adapt strategic thinking and strategies according to achieved results. Monthly staff meetings are held during which even regional staff participates. This guarantees that all staff are well informed of the decisions and actions being taken.</p>		<ul style="list-style-type: none"> • Change from board to group structure. The group has its own members. Other than having Send a Cow Uganda, Send a Cow Ethiopia etc. it is now moving to just Send a Cow which is global / international e.g. if there is new staffing then everyone across SAC gets to know about it. There were 7 country programs all working independently but from 16th April 2014 all ceased and now there is only Send a Cow and not Send a Cow Uganda etc. This is all intended to make Send a Cow grow and stronger. The registration status of Uganda is under discussion between the group board and the Uganda board. All the country programs have an ED who reports to the group board. The country boards have delegated their mandate to group boards. Group executives report to the overall executive who is the CEO.
14. Degree of sharing of information to staff (structured and regular)			<ul style="list-style-type: none"> • Global monthly meetings and country meetings. On every month, all staff is invited to the meeting chaired by the CEO and this is done through video conferencing. This meeting is for all staff including extension workers. This is called a global meeting. In Uganda though we haven't got the infrastructure for this. The purpose of this is to be open and communicate with everyone in Send a Cow. This increases transparency and communication in the organization. If there is a question, then any staff can send in their questions even before the meeting to the director human resource. Two global meetings have so far been held and the IT team is organizing to have the infrastructure even for the northern Uganda region so that the team there doesn't

			have to always move to Kampala for the meeting.
	3b- Transparency		Change -1
15. Independent external (financial) auditing being done	<p>SACU has a communication and marketing strategy that serves two purposes. On the one hand it is aimed at building the image of the organisation and on the other it is aimed at increasing the efficiency of communication between SACU and its partners. Internally the organisation communicates through regular staff meetings and a once in a month general staff meeting during which the regional staff join the headquarters staff for a meeting.</p> <p>Quarterly and annual donor reports are produced and submitted based on the specific understanding with different donors. A comprehensive annual report that details the work of the organisation is produced and shared both as a print copy and also placed on the organization's website. There is lack of clarity as to whether the report is subsequently shared with the beneficiaries.</p> <p>Communication with partner groups is often through face to face meetings and these happen at least once every month. The organisation also uses print and electronic media to communicate about its work. Of particular significance the organisation documents success stories which are shared widely through the various media forms. SACU field staff holds regular consultations and interacts with the groups and group leaders on a regular basis at least once each month.</p> <p>The organisation carries out one comprehensive annual institutional audit and shares the outcomes with different stakeholders and with all its donors. SACU also took a deliberate decision to increase its cooperation with local governments and as a consequence regularly updates local leaders on its work including submitting its reports to the doors.</p>	2	<ul style="list-style-type: none"> • SACU carries out several comprehensive project audits for the different donors • No change occurred • No change occurred; website does not provide much information on activities and achievements for Uganda activities.
16. Degree of transparency towards beneficiaries			
17. Extent of upward and downward accountability by SPO			
	3c – Internal financial and human resources management		Change =
18. Extent to which internal written procedures for financial and human resource management are being respected	The organisation has comprehensive policies on all its various financial and human resource management practice. The policies in place provide direction on financial decisions and largely seem to be followed.	3	<ul style="list-style-type: none"> • No change occurred
	Dimension 4: Perception of Impact		Overall Relative change Dimension 4 : +2 (positive change)
	4a –Responsiveness		Change +1
19. Degree of incorporation of priorities of target groups in plans and activities	<p>To ensure responsiveness SACU actually enters MoUs with the groups in which the mutual expectations of either party are articulated. This helps to avoid conflict and to ensure that interventions are responsive to real beneficiary needs. SACU's efforts are linked to government priorities for the north as defined in the NDP agricultural strategy " restoring agricultural productivity for Northern Uganda ", resolving land conflict and creating opportunity for children to access education and remain in schools. Broadly SACU has gradually made it possible for its beneficiaries to meaningfully respond to</p>	2	<ul style="list-style-type: none"> • Integration of group and community approach in implementation enhances our program delivery. Program activities such as VSLA, organic agriculture, hygiene and sanitation, and social development are responding very well to the needs of households who have experienced a long-standing war period. SAC is conforming to the new Peace Recovery and Development Plan 2 program which started in
20. Degree of alignment with government policies (planned and			

implemented)	these aspirations. The work in the north if the country in particular is directly linked to the government priority of resettling and rehabilitation		2012 in northern Uganda. Since SAC is still working well with the LGs and LLGs, then they are aligning well with the government programs.
4b – Social impact		3	Change +1
21. Target group satisfaction regarding fulfillment of their primary social and/ or personal concern	SACU's work with communities has resulted into better enjoyment of relationships between spouses, improved health, (there are fewer incidences of cholera outbreaks dues to improved HH sanitation), improved hygiene, better livelihoods due to improved diets. Particularly for HIV positive people, the SACU support has enabled them to adopt a positive attitude towards life. The groups enable them to receive psycho social support and as a consequence they feel more self-confident and able to cope with their status. A member of Kisaber, one of the HIV+ groups SACU is working with, in Amur, district during the group discussion said that "SACU has given us a new lease of life".		<ul style="list-style-type: none"> • No change occurred
22. Degree to which empowerment of target groups towards public and/ or private sectors have been enhanced	In the North, 70% of participating households graduated to P3 level after one and a half year, which is faster than in other regions. Apparently households are quite appreciative of the SACU development approach. SACU supports formation of self sustaining groups and encourages groups to define their needs and to develop plans for addressing such needs. SACU provides its partner groups with knowledge and skills by delivering training, in areas such as group dynamics, gender, leadership, hygiene and sanitation. SACU facilitates groups in family cohesion, community cohesion and gender and HIV aids as cross cutting themes. In leadership SACU has actively pursued the commitment to ensure more women assume leadership of groups and community structures. In 2011 861 women held leadership positions in SACU groups, while 417 held leadership in other community leadership structures. After a period of support during which SACU believes that a group has sufficiently matured, it is weaned off or graduated. Such groups are helped through envisioning process to identify ways through which the support hitherto provided by SACU will continue without SACU. This is done through a visioning process. In 2010 - 2011 30 groups were graduated. Groups have started on savings and credit activities again, thus setting the ground for sustainability.		<ul style="list-style-type: none"> • 90% of households have graduated to P3 level in one and a half years from the 70% in one and a half years as stipulated 2 years ago. This means a 20% increase as measured by the impact assessment survey that was done. Introduction of the school gardening from 0 to 26 schools. In Lira there are 14 schools with 679 parents participating by April 2014. 12 schools in West Nile with 560 parents participating. This gives a total of 1239 participating parents. SACU has so far given out 570 heifers and 194 bulls in this current program. • 39 groups have graduated cumulatively with over 1700 households for the Northern Region alone.
23. Degree of sustainability of the social impact			<ul style="list-style-type: none"> • In addition to group dynamic among others is now Village Savings Loan Association, Farming as a Business, Value Chain Development and Disaster Risk Reduction
4c policy impact		2	Change =
24. Level of influence of SPOs towards major policy changes	SACU has continued to work with other organizations to lobby government to increase funding to the agriculture sector as it committed through the Maputo declaration. While progress on implementing this commitment is still low with government, there is increased awareness and appreciation of the need to address the funding anomaly in the agriculture sector. Many women also hold leadership at local council 1 level local council 3, they are church reverends, head mothers unions and broadly women are visible in the leadership of their communities. Many women met during the survey attribute the increased visibility of women on leadership to SACU's work. There is a clear recognition by government as SACU is partner in the "prosperity for all"		<ul style="list-style-type: none"> • No change occurred

	program at Local Government level and is well supported for its work with IDPs.		
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Annex 3: List of people interviewed

SACU STAFF - GULU

No.	Name	Position
1.	Adubango Julius	Program Officer
2.	Christine Saano	Program Officer
3.	Gerald Kwizera	M&E Specialist
4.	Oder Sam	Office Attendant
5.	Apio Josephine B	RFON
6.	Otwa Alex	Driver
7.	Okello Walter H	Intern
8.	Akiiki Rosalyne	Regional Program Coordinator
9.	Omony Patrick	LEW
10.	Omara Boniface	SEW
11.	Akullu Suzan M	SEW
12.	Adul Vicky Vanessa	SEW
13.	Anyeko Pamela	SEW
14.	Otyama Louis	AEW
15.	Ojok Bobby	LEW
16.	Amuku Derrick	LEW
17.	Arineitwe Resty	LEW
18.	Opok Yasin	LEW
19.	Otema Sam	LEW

FOCUS GROUP DISCUSSIONS

No.	Name	Group	Sub County
1.	Atim Moses	Onyakede Central	Amach
2.	Otim Bosco	Can Oribowa	Agali
3.	Ayal Job		Agali
4.	Ojok Bonny	Obanga atwero	Agali
5.	Opio Jackson	Can Ber imwolo	Agali
6.	Okwee George	Onot cing	Agali
7.	Okao Churchill	Obanga atwero	Agali
8.	Okello Nelson	Ayek ilwek	Amach
9.	Opene John William	Obanga atwero	Agali
10.	Aguma Yeko	Obanga apwoyi	Amach
11.	B'kello Anne	Ocan onote	Agali
12.	Josephine Olili		Agali
13.	Okoli Esau Ken	Ocanokiyang	Agali
14.	Ooko Tonny	Ayac	Amach
15.	Okwada Richard	Wiodyek	Amach
16.	Ongora Dick	Opit kic	Agali
17.	Okello George	Can onooe wa	Agali
18.	Otiti Nelson	Ama	Amach

Annex 4: List of documents consulted

Annex 5: Testimonies of SACU beneficiaries

a. Joyce Okaabo (Chairperson)– Ajuk Women’s group Alyecjuk parish Dokolo district

Ajuk women’s group has a membership of 40 people. The group was started in 2003 before SACU’s program came. Over the years some members left the group and new ones joined. Ajuk Women’s group started working with SACU in 2011. In the days before SACU life was difficult as Ajuk Women’s group was not involved in farming as a group. The general sanitation and home hygiene in the member’s homes was very poor especially when members lived in internally displaced peoples camps.

Impact on livelihood.

“My life has improved through the kitchen gardens around and hence I am now able to pay school fees for my children. Last season I grew onions and got 400,000/= when I sold them. I used the money to pay my children’s school fees and I also bought a goat and I still have more onions left. At the market each kilogram fetched 3,500/= .

We didn’t know how to protect the environment. We were not sensitized about the issues of gender roles and so didn’t know. We knew nothing about improved cook stoves. Instead we only knew the three stone cooking stove which wastes a lot of firewood and destroys the environment. There was no knowledge and skills about the modern methods of farming. We didn’t know that chicken, cow and goat dung was very important and that we could use it as organic manure. Group chairperson

There is food security and improved nutrition at my household now. My family no longer goes without food we take 2 full balanced diet meals a day. SACU gave us the seeds we are planting and we have planted carrots, soya beans and onions. And besides eating we sell some of the vegetables and the income enable us to buy other household needs such as oil and soap. There is equal sharing of roles and work at house level with the children and their health has improved through change of diet and they now go to school. We now also save together as a group. I got a loan from the savings group and topped up with the money I had and bought 2 pigs. We have got skills and knowledge to do farming like how to plant bananas and also using compost, sanitation and home hygiene. These used to be challenges for us but now everything has greatly improved. On household hygiene SACU taught us how to make brick sofa sets and now our households a comfortable and enjoyable.”

b. Beneficiary testimony from Evelyn

Evelyn who started off with one banana sucker and now has a banana plantation. “I had gone for prayers somewhere where a farmer had some bananas growing. I asked to be given just one banana sucker and it was given to me. On returning home I planted it. I used the knowledge from SACU training to feed it with compost and the sucker grew and started multiplying. Now from that one sucker I have an entire banana garden. I am now selling bananas and we are saving money out of the sale of bananas and we want to construct a permanent house.”

c. Evelyn’s neighbours, a newly married couple

“As a man I appreciate SACU very much because it has trained us in home sanitation and improved farming. It has also helped in the reduction of domestic violence in homes. We no longer fight, no longer quarrel in the home and share roles together. SACU is sensitizing us on domestic violence reduction, HIV awareness, leadership, how to manage money and communication skills.

We have a range of enterprises like the vegetable gardens, cows, ground nuts, simsim, cassava, sweet potatoes and bananas and some of these crops are for food security. We got 200,000/= from banana sale last year. The major expenditure area for the household is cooking oil, soap, sugar and salt because these are needed on a daily basis. We now easily meet these daily expenditures. In terms of food production it normally lasts a year so we don’t normally run out of food. We sell some

and also keep some for home consumption. We have no children as yet. We have now entered into farming as a business as we expect a lot of changes in our lives. We will be able to build a permanent house, and when the children come we will be able to have enough money to send them to school.

Impact on non SACU supported farmers.

Many other people in the village both men and women, now desire to join SACU groups. However at the beginning when SACU was mobilising us some never joined due to laziness and lack of trust in the program. When they visit my home and see all these changes they call me a rich person. They always ask me how I did it and want me to train them and I always invite them whenever a SACU training is organized.

Many have approached us to help them in making the brick sofa sets and so far we have made brick sofa sets for four households of non members. The non members too have adopted energy saving stoves, the brick sofas, the kitchen gardens and they are also involved in income generating activities such as small eating places by cooking food say on a market day.

My future plan is to move from a grass thatched house to a permanent house With the knowledge and skills from the SACU trainings we are more confident of the future and I have two children in primary and two in secondary three of whom are in boarding school . I am confident that they will make it to college.



The sitting room for Mrs. Okaabo with traditionally made sofa sets and improved cooking stoves



Mrs. Okaabo's Kitchen garden



Vincent and Evelyn in their traditionally made sofa set and in their banana plantation

d. Florence Okwir of Adwoki group, Agwiciri parish in Dokolo district.

“I am a peer farmer in that people come to learn from me and I also go to teach them. When these people come to learn from me, they don’t pay me. I teach them because of love, I was taken for training by SACU to Kasenge (an agricultural training centre) in Mukono district and hence I also want to share that knowledge with my group members. This training was for 2 people per group. I learnt home sanitation, farming using organic pesticides and this is now what am teaching to the other farmers. The people who come to me for training are mainly members of my group but even non members come for the training.

Because of SACU I now know how to maintain my home, plant vegetables and farming as a business. In addition we are now together as a group, we have acquired skills through the SACU trainings and I now get money out of my small gardens. I have green pepper and passion fruits which is ready for sale. I also have carrots which we as a family are eating and we now eat a balanced diet. The challenge with carrots is that at times it is affected with too much sunshine. Cabbages are also very tricky to grow and I use organic pesticides to maintain them. I now want to grow onions on a large scale so that I get more income. There is market for the vegetables even if there are times when you take the vegetables to the market and you fail to sell all. Some children prefer vegetables and other carrots. The children as a result of eating balanced meals, are now healthy with reduced cases of sickness. I have also managed to build a permanent toilet.

At the moment I don’t have an ox plough to help me in farming because I chose to take a crossbreed cow from SACU. If SACU gives us ploughs my life will be much easier. All group members have pit latrines and are now reaching out to non members who ask for help in constructing for them pit latrines While the group members don’t pay for this service non members pay a small amount. This activity has forged unity among the entire village community.”

With regard to the future activities she said: “We have a very big challenge of water and storage for our produce where we want SACU to offer help. During the harvesting time you don’t want to sell everything at once because the prices are often low. The produce store would enable us to hold on to our produce until the prices go up.”



Florence showing off the carrots (left) and green pepper (right) from her kitchen garden

e. Jenty Odongo – Chairperson Wekomare farmers group in Alito Sub County, Kole district.

Wekomare farmers group is composed of 30 women and 7 men. Wekomare farmers group started in 2007 when people had just come back from the IDP camp. At that time all the houses along the road from Alito Sub County to the Lango – Acholi border had been burnt. We had no where to stay and so we started by cutting grass for roofing houses. Some people from Apac district advised us to be in a group as it makes it easier to be helped. We started working with SACU in 2011. The group is registered up to the district level and has a bank account that is managed by the group itself. Three

people, Chairperson, Secretary and Treasurer run the bank account. Each group member contributes a fee of 5,000/= annually and the money is banked on the bank.

Impact of working with SACU

Before we joined SACU, there were so many things we did not know. We did not know about sanitation and hand washing which caused plenty of illnesses such as stomach aches. Some of these impacts are summarised below.

Partnership with SACU has brought a lot of changes to the community e.g. household hygiene in which we are required to sweep our compounds before going anywhere. SACU has given us tree seedlings, advised us to set up kitchen gardens, enabled us to have balanced diets. SACU has taught us about domestic violence and taught us to make traditional sofa sets and some few members have constructed permanent buildings. SACU has taught us how to work together as a family in a home and now there is sharing of roles. As a result people are now happier, smart and children in school.

SACU has supported formation of VSLA through which members make weekly savings and also borrow and at the end of the saving cycle we organize a party and celebrate. We have therefore learnt to share and support one another in both difficult and joyous times. Mobilizing women to participate in groups has become easier because men have become more supportive realising that it brought a lot of changes in their homes including increasing household incomes and increases household wealth such as cows.

The VSLA aspect of the group

The group has an overall Chairperson as well as a Chairperson responsible for the VSLA, agricultural production and livestock. In our VSLA a members save a minimum of 1,000= and a maximum of 5,000/= per week and when they can borrow up to twice or thrice their savings depending o the available amounts collectively saved. Loans are given out every week specifically for business purposes. Loans are normally for a minimum of a month and a maximum of 3 months at a 10% interest. Failure to repay the money in the specified period has to be explain to the group.

The group has been saving money for two years and so far there has been no problems to warrant drastic measures such as general assembles and police. The VSLA awoken people to income generating possibilities they would not have thought about before such as selling porridge in the market. A SACCO bank that had been set up at the Sub County has since closed and VSLAs are avoiding the reasons for its closure such as male domination and over borrowing.

About the future;

SACU should consider :

- We still need support (knowledge/training, cash that can boost members VSLA savings so that members can borrow bigger amounts than what is possible currently from the amount of three times what someone has saved.
- SACU has so far given livestock to several group members but another 17 are yet to get. So they should also be supported to strengthen cohesion. We are kindly asking SACU to continue with the group for 2 – 3 years. We also want other people to benefit from SACU but it will be best if every member has got a cow.
- Since we they are already given us the foundation and ensure that all members receive the pass on, the group will then manage. When those cows start producing we will be able to get milk and hence able to solve our problems. This means that there will even be money for saving in VSLA.



Jenty Odongo with other Wekomare group members in her kitchen garden



Jenty Odongo in her traditionally made sofa set and in her kitchen using the improved cooking stove



Members of Wekomare farmers' group in the maize demonstration garden and Jenty Ogongo with the cow which SACU gave to her

Joint MFS II Evaluation: Civil Society Strengthening –Uganda

Technical report on Mango Tree’s Civil Society Strengthening

1. Introduction

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MFS II Funding	ICCO Alliance

Mango Tree (MT) develops and produces custom-designed educational tools that are durable, portable and culturally appropriate. It presents itself as “Innovators in Education and Communication”. Mango Tree is a private limited, employee-owned company which depends on clients to pay for its services. Mango Tree’s main aim is to enhance the educational abilities of young people. Over the past few years, Mango Tree has tremendously grown with programmes and projects supported by a wide range of donors and partners including for instance SNV and UNICEF.

At the moment Mango Tree carries out three main programmes in the Educational sector: (i) The Uganda Literacy Project; (ii) The Literacy Laboratory Project (LLP) and (iii) Strengthening a Literate Society (SLS). The Strengthening a Literate Society program is supported by ICCO (50%) and is focusing on fragile states and education. The project supports two language boards in Northern Uganda (Lango and Kuman) to develop their orthographies, print and distribute basic reference materials related to the language, train local writers, editors, illustrators and graphic designers, educate the general population about the importance of local language literacy and build the language boards internal capacity so that they are able to make a meaningful contribution to local language literacy education in Northern Uganda.

The Mango Tree MFS II funded work is carried out in the Lango sub region of Northern Uganda. Mango Tree aims at creating the systems, methods and capacities so that children in war-affected Northern Uganda will attain a meaningful and relevant early primary education with a focus on attaining reading and writing skills in their mother tongue, Leblango. ICT improvement will play an important role in the project.

Mango Tree has a central office in Kampala, a semi-autonomous local office in Lira town (Northern Uganda) and now also an office in Juba (South Sudan) and with plans for another one in Zambia. The Lira office operates relatively autonomously and has a 14 member staff with an annual budget of around EUR 47,000. LLP functions as the social responsibility arm for Mango Tree. Through the small profit margins generated from printing and sale of books and other training materials the company’s sustainability is guaranteed.

Purpose and outline of technical report

This report is presenting the contribution of Mango Tree to the Civil Society Strengthening with regard to the Leblango Language Board in the context of their Northern Uganda Literacy Programme. The project of Mango Tree focuses on the improvement of the reading and writing skills in their local language of young children in the first three years at Primary School. A key element of the enhancement of the use of the local language as a language of instruction is the development and promotion of a new orthography. After the introduction of the context and the description of the project, the report intends to analyze the contribution of the Mango Tree activities to the realization of the overall and specific objectives of the project. Moreover, in this report the findings are presented of the major changes in Civil Society Strengthening as realized by Mango Tree between 2012 and 2014 according to the indicators based on the five CSS dimensions.

2. Context

Mango Tree is operating in Lango Sub-region in the Northern Region of Uganda where people have suffered significantly from the more than 20 years of insurgency. Lango sub-region covers the area that was known as Lango District until 1974, when it was split into the districts of Apac and Lira, and subsequently into several other districts. Currently it encompasses a total of eight districts. The sub-region is home mainly to the Lango ethnic group. According to the 2002 national census, the sub-region had an estimated 1.5 million people at that time. Traditionally Lango society was segmentary with leadership centered around the clan (more than 100 different clans are being recognized) which would be both a kinship unit and the basic constituency of politics within the chiefdoms.

The more than twenty years of war has had an enormous impact on the demographic and skills base of the region. A large percentage of the population are currently under 18 with limited or no education and skills. Traditional subsistence farming is unfamiliar to many young people, who have grown up in IDP-camps during the war. The lack of skilled labour poses a significant risk that local people will not fully benefit from the opportunities that become available during economic recovery, in turn reinforcing the economic marginalisation of Northern Uganda.

The period of insurgency which ended around 2007 has significantly affected all sectors of the society and education in particular. From around 1.8 million internally displaced people, 1.4 returned to their places of origins in recent years, but still they are in need. Upon the gradual return of peace in the Region, the Government of Uganda launched the Peace, Recovery and Development Plan for Northern Uganda (PRDP) as a strategy to eradicate poverty and improve the welfare of the populace in Northern Uganda.

The Education Sector Strategic Plan of the Ministry of Education and Sports (MoES) prioritises both increased access for all children and improved quality of instructional programmes. A particular challenge that the people in the Lango sub region are trying to address is re-establishing and improving the education delivery and performance after so many years of civil war. The work that is being done by Mango Tree in improving learning especially in the lower classes, therefore fits well with the overall district priorities in the education sector. At national level education is prioritised as one of the key growth sectors by the NDP government. Therefore Mango tree's work equally responds to national priorities.

The Mango Tree programme based in Northern Uganda operates in a context with school systems characterized by the same limiting conditions prevailing in much of sub-Saharan Africa -- class sizes of

up to 100 children, only few classroom instructional resources, and embedded in communities without strong traditions of mother-tongue literacy. Mango Tree's Literacy Laboratory Project (formerly the Primary Literacy Project) focuses on improving pupils' performance in reading and writing in their local language and English in the first three years of primary school. Mango Tree has developed a literacy instructional model, methodology and teaching and learning materials for early primary classrooms in both the mother tongue and English.

3. Project description

This Mango Tree MFS II 2012-2014 endline evaluation focuses on Mango Tree's Northern Uganda Literacy Programme (NULP). The NULP consists of two distinct, but interrelated, projects that contribute to learning outcomes for pupils and improved instruction for teachers. The projects are the Literacy Laboratory Project (LLP- formerly the Primary Literacy Project PLP) and the Strengthening a Literate Society (SLS) Project. Funding to Mango Tree is related to the SLS Project which is being implemented in the Lango and Kumam language communities. MFS II funding support is from its Dutch partners, the ICCO Alliance/ Edukans and the C4C consortium/ IICD. Collaboration with Edukans started in December 2009 with a two-year funding which was later on extended till November 2014.

The NULP overall goal is "to improve literacy performance among pupils in early primary classrooms (P1-P3) and strengthen the literacy infrastructure in northern Uganda so that reading and writing, especially in the local language, become a meaningful part of daily life."

Strengthening a Literate Society (SLS) Project

Mango Tree aims to contribute to the changing of the curriculum of primary schools by introducing the local language as the mode of instruction during the first three years when students are developing their reading and writing skills, they are advocating a major change in the schools they are working with through the Leblango Language Board. This is a 3 year project (2012 – 2014) running in 128 schools in 7 districts of the Lango Sub-Region (Alebtong, Kole, Oyam, Otuke, Dokolo, Amolatar and Lira Municipality). It is being supported through the MFS II program for about 50%. The other main donor is the US-based Hewlett Packet Foundation.

The Specific Objectives of the SLS Project are:

- Well researched and clearly defined orthographies for the Leblango and Kumam languages.
- Well-managed language boards for the Leblango and Kumam languages.
- Trained writers, translators, artists, graphic designers and editors actively contributing to the development of books and other literacy resources.
- Increased knowledge of and appreciation for the Leblango and Kumam languages among the general public and a sustained demand for local language goods and services.
- A sustainable publishing industry in the Lango Sub-region and an effective distribution system from the producers to the consumers of literature.

Target groups of the project are:

- The Language Boards for the Lango and Kumam language communities, respectively LLB and KLB;
- The Lango and Kumam language communities;
- Local writers, artists, graphic designers, editors and linguistics;
- Primary school students and teachers;
- District Education Offices and Officials;
- NCDC and the Ministry of Education and Sports.
- Local printers and publishers (of Educational Material).

(source: C4C project description)

The main strategy of the LLP programme is in delivering mother-tongue literacy instruction. In the Mango Tree model local educators are prepared to perform multiple roles necessary not only to deliver mother-tongue literacy instruction to early primary grade students, but also to bolster and sustain the effect of this instruction within the community as a whole.

The main activities of the Mango Tree SLS Project is the support to the Lango and Kumam Language Boards to revise and standardize their respective orthographies; print and distribute basic reference materials related to each language (especially to teachers and local education officials); train local writers, editors, illustrators and graphic designers to develop literacy materials in local languages; educate the general population about the importance of local language literacy; build the language boards' internal capacities so that they are able to make a meaningful contribution to local language literacy education in Uganda; and increase communities' knowledge of, and appreciation for, their local languages.

The Lira program office has been responsible for implementing the MFS II funded activities. Since 2012 Mango Tree has been carrying out the three programs: (i) The Uganda Literacy Project (ULP); (ii) The Primary Literacy Project (PLP), (iii) the Strengthening a Literate Society programme (SLS).

The latter SLS program is supported by ICCO (50%) which is focusing on fragile states and education. The project supports two language boards in Northern Uganda to develop their orthographies, print and distribute basic reference materials related to the language, train local writers, editors, illustrators and graphic designers, educate the general population about the importance of local language literacy and build the language boards internal capacity so that they are able to make a meaningful contribution to local language literacy education in Northern Uganda. The Mango Tree MFSII funded work is carried out in the Lango sub region of Northern Uganda.

Budget MFS-II	?	(ICCO Alliance/ Edukans; 01/11/2011- 31/10/2014)
	€ 60,871	(C4C/ IICD; Jan 2012– Dec 2014)

4. Data collection and analytical approach

Key outcome selected

The Mango Tree endline evaluation 2014 focuses on the Northern Uganda Literacy Programme (NULP), which Mango Tree implements with support from its Dutch partners Edukans (ICCO Alliance) and IICD (C4C consortium). This marks a slight shift from the baseline period where focus was on Mango Tree as an organisation. It is also in recognition of the fact that Mango Tree as an organisation has significantly increased its portfolio of programmes and projects. The focus of the contribution analysis will be on the development, promotion and propagation of the New Leblango Orthography and its application in Primary School Education in Northern Uganda.

This key outcome was selected because it is an integral part of the work done by Mango Tree in supporting the Leblango Language Board in Northern Uganda. The key outcome of improved reading and writing skills of primary school children is the most important goal of the project and hence this has been selected in its context.

5. Results

5.1 Relative changes 2012-2014

The assessment of relative changes has been done against the indicators used in the baseline; the descriptive part for the endline is provided in detail in Annex . The scores of relative changes are given in the following table. The table further below presents a short description of the highlights on which the assessment of the Endline relative changes is based including the score given in the endline.

Criterion	1a	1b	2a	2b	2c	3a	3b	3c	4a	4b	4c	Total
Baseline	2	1	2	3	2	3	2	2	3	2	2	2,20
Endline	+1	=	=	+1	+1	+1	+1	+1	=	+2	+1	+9

Score: **Baseline** 0-3 0 lowest score and 3 highest
Endline = no change;
+ 1 resp – 1 little change better resp worse;
+ 2 resp – 2 substantial change better resp worse

Short description of the highlights explaining the relative score of relative change 2012-2014

Evaluation Criterion	Explanation of score relative of relative change 2012-2014
I. Civic Engagement	Positive development: +1 overall
1a- social engagement	Implementation of planned activities are at the moment increasingly done by beneficiaries, in particular the Leblango Language Board
1b- political engagement	No change; very little political engagement
II. Level of organisation	Positive development: +2 overall
2a-organisational level	Consolidated; main network partners remains limited to the LLB and KLB.
2b-dialogue and communication	There is an expanding communication network of which use is being made to promote the new orthography and the use of Leblango
2c-financial and human resources	Mango Tree largely depends on external donor support but operates as for-profit organisation with shares held by the staff
III. Practice of values	Very positive development: +3 overall
3a-internal governance	Mango Tree now involves LLB and KLB in planning processes and budget issues.
3b-transparency	Accountability is now given to both members and partners LLB and KLB
3c-internal management	Clear handbook on financial policy and procedures. An important innovation is that now money is sent directly to beneficiaries (e.g. trainees) through registered mobile phones.
IV. Perception of Impact	Very positive development: +3 overall
4a-Responsiveness	Mango Tree now has an MOU and a contract with LLB. There is also an MOU with KLB. But not clear how Mango Tree responds to its various target groups and stakeholders.
4b-social impact	Overall use of the new Leblango orthography has been enhanced and accepted. The LLB has been able to promote the new orthography into the Primary School Curriculum, to Local Language Writers, to Local Publishers, etcetera. The Primary Literacy Project (PLP)'s reached 23 primary schools by the end of 2013 (target 24). In terms of pupil numbers, out of 10,000 targeted the project managed to reach 8,200 that is more than 80% achieved.
4c-policy impact	LLB was one of the local language boards that influenced the retention of local languages in the curriculum where NDC had scrapped them off during curriculum reform proposals. The Chair of the LLB is nationally one of the main proponents of Local Language retention and promotion, and has become the national chairperson of all Language Boards.

5.2 Contribution Analysis

Case study: Mango Tree's contribution to the development of a New Leblango Orthography and its use in primary education.

1. Case background

In 2006, the National Assessment of Progress in Education (NAPE) conducted by the Uganda National Examinations Board (UNEB) indicated that only 45.6% respectively 42.6% of P3 pupils (equivalent to Grade 3) reached a defined level of literacy and numeracy. A primary factor for failure of primary school students lay in teaching practices that were non-child-friendly in nature. Children were not adapting to English language instruction due to the prevalence of local languages in their families and communities. These children who must assimilate to a new language of instruction upon entering primary school are usually at risk of dropping out of school.

Mango Tree's SLS project supports two language boards in Northern Uganda to develop their orthographies, print and distribute basic reference materials related to the respective languages, train local writers, editors, illustrators and graphic designers, educate the general population about the importance of local language literacy and build the language boards internal capacity so that they are able to make a meaningful contribution to local language literacy education in Northern Uganda. Through its support programme to the Leblango *Primary Literacy Project* (PLP), Mango Tree trains teachers and thus intends to augment the government-led Community Centred Teachers program. Mango Tree aims at creating systems, methods and capacities so that children in war-affected Northern Uganda will attain a meaningful and relevant early primary education with a focus on attaining reading and writing skills in their mother tongue, Leblango. In order to do so, Mango Tree has facilitated the development of a new Leblango orthography which replaces the one introduced under colonial rule which was widely considered to be inappropriate for teaching and learning purposes as both reading and writing were difficult. Many different ways of how compound words were written existed.

Mango Tree has introduced the new orthography in 12 government schools while in total there are 19 government aided schools and 24 private schools in the municipality of Lira. The 12 participating schools were selected by MT by making use of coordination centres which are the outreach wings of the primary teachers colleges (PTCs). Moreover, during school term one in 2014, Mango Tree has been able to distribute 18,000 books to children in Primary one – Primary three benefiting approximately 70,000 children. In addition Mango Tree provides children with training videos translated from English.

2. Theory of change

Mango Tree's SLS project objective is "to improve literacy rates in the Lango and Teso Sub-Regions" This is to be realized through the development and promotion of the New Leblango orthography in such a way that the writing of the language better reflects the real sounds of spoken Leblango so it can be used as a language of instruction at Primary Schools and for its wider use within society. At the beginning of every school term the SLS project is providing training in Leblango language to 4 – 5 teachers per school in the use of the new orthography guides developed by MT. The orthography guides developed by MT are also being promoted by the Leblango Language Board (LLB). Elsewhere in the country other language boards are invited to follow the example set by LLB. The specific steps followed by Mango Tree to reach its goal are (*source: C4C website/ project description Mango Tree*):

- *Situational Analysis of the Leblango and Kumam Languages.* Mango Tree hired the external institute Summer Institute of Linguistics (SIL) based in Entebbe to conduct a research study on the Leblango and Kumam languages and to write a report on their orthography. The information presented in

the situational analysis for both languages is supposed to assist the Language Boards, project team and SIL to develop the orthographies and dictionaries during the project.

- *Orthography Development.* Following the situational analysis, SIL presents the results of their findings to the Language Board members and other individuals. The process for orthography development will be discussed and upcoming specialized workshops and trainings on tone, vowel quality and other linguistic-related topics are being planned for the next year.
- *Revision of the New Orthography* through SIL-led Language Board Orthography Workshops. Two workshops have been held at the SIL training premises in Entebbe led by the institution's expert linguists. A small committee of LLB members and of the Kumam Language Board participated in the final revisions of their respective orthographies for the formal approval of the new orthographies and their further promotion.
- *Dissemination of the New Orthography.* Training of Trainers Workshops on the New Orthography are being organised to introduce the orthography Guide, Transition Literacy Documents and Dictionaries in order to promote the new Orthography as widely as possible. Workshops are organized for 2 LLB representatives from each of the 8 districts of the Lango Sub-region to train these LLB's district representatives so that they can provide literacy workshops in their districts for interested adults (including primary school teachers).
- *Documentation Activities Related to Working with Language Boards, Orthography Development and Linguistic Topics.* The MT Project team documents lessons learned and best practices working with Language Boards to develop their orthographies and dictionaries, including the most successful ways to assist communities with language and local literacy development.

Throughout the project period and in order to further promote the approach at national level the Mango Tree team will document in detail the approach to working with Language Boards in Uganda for sharing widely with education stakeholders including the Ministry of Education and the District Educational Offices. Through these advocacy activities, MT will share their model and advocate for scaling it up to other language communities around the country.

3. Effectiveness and results

The main results of the Mango Tree's Strengthening Literacy Project (SLS) are:

Orthography developed

From the situational analysis of both Leblajo and Kumam languages conducted by Mango Tree, it emerged that the writing system, as well as the reading and writing materials in use in Lira and other Lango districts were poorly elaborated and not reflecting the way it is spoken. A subsequent analysis provided MT with the conviction that it was necessary to revise the writing system. MT liaised with the Summer Institute of Linguistics (SIL) for support in terms of the language development skills. MT held several workshops for both Lango and Kumam and subsequently began the revision of the orthography. Thereafter it came out with the first two orthography working booklets for both Lango and Kumam languages. Later when the Research Triangle Institute (RTI) joined, they noted that the η sound was missing. Subsequently the materials were revised again.

Propagation of the new Orthography

Between 2012 and 2014, although it appeared not easy to familiarize with the new orthography of 35 alphabetical letters in Leblajo, the LLB managed to penetrate the communities through various forms of promotion such as the use of cultural leaders and radio shows. This made it able to reach out to the many people in Lango and neighbouring Sub-Regions such as Acholi.

Once the local population accepted the new orthography the next step was to engage the National Curriculum Development Centre (NCDC). In addition for further scaling up and adoption of the orthography LLB produced and circulated a junior dictionary and has commenced the process of developing an advanced version of the dictionary. MT is primarily supporting the development of LLB, currently regarded as the most active and most advanced language board in the country. LLB has overseen the production and distribution of various books which are currently being used in the several pilot schools in Lira.

Under the International Reading Association (IRA) funding, LLB has been able to train District officials, journalists and teachers although the trained people are not as yet putting into practice what they learnt. A writers club has also been created and the members meet regularly at the LLB offices. The writers club has enabled different writers to use the new orthography and to constantly popularise its use.

Development and dissemination of educational material

Since the new orthography was started, books have been written which are being used for the lower primary pupils in P1 to P3. MT has provided instruction and educational materials to primary schools that teachers and children can use at every stage. At the beginning of every school term the SLS project manager provides training to 4 – 5 teachers in Leblanjo language making use of the orthography guides. With the help of the new educational material the pupils appear to be fast learners of the new orthography. Without the books it would have much more difficult for the pupils to pick this up so easily. The learning environment in the schools has greatly improved with children now happier because they are no longer left on their own as used to be the case in P1 in the past.

The teachers too are guided by a very strict curriculum and are no longer left on relaxation. During holidays MT organises teachers training workshops during which they discuss the problems they encounter and collectively they find remedies. They also discuss the use of the curriculum and its successes. These workshops are done for all the schools that are in the program in Lango Sub region. These schools include those put on a special program by MT, then there are those schools under CCT and also the ones without. In total, the number of schools on the program is 36 (municipality and the district taken together).

“MT has introduced the production of teaching materials using sacks while in the past people have been using manila papers, some of the sacks are also used as pockets for storing materials which is a good innovation and it is appropriate for some of the environments in the schools. You can have a classroom which is not well constructed where walls are rough so we find this working. Only those project schools can produce the materials because they have gone through the process.”

Frances Jane Ofugi, Lira Municipal Education Officer

MT was able to work on the challenge of negative attitudes among the teachers. For instance in one school, the teacher presented by the school management to join the LLB class was already considered a ‘problem teacher’. He was known for being stubborn and not reporting frequently for duty. However in the process of attending the LLB training, this teacher reformed and transformed into the best infant teacher committed to attending to his class.

During one school term in 2014, Mango Tree managed to distribute about 18,000 books for children from Primary One (P1) up to Primary Three (P3) which serves around 60,000 – 70,000 children. The high quality and yet cheap to produce training materials provided by Mango tree to schools, have opened up teachers eyes to the possibilities of instruction in the native language. At the beginning there existed considerable difficulties of the teachers in changing from using English to Leblanjo as the language of instruction. This was because they didn’t have enough teaching materials in the local

language (Leblango). After MT started printing and distributing those books in Leblango, the work of the teachers was substantially eased. Another factor was that almost the entire lower primary teachers are Lango native speakers recognizing the advantages of the new orthography and the usefulness of the new educational materials.

Reading and writing skills enhanced

When visiting primary schools which have introduced the new orthography and Leblango as the language of instruction in P1-P3 both teachers as well as the students express an enormous enthusiasm. The reading and writing in Leblango for the children is so motivating that they don't want to miss learning as was often the case before; school attendance has increased according to the teachers interviewed: "Children do not want to be left behind". Before, the mode of learning was in English starting from P1. When the children are given homework, they go home and even involve their parents in case of any help needed. The improvement in reading and writing is tested by a kit provided by MT. The schools also use the kit for the follow up with parents at the PTA meetings which are organized every term. It appears that the parents are very supportive with regard to the new Orthography.

Otim Tom Primary school that joined the Mango Tree program in 2013 attested to the fact that there is much improvement with regard to reading and writing among its students. Most of the children who started with the programme at the beginning of 2013, and who are now in P2, are able to read very well the simple readers in Lango. Teaching has been simplified for the teachers because once they have learnt one the orthography of the local language teaching becomes very simple. In addition the teachers are now very committed, supervision by the Head teacher is simplified because the teachers have a well laid-out curriculum they follow and MT field workers are in place to visit the schools on a weekly basis. There is also increased involvement in the education commissioner's supervision of the learning in the schools.

Mango Tree's 2013 external impact evaluation of the Primary Literacy Project (PLP) clearly underpins the results indicating major gains in literacy amongst P1 and P2 students in Oyam District. The assessment included scoring on Letter Name Knowledge, Sound Recognition and Oral Reading Fluency in 2011 (P1 only) and 2012 (P1 and P2) compared to a baseline made in 2010. The assessment was done for all schools included in the PLP and a number of non-PLP intervention school which served as comparison.

The 2010 baseline which compared PLP and non-PLP schools indicated that there was no systematic difference between the schools: on two of the three they even scored slightly less (P1). In 2011, PLP schools (P1) already showed big differences on the three indicators with gains of more than 150% (LNK) to 500% (ORF). The gains in 2012 were even bigger for P1 and were expanded for P2. It was concluded that in PLP schools "P1 students performed as well as or better than comparison learners at the end of P2, meaning that they were slightly more than one year ahead in terms of literacy". (*source: Mango Tree NULP-PLP Results Summary 2013*)

Moreover, in 2012, only 360 students sat for Leblango national exams organisation by the Uganda National Examinations Board (UNEB) In contrast, in 2013, over 1,700 students sat for the UNEB Leblango exams. The significant increase in number is attributed to the work Mango Tree and LLB in sensitizing the community in Leblango. As a result after Luganda, Leblango is currently the local language with the second highest number of students examined at UNEB level.

Leblango Language Board strengthened

With funding from the Dutch consortium through MT's SLS project, LLB has been capacitated with financial management, skilled staff and leadership systems and is now a fully registered CBO running several activities some of them income generating. Currently Mango Tree transfers funds to LLB and

they are able to handle the money on their own. Radio shows previously run by MT are now completely handled by LLB.

The outcomes of LLB's work include;

1. Approval of the Leblajo orthography by National Curriculum Development Centre.
2. Increased appreciation of mother tongue education among the general public.
3. Lango Language Board provides training grounds for interns from Makerere University

Other activities implemented by LLB include:

- i). The Trust Africa Fund which helps in producing simplified and translated orthography copies;
- ii). Translation bureau that leads in translating various materials into Leblajo;
- iii). Conducting orthography trainings for which many people are now yearning;
- iv). Conducting book reviews mostly in Leblajo and English;
- v). Developing materials in the local language;
- vi). Plans are under way to start up a newspaper in Leblajo and also publishing.

National dissemination

Indirectly through its LLB work, Mango Tree has taken the forefront of promoting language boards development in the country. The Chairperson of LLB was elected as Chairperson of all language boards in the country and he is using the LLB experience to ignite interest in the revival of Language Boards in other parts of the country as well.

Building on the successful work with the LLB, MT extended support to Kumam Language Bboard (KLB). Kumam LB is the second Language Board that MT is providing support to despite the fact that MT on the onset did not have sufficient funds to cover KLB. Kumam is a very tonal language, a factor that makes the English alphabet entirely inadequate in representing it. MT has called upon the SIL consultants to do a tonal analysis for Kumam, followed by steps to revise the orthography. Documentation is available for all the steps that were taken in implementing the revision of both Lango and Kumam orthography. Growth of the Kumam Language Board (KLB) is also an outcome of the contribution of LLB in addition to the work by MT. the Kaberamaido district has committed to take up and support the further development and operation of the Kumam Language Board.

Moreover, in Central Uganda at a request from Mubende district, orthography guides in Luganda and a teacher's guide were developed with MT support and are now in place and being used in the district.

The Mango Tree has also produced and made available a video which illustrates the organization's working procedures and methods for promoting first language literacy instruction in the primary grades within the context of the Lango Literacy Project.

"They have made progress as there is a difference between schools that are applying the orthography and those that are not. There are more confident learners in schools that are using local language. They are not fearing and timid and there is a whole life skill that comes with this. The pupils can now easily express themselves in the local language."

Frances Jane Ofugi Lira Municipal Education Officer

4. Contribution analysis

The positive outcome of the development of a new orthography of the Leblango language and its application in the Primary Education and wider use in Lango society can be greatly attributed to Mango

Tree and its collaborating partner, the Leblango Language Board. The Primary Literacy Project operates on a multi-faceted approach that addresses development of a new orthography, materials development, training of teachers, language proficiency assessment, and the building of a sustainable organisation supporting the process.

Development and dissemination of a New Orthography

First of all the focus of Mango Tree has been quite unique in the country to provide an example of a mother-tongue based education approach based on and preceded by the development of a new orthography. Although Mother tongue days have always been celebrated, through the work of Mango Tree in combination LLB it has gained an additional momentum and significance. The successive steps being applied to the development of the new orthography – Situational Analysis by experts up to the Review of the proposed orthography by native speakers as represented in the Language Boards - have proven to be necessary steps to the development of the Orthography.

Given the lack of a standardized Orthography it was not difficult to convince people to accept the new way of writing seen from the point of view that they would make sounds lighter or heavier and that such changes would make a difference in these words which are written the same but have different sound. Radio programs were an effective strategy and instrumental in communicating and disseminating these changes. The radio programmes made it possible for the new orthography to be discussed by both writers club, elders and the youths and parents who participated by calling in. The calling in was facilitated by MT by giving airtime once a week to select people e.g. Members of the language board and policy makers who would then explain the policy and the justification for educators to support.

Material development

The development of instruction material for both students and teachers of primary school has proven to be a very important step to disseminate the use of the New Leblango Orthography. This new instruction material has been introduced with the launching of pupils and teacher books with support from Mango Tree. Regularly LLB organises a radio talk show explaining how the mother tongue orthography has been introduced and how it can be used. Also once a year during the celebration of the day of the Mother Tongue, the day's funfair now includes promotion of the local language through traditional dances, songs plays and reading of poems, plays and articles by local writers and shows the material that has been developed. All these activities encourage learning to appreciate their native language. Many people such as the Lango Cultural foundation, district officials and schools participate in these events

Teachers training

The Mango Tree training model recognizes the important role that primary school teachers need to have appropriate knowledge of the local language for an effective alphabetisation of young children. The first training module is focused on providing teachers with a solid foundation in the Leblango orthography, including grammatical features and letter names and sounds. This approach has proven to be important for standardizing instruction in a language with many dialects (*source: Mango Tree website*). Teachers interviewed during the evaluation indeed indicate that the instruction provided by Mango Tree of the new Orthography has provided them with a much more adapted method of learning young children to read and write.

The materials developed are accompanied by an instructional approach that the SLS project is applying which relies on a carefully devised story-based literacy curriculum. Each week of instruction is anchored in an illustrated story that serves as the basis for developing phonics and word attack skills. The stories and the vocabulary presented in them, all of which are heavily illustrated, also support students' comprehension and writing skills. As said at the start of each new school year MT is providing teacher training to learn about and to apply the new orthography.

Another important element is related to MT's motto: "Go slow to go fast." According to MT model it should take about two years to introduce all the Leblango phonemes (letter sounds) as opposed to other approaches which introduce all the sounds in just one year. The MT model intends to take into account the realities of Ugandan classrooms (high learner and teacher absenteeism, under-trained teachers, lack of pre-primary preparatory skills development) and introduces the content slowly, providing lots of time for repetition and revision. The instructional approach in P1 and P2 is also similar, implying that teachers trained in the P1 model can also easily teach the P2 model with limited additional training (*Source: Mango Tree NULP-LLP Results Summary, 2013*).

There is improved relationship between upper and lower school teachers even though upper school teachers teach in English and lower school teachers teach in Leblango.

Involvement of parents

Mango Tree recognizes the vital role that the community, especially parents, plays in making the literacy programme successful. This involves the active participation of parents so that they can understand the rationale for using Leblango in instruction. For instance, parents are encouraged to learn to read Leblango themselves to assist teachers in assessing the growing literacy skills of their children. The guiding philosophy of this community intervention is the belief that the local language binds the community and that attention given to the language better insures its long-term viability (*Source: Mother Tongue Based–Multi-Lingual Education Network website*).

Collaboration with the Leblango Language Board

The collaboration with the LLB has been central to the successful introduction and dissemination of the New Orthography. Though the LLB is not sustainable without external funding, it has become a sustainable CBO which has taken over many of the activities initially being taken up by Mango Tree. Currently Mango Tree simply transfers funds to LLB and they are able to handle and account for the money on their own. The Radio talk show programme that was being run by Mango tree two years ago, are now being completely handled by LLB.

There has a tremendous positive change in LLB as far as organizational development is concerned. LLB is now fully registered as a CBO and is running a number of activities that are income generating. It also has enough capacity and skilled individuals. In that sense the LLB has become a more independent and self-confident organisation which is now capable to run its activities on its own and able to get external funding (eg. IRA, Trust Fund Africa)

External contributing factors

As external factors that have contributed to the dissemination and development of new writing system there have been a few other developments:

Increased attention by national policy-makers and Teacher Training Colleges

The Ministry of Education policy had stated that the year 2014 was set as the "year of local languages" to be examined at UNEB for primary schools. However, this target could not be met for many languages because there was a disconnect between the reality in the schools and the teacher training colleges. It is only recently that subjects have been introduced in teacher training colleges related to the use of local languages which has paved the way for posting teachers in schools where they can actually deliver as opposed to the assumption that teachers could teach any subject in the local language even when they were required to use a mother tongue which they do not know. In this respect the work of LLB and MT in Lango Sub-region places Leblango at an advantage over other languages.

But the attention went even beyond: LLB was able to successfully engage the National Curriculum Development Centre (NCDC) headquartered in Kampala and to get it to approve with speed the Leblango orthography. This came at a time when the NCDC needed the language board and the language board needed the NCDC. The mutuality between the LLB and the NCDC added impetus to the promotion of local languages.

Increased attention by the District and Municipal Education Officers

It is three years since the Ministry got in touch with Mango Tree and their ideas of starting the program to develop the Lango language. This was at a time when, Lango actually didn't have any orthography. Everyone was writing their own way. When a Memorandum of Understanding was signed with the district, they also found that the district was grappling with the challenge of getting an orthography of Lango.

Interest from influential Lango people

At the onset LLB was already in place only needing financial support, facilitation and direction. So in LLB, MT found a group of highly competent people such as Dr. Okaka Opio who is the Chairperson and holds a PHD in English and literature and Ochen Lauri a Makerere university PHD fellow. These people set about writing the orthography and within two years they had come up with the orthography in consultation with the Ministry. They later called a conference to present the orthography to the people of Lango who were satisfied with and accepted it.

Complementary promotion by other donors

Besides Mango Tree the USAID supported SHRP (School Health and Reading Program) has also been promoting mother tongue learning in lower classes. Their work was eased when they found the orthography already in place and which they were able to adopt as has the Ministry of Education. MT was only confined here in Lango but SHRP now is a nationwide program and is using the same orthography for Lango. Lango was one of the first regions to have a well-developed orthography. As a result the orthography is being used by both teachers and children in schools.

5.3 Relevance of Results

From the above mentioned context and case study about the work of Mango Tree for the Northern Uganda Literacy project it appears that the programme has tackled a very important problem within the Uganda Educational System, the very poor reading and writing skills of students in Primary School. With the introduction of the Universal Primary Education for All, Uganda has set a very ambitious objective to educate all its children at least at primary level and thus provide them with basic reading and writing skills. However, as has been the case in many parts of the country but even more so apparent in the North of Uganda which has suffered from a civil war for over two decades, the language of instruction being English has caused that many children drop out and hardly know how to read and write after a number of years attending primary school.

There are four critical factors which have made the work of Mango Tree relevant for reaching its goal of "improving literacy performance among pupils in early primary classrooms (P1-P3) and strengthen the literacy infrastructure in northern Uganda...". These factors are:

1. Native language as language of instruction

In Uganda, English is the official language and hence the language of instruction at primary school including the first three years when children are taught how to read and to write. The double burden of learning how to read and write and to do this in a language which in most cases is foreign to them,

created a situation which made it very complicated for 80-90% of the children to acquire these skills. The promotion of the approach to use the local language as the main language of instruction during the

2. Development of a New Orthography

The key element to improve the learning for reading and writing skills of young children appeared to be the improvement of the Orthography of the local language. The original orthography of Leblango as is the case with so many other local languages was developed during the Colonial period and did not distinguish according to the specific characteristics of the tonal element of the language. Hence it was necessary to develop a new Orthography reflecting the specific characteristics of this Nilotic language. With the New Orthography it appeared to be much easier to read and write the words as they are being reflect the sounds and their pronunciation in a much better way. The development of the New Orthography thus appeared to be a key element of the literacy model as introduced by Mango Tree.

3. Training of teachers and feedback mechanisms

Mango Tree has developed a literacy instructional model and methodology with teaching and learning materials for early primary classrooms in the mother tongue (and English). Mango Tree has focused their training efforts of the instruction materials on the teachers who are to apply the developed materials for teaching in the local language and to get feedback from the teachers about the practical implications of the literacy model. Mango Tree focuses on the uptake of practical skills in small groups facilitated by classroom "mentor" teachers, who are experienced teachers that have mastered the Mango Tree model. The use of mentor teachers gives teachers the chance to learn from their peers. In particular the feedback mechanism makes it possible to get a good understanding of how the teachers were able to apply the new literacy instruction model and what problems emerged from this. Mango Tree was able to improve the model as well as the instruction materials based on this feedback.

4. Strengthening of the Leblango Language Board

Another important element has been the close collaboration with the Leblango Language Board, which served as a promotor of the new orthography in the wider context of Lango Sub-region. The LLB on the one hand was comprised of a number of knowledgeable people wishing to promote the use of Leblango and in particular the New Orthography, on the other hand they developed a good number of activities promoting the use of this new Orthography beyond the primary schools, such as literature, books, newspapers, local writers etcetera.

5. Rigorous evaluation of results before further dissemination

Following the impact evaluation of the first two years in 2013, Mango Tree was able to conclude that the results provided evidence that reading and writing skills had improved significantly in 12 primary schools (*source: MT NULP results summary 2013*). Mango Tree now intends to implement the project in a larger number of schools and districts in the Lango Sub-region. From 2014 to 2016, Mango Tree is expanding their efforts and evaluating their literacy model and approaches to teacher training and support supervision by making use of a randomized control trial in 128 government primary schools.

6. Discussion

- ***Design***

The design of the Mango Tree SLS project has been done very well. It has started to tackle the key elements of primary school education which was the use of the local language as the main approach to develop literacy skills. The second important element was to evaluate the outcome of the new approach in a systematic way. First by comparing on a number of indicators the difference between

primary schools with the new literacy approach and a limited number of schools without. The new RCT approach will make it possible to even further evaluate the new literacy approach in a rigorous way.

- ***Future funding***

The Mango Tree approach should be further evaluated and disseminated. It could be compared and evaluated in a rigorous way against other approaches to introduce local language as the language of instruction during the first three years of instruction at primary school. The experience developed by Mango Tree can be expanded to other parts of Uganda and Sub-Saharan Africa where similar issues are at stake – as has been proven by the interest from other Language Boards in Uganda and the interest beyond Ugandan boundaries.

- ***Recommended changes in project design***

None

- ***Improvement of impact evaluation***

An educational programme focusing on the acquirement of literacy skills needs to set curricular standards for how proficient children are expected to be in key skills such as reading and producing spoken and written language in their mother tongue, as well as in a second (or third) language. Such criteria will help teachers to determine whether students have achieved key learning benchmarks and can advance to the next stage of the curriculum or be promoted to the following grade. It will also help to identify whether changes are needed to the curriculum, teacher training and materials.

On the basis of these curricular standards which can be applied at a national scale, a clear and randomized assessment can be made of the effectiveness of educational programmes focusing on literacy skills.

- ***Causal mechanisms***

Mango Tree has adopted the approach to improve literacy skills by making use of a new model of literacy skills acquirement based on the use of the local language as a language of instruction. In a context where nation-building is an important element of which language is seen as one of the unifying constituents, the use of the local language is not evident and politically often rejected. However, the evidence provided as well as the Local Language Board and the District Educational Officers' strong support to the use of local language, both make it possible to use Mango Tree's literacy model at a much wider scale.

7. Conclusion

Changes in Civil Society Strengthening 2012-2014

On all four dimensions of the Civicus framework there has been a positive to very positive improvement since the baseline was established in 2012. The most relevant changes have been observed with respect to Practice of Values (dimension III) and Perception of Impact (dimension IV). On the other two dimensions there was also progress but to a lesser extent. With respect to Dimension I (Civic Engagement) the main change has been with regard to the strengthening of the Leblango Language Board which progressively has taken over responsibilities and activities from Mango Tree. On the second dimension (Level of Organisation) there has been some progress as well, in particular when it comes to the expansion of communication about the New Orthography and its application in society, as well as the increase and expansion of projects and programmes by Mango Tree. The main changes with respect to Practice of Values there has been progress on all three indicators (internal governance, transparency, and internal management). The greatest progress has been with regard to social impact (under IV. Perception of Impact): by the end of 2014, in 23 primary

school the New Orthography has been introduced enhancing significantly the reading and writing skills of 8200 students.

Attribution of changes to Mango Tree

Chapter 5.2 and 5.3 clearly explain the contribution of Mango Tree to the realization of the results and social impacts.

Relevance of the changes

The relevance of the changes have been analysed and presented in Chapter 5.3

Explaining factors to identified changes

As has been discussed earlier, the main explaining factor to the success of the project has been the clear Literacy Model as proposed by Mango Tree based on a clear problem identification which was felt throughout the Educational System in (Northern) Uganda. Also the fact that there has been a clear philosophy to train and include teachers in the process of introduction at school and the role of LLB in the wider dissemination beyond schools has played an important role in the acceptance of the New Orthography. One element which has not been mentioned before is the either-or choice to be made at primary school level: Either one continues with the current English-based curriculum or one chooses for the literacy instruction on the basis of the local language with a new Orthography.

Assessment of project design

Statements	Scores
The project was well designed	10
The project was implemented as designed	8
The project reached all its objectives	9
The observed results are attributable to the project interventions	8
The observed results are relevant to the project beneficiaries	10

Scale of Scores: 'Not at all' (1) - 'Completely' (10)

Annexes

- 1. Short description of the MFS II CSS baseline and endline methodology**
- 2. Description and scoring of relative changes CSS 2012-2014**
- 3. List of people interviewed**
- 4. List of documents consulted**
- 5. Some testimonies from beneficiaries**

Annex 1: Brief description of the MFS II CSS baseline and endline methodology

Introduction

During the baseline 2012 and the endline 2014 a general methodology has been developed for the CSS Uganda SPO studies which has been applied to all SPO in more or less the same way. This methodology has followed the Civil Society Index methodology with a major focus on the perception of social and political impacts as a result of the activities of the SPO under review. A methodological guide has been developed based on the earlier developed Baseline Methodological Guide and discussions with the Wageningen University CDI studies for Civil Society Strengthening, in particular contribution analysis (Methodological Guide Endline 2014 is presented in Annex). As has been described in the Baseline report, the Uganda study intends to make a comparison of the changes of the five Civil Society Index (CSI) dimensions over the period 2011-2014. In 2012 the Evaluation Framework has been developed on the basis of the Civil Society Strengthening Assessment Framework also known as the CSI as developed by Civicus. The five pillars as prescribed by the MFS II evaluation framework has been elaborated into a set of 25 indicators (excluding the context description). The CSS Evaluation Framework for Uganda has been applied unchanged in both the baseline phase as well as the endline 2014.

In the endline of 2014 the focus has been on the dimensions of Civic Engagement (social engagement and political engagement; dimension I)) and the Realised (or perceived) Impact of their social and political engagement (dimension IV). But the scoring and description of relative changes has been done for all 25 indicators including dimensions II (Level of Organisation) and III (Practice of Values). The period between the baseline and the endline was already relatively short to assess impact.

Endline 2014 SPO selection and reporting

In the baseline 2012, 17 SPOs had been randomly selected from the long list of about 120 SPOs being supported by the Dutch MFS consortia. In addition the 8 SPOs under the 5C study have also been addressed with regard to their Civil Society Strengthening. From the original 17 SPOs under the CSS study, 13 have been retained for the endline study at the start of the endline.

The Criteria which have been used for the selection of the SPOs to be included in the endline were:

- a) Selecting the SPOs that will be part of the process tracing exercise (before fieldwork).
- b) Selecting the specific outcomes that will be analyzed using the process tracing methodology.

From the 13 SPOs retained for the endline, finally 3 organisations have not been included. It appeared to be too complicated and time-consuming to include the two SPOs of the Capacity Building exercise. They could only be included towards the end of the endline exercise as the Uganda CapDev ETC team was still working with these organisations. A third SPO was left out as they did not wish to collaborate during the endline exercise also for reasons of being included in the MDG evaluation. Finally only eight out of ten remaining organisations have been reported upon for the endline 2014 as the lack of data consistency for the two remaining made it impossible to sufficiently address the evaluation questions.

Methods/ techniques

During the baseline 2012 and the endline 2014 the following methods have been used:

1. Before/ after comparison

Upon completion of the 2012 CS baseline study a clear picture of the Civil Society Strengthening efforts by the individual SPOs both in terms of Civil Society engagement as well as lobbying and advocacy (political engagement) had been made. This was realized by taking stock of what was the situation in 2012 since the start of the individual projects one or two years earlier on the basis of the indicators as formulated for the baseline.

A similar assessment has been made in 2014 during the endline analysis when a description has been made of the changes in the period since the baseline 2012. On the basis of these changes a score has been given for positive/ negative changes or no change at all. The relative changes 2012-2014 have been further analysed to understand what has contributed to these changes in the

2. Case studies

The case studies are described in most of the studies on the basis of the “stories” of the beneficiaries and / or partner organisations as well as representatives of the “lobbying targets”. The 2012 baseline include descriptions of specific cases which have identified and described to illustrate the activities, outputs and outcomes of the SPO in question. In 2014, these cases have been further elaborated to assess the contribution of the SPO to the realization of the achieved outcomes through an contribution analysis.

3. Focus Group Discussions

Focus Group Discussions have been used to interview several stakeholders in order to capture the opinion or meaning of various persons at a time. FGDs have been held in the first place with the staff of the partner organisations in order to address the issue of relative changes 2012-2014 (including timeline analysis) as well as the theory of change which was being applied by the SPO. Secondly, FGD have been held with groups of the beneficiaries of the SPO in order to assess their opinion on the changes in their organisation and/ or communities.

4. Individual interviews

Both during the 2012 Baseline and the 2014 Endline Individual interviews have been held with selected stakeholders on the basis of the research questions as formulated in the CS research guide. These interviews have been used for the assessment of the relative changes 2012-2014 in the contribution analysis.

5. Timeline analysis

In both the baseline 2012 as well as the endline 2014 and timeline analysis has been done in order to understand the development of the organisation over time in the face of both internal and external developments. The latter timeline analysis has been used to understand better the relative changes, the implementation of concrete activities based on the theory of change as well as to assess the contribution of the SPO to the realization of the intended outcomes.

Sampling of beneficiaries/ informants

During the baseline 2012 and endline 2014 a similar approach to the sampling of beneficiaries and informants has been applied. The sample of the beneficiaries to be interviewed was done by the Ugandan consultants. It was agreed in the Baseline Methodological guide that a wide range of stakeholders would be interviewed, either during the ‘staff analytical workshop’ with the attendance of as many staff member relevant for management, programme implementation and financial management. A similar approach has been used during the endline 2014.

Moreover, focus group interviews were held with beneficiaries at their location, with responsible staff of beneficiary organisations (eg primary schools teachers, cooperative board members, health workers, extension workers, etcetera). In a few instances board members have been contacted and interviewed on their role and vision on the organisation. Other stakeholders from government agencies such as local government staff or ministerial staff have been interviewed on an individual basis.

The selection of groups/ individuals to be interviewed was often made on the basis of the availability, relative proximity (most research was done during the rainy season and in regions with very poor transport infrastructure).

The persons and/ or groups interviewed are mentioned in each SPO report in Annex.

Annex 2: Relative Changes Civil Society Strengthening 2012-2014

Indicator	Score	Baseline assessment	Endline assessment
Dimension 1: Civic Engagement			Overall Relative change Dimension 1: (change)
1a diversity of socially based engagement			Change: +1
<p>1. Degree to which the needs of beneficiaries / target groups are included in SPOs analysis, planning and implementation.</p> <p>2. Degree of participation of target groups in analysis and planning of SPOs.</p>	+2	<p>Mango tree mainly works with the Leblango Language Board (LLB) by providing schools with learning material in the local language based on a new orthography. It has promoted the introduction of 5 new vowels in the Leblango orthography. Mango tree draws on the expertise of the LLB, for instance LLB oversees the facilitation of the training and production of instruction materials.</p> <p>Since Mango tree closely collaborates with the LLB, their primary target group participate in setting the programme agenda. In addition, Mango Tree consults with head teachers, and school management committees as well as PTAs which further enables MT to generate input and feedback. During the field visit, it was possible to engage with primary school children and see how the Mango tree support had speeded up their learning abilities. Mango tree often interacts with children and also observes how learning happens and hence is able to generate additional insights on the effects of its work.</p>	<ul style="list-style-type: none"> • Goals and objectives of planning are geared towards the beneficiaries • Implementation of planned activities are at the moment greatly done by beneficiaries for example initially Mango Tree was managing everything but now LLB has taken over radio shows entirely and also the graphics, printing and publishing. • Beneficiaries are involved in planning through giving feedbacks. This is not only limited to LLB but also the community members are involved • Beneficiaries provide consultants; take part in activities like writing competition and data collection on specified areas (Text to Change). • Beneficiaries occasionally interact with Mango Tree and LLB/KLB on platforms like radios, workshops, face-face interactions, text messages. <i>Text to Change</i> came in and raised the degree of interacting with beneficiaries and other stakeholders. Messages to people are sent to get their views. Text to change is currently sending the messages but it is preparing to train Mango Tree to manage it themselves.
1b – diversity of political engagement			Change: =
<p>3. Number of dialogue platforms with local or national government that SPO is participating in.</p> <p>4. What is the intensity of involvement in dialogue platforms or sectoral networks?</p>	+1	The main local structures that Mango Tree works with is the Lango Language Board and mainly supports its capacity and the capacity of writers affiliated to the board to enhance the use of the new Lango orthography. Considering that it offers a fairly specialised service Mango Tree does not participate in many platforms.	No change. Only indirectly through LLB
Dimension 2: Level of Organisation			Overall Relative change Dimension 2: (no change)
2a – Organisational level of civil society			Change: =
<p>5. Degree of participation of the SPO (and possibly CFAs) in sectoral networks of civil society organisations.</p> <p>6. Nature of the relationship between the SPO</p>	+2	Mango Tree through its various programmes such as Primary literacy society Mango tree primarily supports the work of the LLB and no other sectoral network or umbrella organisation.	Mango Tree's participation with civil society organizations is good; LLB, KLB and BSU all have direct contact with Mango Tree. However engagement with other networks is still weak.

(and possibly CFAs) and sectoral networks/ umbrella organisations in the MDG/theme.			
2b – Dialogue and communication			Change: +1
7. Degree to which a shared analysis of situation in society exists 8. Degree of joint activity as a result of joint analysis 9. Mode, nature and quality of dialogue / communication	+3	Mango Tree and LLB collaborate on popularising the instructional materials and the new orthography through informing parents, district education boards, and the wider Lango population through mass media. For this purpose, Mango tree is working with a Local radio station, Radio Unity, through which it targets the larger population to appreciate the new orthography and to use it. Building on its success with the Lango language, Mango tree plans to extend support to the Kumamu Language Board as well. The Kumamu Language is spread in the districts of Kaberamaido and Serere.	<ul style="list-style-type: none"> • There is an expanding communication network, e.g. Unity FM, Q FM, Text to Change and Radio Delta which LLB got attached to. • Kumama Language Board (KLB) has also kicked off and the orthography approved by the NCDRC, learning lessons from the LLB. • The partners (LLB & KLB) are free to choose the radio station they wish to use. They are also free to popularize ortho-graphy changes to the community. Once orthographies have been developed with support from Mango Tree, then it's the task of LLB and KLB to popularize them to their respective communities. • The Mango tree LLB experience is being exported to South Sudan and Zambia soon.
2c – financial and human resources			Change: +1
10. Composition of current financial resource base of SPO 11. Degree of dependency of external funding 12. Human resources management by the SPO	+2	<p>At the moment Mango Tree is fully dependent on external donor support. MFSII funding constitutes approximately 50% of current budget. Other partners that have funded the organisation include: Edukans Foundation, Deaf Child World Wide, ICCO and the William and Flora Hewlett Foundation. Broadly the organisation relies on donor funding without which it would be practically impossible to deliver the programmes.</p> <p>The organisation has a well-established and competent staff both at the national and Lira offices. In the Lira Office the organisation has a fairly small team of highly competent staff with Masters and Bachelor degrees. The team also has a wide range of competencies and experience having worked in different programmes and sectors before including private and public</p>	<ul style="list-style-type: none"> • Organization largely depends on external donor support although LLB is able to provide some services for a fee. • There has however been tremendous growth in both Kampala and Lira offices as reflected in the number of new programs and staff members as compared to 2 years ago.

Dimension 3: Practice of Values		Overall Relative change Dimension 3: (very positive change)	
3.a - Internal Governance		Change: +1	
<p>13. Degree to which organisational structures are involved in strategic management of the SPO</p> <p>14. Degree of sharing of information to staff (structured and regular)</p>	+3	<p>Mango Tree is a private limited, employee-owned company which depends on clients to pay for its services. An Executive Director heads the organisation. Regular staff meetings and consultations with national and district offices is the most visible way in which internal governance is reflected. There also participation between both the national and district staff in planning and setting organisational priorities. In collaboration with the LLB writers training programme has been out in place.</p>	<p>Sharing of the activity plan with LLB and KLB with budget for each activity appended. Mango Tree now involves LLB and KLB in planning processes e.g. in previous years LLB was quite suspicious that maybe some money remains with Mango Tree but now its fully involved. This is because LLB has grown with staff, has its own operational premises and is also registered.</p> <p>At Mango Tree level in Lira there is the Program Director NULP and two project managers. Mango Tree Lira is now independent and the Kampala office is now only involved in transferring money to the Lira offices accounts.</p>
3b- Transparency		Change: +1	
<p>15. Independent external (financial) auditing being done</p> <p>16. Degree of transparency towards beneficiaries</p> <p>17. Extent of upward and downward accountability by SPO</p>	+2	<p>Mango tree has a well-established financial management and accountability system and undertakes regular audits. The audit outcomes are made freely available for verification by interested stakeholders. The organisation has received funding from at least three different donors and this is reflected in the audit report that is shared with all donors. This enhances trust and accountability.</p> <p>At the moment it was not clear if there is downward accountability to the beneficiaries, in particular the LLB who are the major partner of Mango tree. In their submission however LLB feel they need more capacity building in the area of managing and accounting for resources and their ability to fundraise through proposal development.</p>	<ul style="list-style-type: none"> • Strong financial management and accountability system • Upward and downward accountability • LLB now ensures that an annual report and annual audit is done with the exception of KLB because they have no operational office.; • Accountability is given to both members and partners.
3c – Internal financial and human resources management		Change:+1	
<p>18. Extent to which internal written procedures for financial and human resource management are being respected</p>	+2	<p>The organisation has a very clear and well established financial management system that guide how funds are accessed and utilised.</p>	<p>Clear handbook on financial policy and procedures. With Mango Tree, this has been a great improvement because last year the way money was being circulated to people undertaking activities was not so clear but now there are clear financial procedures. Nowadays Mango Tree staff no longer carries money everywhere. What normally happens is that when an officer is to conduct a training say in a particular Sub-county then registered mobile numbers of the people meant to receive the money are got and the money is sent to those people directly through mobile money</p>

Dimension 4: Perception of Impact		Overall Relative change Dimension 4: +4 (Very positive change)	
4a – Responsiveness		Change: +1	
19. Degree of incorporation of priorities of target groups in plans and activities 20. Degree of alignment with government policies (planned and implemented)	+3	<p>Education is a priority sector in the national and district development programmes.</p> <p>Supporting primary education is well in line with the government policy. The ministry of education has also agreed that school instruction during the first years at school should be in the mother language of the learners.</p> <p>Enhancing learning is the concern of both national and district leadership. Mango tree is involved in supporting refining and updating of the Lango orthography with a view of improving and increasing the effectiveness of education delivery. The organisation in particular works with the Language board and selected schools to increase the availability and utilisation of written materials including a dictionary. These interventions are directly responding to livelihood needs of the people</p>	<ul style="list-style-type: none"> • Incorporating feedbacks from target group during the planning and implementation stages • Works in line with thematic curriculum i.e. planning and implementation. In past years Mango Tree would just write an MOU and the responsible people sign it but now different people have to be involved, make moments and give feedback. Mango Tree now has an MOU and a contract with LLB and this is also because LLB is going to be sub contracted by Mango Tree. There is also an MOU with KLB
4b – Social impact		Change: +2	
21. Target group satisfaction regarding fulfilment of their primary social and/ or personal concern 22. Degree to which empowerment of target groups towards public and/ or private sectors have been enhanced 23. Degree of sustainability of the social impact	+2	<p>Mango tree sees its impact in the ability of LLB to deliver its own mandate, in particular by enhancing literacy programmes, production of materials, translation and testing of new materials developed. The study which in the coming years will compare the literacy outcomes at the pilot and control schools (EGRA-tool) will make it possible to assess the target group satisfaction.</p> <p>As a result of the support from Mango tree, the LLB are now able to publish books, writing poems, producing a dictionary. sponsorship of writers. This intervention has already had a positive impact on literacy and increasing the number of children in school. The ability to create and read and write will be the livelihood impacts that will be sustained.</p> <p>Language Boards will be introduced to strategic planning process through which they will begin developing organizational strategic plans for 2014. In addition Language Boards will receive capacity-building training to help the LBS operationalize their strategic plans.</p>	<ul style="list-style-type: none"> • LLB's capacity in planning and implementing projects related to literacy is now reliable e.g. from complete dependence on Mango Tree two years ago they have been able to get their own funding from Trust Africa • It has increased ability in writing successful proposals; does editing; proof reading and translation of documents independently; produces materials • The Primary Literacy Project (PLP)'s major target was to reach 24 schools by the end of 2013 but reached 23. In terms of pupil numbers, out of 10,000 the project managed to reach 8,200 that is around 80% achieved. • The LLB has been able to promote the new orthography into the Primary School Curriculum, to Local Language Writers, to Local Publishers, etcetera. • The success of the Mango Tree approach in collaboration with the LLB will be replicated in South Sudan and Zambia.
4c policy impact		Change: +1	
24. Level of influence of SPOs towards major policy changes	+2	By supporting the efforts of Lango language board Mango tree is making it possible for the policy that established language	<ul style="list-style-type: none"> • LLB was one of the local language boards that influenced the retention of local languages in the curriculum where NCDC had

<p>25. Degree to which SPOs are holding government (national and local) and private sector accountable</p>		<p>boards to be operationalised. While Language boards are established by policy, many have not been able to execute their work because of lack of financial and technical support. In terms of policy impact therefore through Mango tree's support, lessons on how such a policy can be made operational shall be generated. At the moment Mango trees work does not entail holding government accountable.</p>	<p>scrapped them off during curriculum reform proposals. In 2012, NCDC wanted to scrap off languages in the syllabus but the Chairperson of LLB Dr. Okaka raised up to 10,000 signatures which he took to parliament and the languages were not scrapped.</p> <ul style="list-style-type: none"> • LLB's board structure has been used by NCDC to develop other language boards country wide. Dr. Okaka, the Chairperson of LLB, is now the Chairperson of all language boards in Uganda. • NCDC/RTI are using Mango Tree / LLB orthography in teaching pupils.
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Annex 3: List of participants

List of Participants - MFS II Uganda Endline Second Phase			
Organisation:		Mango Tree	
Location:		Lira	Date: 24 th – 25 th June 2014
No.	F / M	Name	Position
1	<input type="checkbox"/> F <input checked="" type="checkbox"/> M	James Odongo	Project Manager Strengthening a Literate Society (SLS), Mango Tree
2	<input checked="" type="checkbox"/> F <input type="checkbox"/> M	Frances Jane Ofugi	Lira Municipal Education Officer
3	<input checked="" type="checkbox"/> F <input type="checkbox"/> M	Joyce Owera	Headmistress Otim Tom Primary School Lira
4	<input type="checkbox"/> F <input checked="" type="checkbox"/> M	Dr. Richard Nam	Lango Cultural Foundation Prime Minister
5	<input type="checkbox"/> F <input checked="" type="checkbox"/> M	Jogole Christopher	Lango Cultural Foundation Minister of Health
6	<input type="checkbox"/> F <input checked="" type="checkbox"/> M	Ayo Bonny	Headmaster Lango Quran Primary School Lira
7	<input type="checkbox"/> F <input checked="" type="checkbox"/> M	George Obua	District Education Officer Lira district
8	<input type="checkbox"/> F <input checked="" type="checkbox"/> M	Oduch Okall	LLB Dokolo District Coordinator
9	<input type="checkbox"/> F <input checked="" type="checkbox"/> M	Ekwang Eugenio	LLB Alebtong District Coordinator
10	<input checked="" type="checkbox"/> F <input type="checkbox"/> M	Aceng Agnes	LLB Amolatar District Coordinator
11	<input type="checkbox"/> F <input checked="" type="checkbox"/> M	Okello Silver	LLB General Secretary
12	<input checked="" type="checkbox"/> F <input type="checkbox"/> M	Apio Flora	LLB Administrator
13	<input checked="" type="checkbox"/> F <input type="checkbox"/> M	Auma Mary Theresa	LLB Executive Member Lira district
14		Writers' Club of Lango Language Board	Writers' Club of Lango Language Board

Stakeholders met MT End line evaluation

Organisation:		Mango Tree	
Location:		Lira	Date: 11 th – 12 th April 2014
No.	F/M	Name	Position
1	M	Okello Silver	LLB Project Officer
2	M	Odongo James	SLS Project Manager
3	F	Apio Flora	LLB Administrator
4	M	Menno Keizer	Program Director NULP
5	M	George Obua	District Education Officer Lira district
6	M	Ayo Bonny	Headmaster Lango Quran Primary School Lira
7	M	Dr. Richard Nam	Lango Cultural Foundation Prime Minister
8	M	Jogole Christopher	(Lango Cultural Foundation Minister of Health
9	F	Frances Jane Ofugi	Lira Municipal Education Officer

10	F	Joyce Owera –	Headmistress Otim Tom Primary School Lira
11	F	Auma Mary Theresa	Executive Member Lira district
12	M	Oduch Okall,	Dokolo District Coordinator
13	F	Apio Flora,	LLB Administrator
14	M	Okello Silver	LLB General Secretary
15	F	Aceng Agnes	Amolatar District Coordinator
16	M	Ekwang Eugenio	Alebtong District Coordinator

Annex 4: List of Documents consulted

Testimonies from beneficiaries I:

Dr. Richard Nam (Lango Cultural Foundation Prime Minister), and Jogole Christopher (Lango Cultural Foundation Minister of Health).

What exactly happened for Leblango orthography to be easily accepted?

Most of the children these days are children of cities and towns and so getting back and speaking their native language properly is a big problem. The government was also talking of introducing the teaching the local language at the lower primary school i.e. Primary one (P1) – Primary six (P6) but the problem here was lack of instruction materials.

Besides helping the Ministry, the program has made it easy for the community to introduce it to the children because the way they are talking the language is not the way it is meant to be. The children actually talk something that is mixed with English hence doesn't sound like the real language. Even the people who were born in the villages (who are now in their 25 – 40 years), when there were a lot of problems in the country and didn't get ample time to get to know their real language and how it is supposed to be spoken are major beneficiaries of the LLB/MT programme.

The programme was an entry point to communities to alert them that there is this document (books or pamphlet) that guide how the language should be spoken and written. Copies would be left with them and even the lower council leaders thus paving the way for language overhaul.

How did Mango Tree (MT) and Lango Language Board (LLB) manage to come up with the new orthography?

The of insecurity suffered by the northern part of Uganda, especially Lango sub region, severely disrupted the old system where an old man would sit down with his family in the evening near the fire place, teach them how to talk in the language and correct them when they made mistakes. Thus the older people could no longer sit with the young ones to take them through their language. With some peace now, LLB has decided to come back to reintroduce that system. Even the old one of nowadays grew up when there is insecurity so they also don't know the language very well and so the program is helping them as well.

What does Lango Cultural Foundation (LCF) think about the program?

The program itself is very good because it is going to put our Lango language back on track. Starting from Primary one (P1) will be a little bit late because children start to learn how to talk when they are almost two years so that should be the entry point. Right from nursery school, the program should just continue and by the time they are in P1 they would already have most of the things. But if the program starts in P1 the children will have already established some things as their basics and changing takes some time as well. The reading and writing should start at nursery school because this is where they are taught how to talk and write. Nursery school should hence be the entry point. A long time ago we benefited from the same system where the language of instruction in lower primary up to P4 was in Luo but then there was a switch to English.

How instrumental has Lango cultural Foundation (LCF) been in formulating the new orthography?

Most of the members in LCF are also members in LLB hence LCF is contributing manpower for LLB activities. For instance retired Colonel Tony Ottoa who is a language board member and also with LCF as minister of Culture in the cultural institution. At the time the programme came, LCF was already wondering what was to be done because the language was disappearing. At that time quite a number of children born during the years of turmoil had a big problem with language. For example if you picked any child in P6 and asked them to talk in Lango they could not. This is why this new orthography was accepted easily to respond to these challenges and in a space of two years it has been written and has been broadly accepted by LCF and the community.

LCF has been supporting LLB / MT by sensitizing and creating awareness among people about the process of refining the Leblango language that is ongoing e.g. at funerals. MT is sponsoring older community members selected from the cultural institution to work on the language. Children and teachers are encouraged to pick up the program and refine the language in case the program stops in the near future.

How do you see the future of Leblango and the new orthography?

There is already so much improvement because when you talk to children on the program they are improving a lot and now everyone is concerned. This means that in the future Leblango will become more alive and active. So far the new orthography is very fine because MT and LLB have really worked very hard on it as most of them are mature people and know the language very well. The older people who are used to the old system will take quite some time to adapt to the new orthography and especially the ones in leadership positions like LCF will have to work very hard to adapt to the new orthography.

What kinds of opportunities do you see for sustaining the program ?

The DEO should encourage Head Teachers when budgeting for their schools to include a vote for printing more instruction materials such as books and push it through the sub county to eventually form part of the district budgets.

Another strategy is that, since Leblango is now a school program and on school curriculum, the MoES may have a separate budget that may include printing of the books. It is also the role of LCF to lobby at the DEO's office for this inclusion. The program shouldn't stop now such that by the time it comes to wind up, there are proper preparations to mainstream it into the district and MoES.

To make Leblango better, it must be pushed up to P7 and make it examinable so government needs to be involved by not only adopting it as a mode of instruction in P1 – P3 but also take it as an examinable subject from P4 – P7.

How is the new orthography being applied?

There are now three newspapers (Rabkop, Etop and Rupiny) in the local language that have started using the new orthography. If you pick an old newspaper of about 2 – 3 years ago and compare with the current one then you realize that the writing is completely different. The new orthography needs to be launched because this is another way of advertising and marketing it. People are already aware that there is something happening but the launch will really make them understand more.

Testimonies from beneficiaries II:

Ayo Bonny, Headmaster Lango Quran Primary School Lira

The MT program people should have planned in such a way that a teacher who is teaching P1 if he/she is alone should take all the subjects. The language teachers were supposed to teach only language and no other subject. We asked those that were concerned to ensure that one teacher who is teaching P1 in Mathematics and RE goes to another class to have another subject. This is because they were two teachers in one class. We did this because in this school there is a shortage of teachers so we got a lot of problems in fixing teachers in the classes.

When this program was introduced the idea was to raise the literacy levels of children

This was okay. There was no problem and after one month I went to the P1 class and the children could read and write in Luo and English very well.

How long has the school been on the program?

This is the first year and now it's only P1. The teaching in P1 has improved and even our enrolment is increasing every week. Last term we had 30 pupils but this term we have around 50 pupils in P1. The parents bringing their children last are paying fees even better than those that came first. When you

try to test these children say in reading a newspaper in Luo, they can read well except when they meet an English word. The Luo newspaper like Rupiny sometimes mixes up Lango and English.

Do you examine the pupils in Luo?

They are given tests in Luo

How do you get the Luo teaching teachers?

The teachers are normally picked from the infant teachers. Before, Luo was being taught in infant classes but not as intensive as it is now.

As a Quran school, Arabic is a major language of teaching, how do you do this?

Arabic is not taught seriously. Teaching Arabic comes when they are teaching Islamic religion starting from around P3 or P4. Islamic religion being taught is on the side of examinable questions only although they put some Arabic words so that children can understand.

The deputy Head Teacher attended the training by MT

If MT or LLB doesn't provide the support for pupils from P1 to P2 is there any way that the school can finance the activity?

The program will then be spoilt because we won't be able to get the books written in Luo. We are only praying that it should not stop there. It should go ahead at least up to P3. After P3 we still don't know what next whether they should continue to read in Luo or should stop and then turn to English. I think that even if the program is to stop then some molecules should be taken even to P4 so that they can continue reading to help them. If the program stops in P3 then the pupils will forget reading in Luo because the teachers will intensify reading in English whereby they may end up reaching in P7 when they don't know how to read in Luo. The thinking was if the children are given a good foundation of reading in Luo in P1 – P3 then by the time they reach P4 they are familiar and so they are able to easily read other subjects. Though they will be able to read other subjects easily, it is the same as planting a tree in very good soil and then cutting the leaves off so it is better that even if they are going to P7 the Luo is put in use for them to even understand other subjects. There are some pupils here whom you can find in P6 who can read English very well but can't even tell you the meaning of what they have read. This means that the teachers of P3 and P4 taught them how to read in English very well but without knowing the meaning. It is better therefore if the program continues up to at least P6 and leave them in P7 for Primary Leaving Exams.

MT is doing very well by trying to improve the reading of the local language and we appreciate it very much. The teachers teaching the Luo subject are also very good and committed. The size of the school is around 260 pupils.

Only 2 teachers who are teaching P1 attended the training because MT asked for only two teachers from the school. All the other teachers are not yet exposed to the new system except that maybe if the program continues we may not send any more teachers for training for P2 because we have already one teacher who has got the training who can teach P2. If we are sending we shall send other 2 teachers from other classes to also get the experience to the new system. The two teachers are few but in the mean time we can tolerate it like that. A Memorandum of Understanding with Mango Tree was signed by the deputy on behalf of the school.

Testimonies from beneficiaries III:

George Obua – District Education Officer Lira district

The introduction of the orthography is raising the literacy levels of lango region and with time the children here will cope with the rest of the country because reading is so basic to learning and MT were able to go to the root of the problem. In urban centres it's fantastic but the problem is still in

rural areas. The Ministry of Education has now taken over the whole program as the supply of the materials is now from the Ministry. This is now a national program and no longer a Mango Tree program. The Mango Tree officer, (Gregg) who started this program is now a consultant at the Ministry of education in Kampala. The Ministry is hopeful that the materials will be supplied. Dr. Okaka Opio is a very innovative man who has started a publishing project called Star Publishing Limited and is mainly going to concentrate on publishing local material to support the local language. The issue of materials will eventually be overcome.

The teachers were trained and they themselves appreciate the innovation and for that reason are interested in what they are doing. They were trained by MT and also the national level took up in training them. In that respect they are there as a specialized group of teachers and not like the others. When you are different from the rest you want to show that you are different and that inspires them to keep on because there is no other form of motivation being given to them from other teachers but they have picked the interest. The program will eventually go up to primary seven and will be rolled to all classes. At primary level, Lango is not yet an examinable subject but at secondary it is an examinable subject at O and A levels. It is also taught at the university. With the changes taking place in the curriculum, it is not yet very certain that it will be examinable at primary level.

Around 36 schools were involved in the program in the 8 districts of Lango so far, how will the program be scaled up to the other schools?

After sometime there will Monitoring and Evaluation (M&E) which actually is already ongoing as the National Chief of Party is coming to the region to also have a feel of what is going on. This is already M&E taking place. After that, it is possible that the whole program will be scaled up because the Ministry started with very few districts now many more districts have been brought on board and eventually when they bring all the districts on board and find that it's a good thing then it's likely that all the schools will now benefit. Some of the monitoring is done through the evaluation of reading (IRA) which is one of the monitoring tool. This program is likely to expand and cover the whole country and then will also cover all the classes but starting from Primary one. Now progress is like how it is done with some other programs that usually start from primary one and then progress to Primary seven.

How the parents are responding now?

At the beginning the parents' response was very bad to this teaching of lower classes in local language but slowly they are beginning to understand that it's the best way to introduce the child to quality schooling as a whole. In any case, some of those parents and some of the older people were taught in the local language in primary one and primary two. English was only a subject. This program is now taking the community back to those days. Now the parents are beginning to reconsider their feelings and with time all parents shall be at par most especially the urban parents who think their children should take the root which they did but these children are different and with the way the country is being moulded things are going to be different. When you look at the curriculum, the Ministry is no longer emphasizing subjects as per say even at primary level there is SST not history or CRE. The same revolution is being taken at ordinary level as the Ministry is coming up with a new set of curriculum and their subjects are going to be called learning areas hence languages will also be a learning area. There shall only be 8 learning areas for secondary schools and then there will be a lot of focus on a child's strength. The current things that these children are learning in secondary schools are likely to be pruned off e.g. spending time teaching children about Canadian prairies. Those will be there but will not be so much focused on. The teachers will have to do some in service training for that. Slowly the whole country will be able to get there. English is still needed and incidentally in Uganda it is now more or less like a local language even in rural areas. Swahili is also being experimented in some primary schools and it will be in the languages learning area.

Testimonies from beneficiaries IV:

Lango Language Board members (Oduch Okall, Auma Mary Theresa, Apio Flora, Okello Silver, Aceng Agnes, Ekwang Eugenio)

When did LLB start?

It started in 2003 when the government came up with the idea of local languages and boards started to be formed in all the language areas in preparation for the thematic curriculum. The board was well formed because the criteria and guidelines of how to form the boards was got from government. The problem with LLB was that government never supported it and it was only to be supported by the local districts. LLB was in place but was not effective. The main work it was doing was forwarding what it wanted to the Ministry. LLB was not allowed to get books because teachers were responsible for selection of books from the list brought to them by the head teachers. In 2010, LLB got some little funding from UNICEF and that is when it effectively started and also brought in experts.

When did LLB get in touch with MT?

MT was already on the ground through Gregg who had already started the program of supplying schools with locally made instruction materials from sacks and slippers. Gregg would go to the education office to show case his materials who then allowed him to go forward and supply to all schools. The whole package used to cost 70,000/=. This amount was deducted from the UPE money for schools. Private schools would also buy the instruction materials because they were very good.

What was the role of the language board in accepting the new orthography?

Within the language board there were experts who studied English like Dr. Okaka Opio and many others. Gregg's movement to schools made him realize that there was an important aspect that was being neglected most especially the effective implementation of the thematic curriculum. Schools that were practicing this curriculum were mainly those in the villages but not so much for the ones in towns. Gregg's organization then started centring on developing the orthography and that is when he got in touch with LLB. The coming of MT shed the ideas and understanding of the language board together with linguists such as Dr. Okaka and Okello Ogwang. Therefore those are the people who showed that there was need for revision of the orthography. The orthography we had was the one used by the missionaries and had so many errors and inconsistencies. A workshop that took place in Nairobi was organized where Okony Goodman and James Odongo (Project Manager of Strengthening a Literate Society project under Mango Tree) met with some members of Summer Institute of Linguistics (SIL). They stayed for nearly a month in Nairobi working on the orthography of Leblajo. A first draft was made and then LLB started polishing it. Meanwhile, MT had already contacted some teachers who showed interest of teaching Leblajo right from Primary one. It identified teachers and facilitated them to ensure that the project runs on well. This was around 2008. There were books used for the thematic curriculum that were not purely in Lango. These books were in Acholi and teachers opposed this because the two languages are different much as they sound alike. MT saw that LLB had come up with language teachers in English and they started making LLB their partners and funding some of their activities. Research Triangle Institute (RTI) just came in to use the new orthography. When a lot of revisions had been done, NCDC came and approved the orthography in 2012 although there was a lot of resistance from the natives. MT with

funding from the Dutch government kept on funding LLB to go for talk shows and sensitize the community and the interested would call in. MT in touch with Text to change linked LLB and community members who can now give their views using text messages that are free. There is a fairly bigger number compared to the beginning that has accepted the new orthography. The impact is that previously there was one local newspaper (Rupiny written in Leblajo and Acholi) but 2 – 3 years ago the newspapers increased to three. Adwolpiny came up and then Rabkop newspapers. All that is attributed to the struggles of LLB and MT. Rupiny was previously sold at 500/= but because of that they pushed it to 1,000/=. The newspaper is released on Wednesday but when you look for a copy on Friday you can't get it a sign that readership has grown. Rupiny is not completely using the new orthography but with some funding from International Reading Association (IRA), all media houses were trained in the new orthography. Adwolpiny and Rabkop are also partly using the new orthography because the training that was given to them was not enough for them to understand all the new changes. LLB is in negotiations with the editor of Rupiny such that they give it a section in the newspaper where its members can write using only the new orthography. LLB is thinking of running its own newspaper that will be using only the new orthography because it trained the media houses but they keep on doing the same mistakes.

There is a Memorandum of Understanding between MT and LLB. Every time there is an activity, a Memorandum of Understanding is signed and reporting is done to MT. LLB also makes monthly reports to MT. MT is threatening to leave LLB by 14th December 2014 so it's kindly requesting MT not to leave as yet.

What are the main benefits or outcomes from the relationship between LLB and MT?

Children could not read and write well hence they couldn't then perform well in their exams as they had no foundation. But due to the work that MT is doing through this program, the Lango children are being given a very good foundation and therefore they will be able to perform better at their UNEB exams.

Are there any strategies by LLB to continue this program even after MT pulls out?

LLB is willing to continue the program but it is also still soliciting for help for so many other issues. The schools being supported currently are also very few as compared to the total number of schools in the region. LLB's focus currently is having the program expanded to other schools and to higher levels.

MT trains at least 2 teachers per participating school so even if the teachers move to other schools they go to them with that knowledge. When there are certain events where schools that are participating come together to demonstrate, then the other schools also want their teachers to be trained and request to be provided with the materials. Schools in towns are now also yearning to be part of the program. LLB is organizing a fundraising by December 2014 so that it can be able to sustain itself and also provision of the materials.

LLB has two head teachers on board. It is a matter of sensitizing the other head teachers that have not yet known the value of teaching Leblajo to do their best and sacrifice to help push the program and talk to their teachers. If parents can be involved because they are going to see the impact of teaching in local language from their children then they can contribute something to facilitate these teachers who are handling the local language. If MT pulls out and no donor is coming to support the program, then sacrifice has to be made to push the program forward.

LLB's journey together with MT has taken it somewhere as there are now board members who are specialists in language and in proposal writing. LLB wrote a proposal to Trust Africa and got some funding and produced some books. Trust Africa books are not for sale but are just given out. There is hope that some money will be got that will be used to reproduce these books so that other schools are also supplied. It is better now for LLB to fundraise so that it can reproduce the copies of the readers from the community members and after send to schools. The teachers have already been trained by MT. This can help to sustain LLB. There is still need for more lobbying and advocacy for what is already on the ground. The other sustainability strategy is proposal writing.

How is the supply of materials going to be sustained if MT moves out of the program?

Although MT is also funded, they are also trying their level best to remain around. The teachers should go and buy more books from MT. LLB wanted to buy the books but MT wanted to see how the performance would be when their books are used and when they are not used. LLB is advocating that the education department also comes in and buys the materials for the schools maybe through the UPE fund.

LLB has a very good relationship with LCF although LCF has some confusion at the moment. There is a member of LCF whose is also a member of LLB.

Due to the success of the program, government is also picking interest and this is now basis for national policy.

With the help of MT, LLB is now one of the most organized language boards countrywide. Other language boards that are staying where the district education office is are collapsing. LLB has moved away and distanced itself from the district. Its relationship with MT has stood out to be one of the most organized. This also includes in terms of the orthography. This happened in 2010 when LLB stabilized. LLB is the only board in the country that has organized mother tongue day.

What motivates members of LLB to come together?

There is a criterion the government sets out on membership of a language board. LLB also wanted experts to be among their members like linguists, writers, cultural and local leaders and teachers. All this came by itself. The board consists of members of 40+ years who studied in those years when thematic curriculum was in practice. These are people who know the value of thematic curriculum and studied in the times of the missionaries and were taught using thematic curriculum. When they were told that Leblajo was to be taught in schools they saw sense in that and were willing to sacrifice because once the language is killed then the culture is killed. These people are all good speakers of both languages. The strategy of using writers is also a good way of getting the orthography used. This also means that the readers will read in the new orthography. These writers generate stories for teaching in primary schools and community consumption. They write in the old orthography and then trained and to finally write in the new orthography. They are normally trained for three days and given a little token of appreciation.

What are LLB's plans for the future to become a sustainable organization?

- i). Material development and production in that if LLB gets more stable and organized, this will help run the organization.
- ii). LLB plans to give its human resource of some board members trainings on proposal writing.

- iii). Involving community members in fundraising for those that have love for the language to give a helping hand.
- iv). Produce books and sell them
- v). Advocate and lobby more by reaching more people including even those in Diaspora
- vi). Creating a website
- vii). Reaching the government to come in and help
- viii). Need to get an office space without anybody coming to ask for rent
- ix). Get heavy duty printers in that if LLB manages to start producing newspapers then its productions during the course of the week can sustain the organization.
- x). Books can give LLB money once in a while but newspapers are there throughout and can also help in popularizing the new orthography. This can be hectic but like last year translators and editors were trained and possibly even this year more will be trained.
- xi). Get membership fees from some members because at the moment members are not paying membership.

Testimonies from beneficiaries V:

The LLB writers' club.

What motivates you to write?

- i). The feedback from the readers. If the readers are contented with our writing then this is a motivation for writing more materials. Materials written for LLB in Leblajo include puzzles, poems, long and short stories.
- ii). It stimulates our children in knowing more of our local language and as they are growing they get to know more of the local language
- iii). Passionate about the local language
- iv). By seeing stories that other people write gives us interest to participate in the writing. *"I was happy to see my daughter read some books written in Leblajo with the new orthography as she only used to ask for books written in English so this motivated me. The school she is in is not on the program by MT but I get for her the books and she reads from home. There is Love for the language".*

What makes you love the Leblajo language?

Mother tongue is the first language that everyone learns and it is interesting. Even at universities there are associations where people gather according to their native languages. So when the child joins and doesn't know his /her mother tongue, then it's really a big shame as people will start questioning and calling him / her all sorts of names. This makes it very important for a child to know their mother tongue much as the other languages are also important.

Do you as writers feel that supporting children in lower classes will raise literacy levels?

Yes. By around 2001 some materials were translated from English to Leblajo for the lower primary schools due to the lack of materials in Leblajo as the language of instruction was English. Schools like St. Catherine Secondary School were teaching Leblajo as a subject and even have it at Advanced level. Once you have interest and passion for Leblajo then you can easily develop the writing skills with the new orthography. It is not difficult to change from the old to the new orthography as long as you understand the tips because normally how you bring it out and how you pronounce words like those requiring heavy vowels. If you follow the guide of the new orthography then it is easy. Leblajo is a tonal language so if you lower or heighten your voice in some words then it may totally mean something different. The meaning is contained in the tone and this has to be captured in writing. With the new orthography you have to represent the tonal differences with certain letters.

How are the readers responding to the new orthography?

Mango Tree and Lango Language Board have been sensitizing community members on the radio. The feedback has been coming over messages through an NGO called Text to Change. People have been making positive responses and those that have not understood have been coming to the LLB offices to get more clarification on the new orthography. Generally the feedback has been positive. Much as the community is saying that it is difficult but mere reading the guiding books helps you understand.

How do you see the future of writing in Leblajo? Is it sustainable?

Because of the new orthography the future of the Lango language is brighter. For instance at the moment there is increased interest in writing poetry, stories and novels by people and being published. The new orthography has been publicized on the radio and also through workshops. Leblajo is a language of instruction in the lower classes as subjects like mathematics are also taught in Leblajo. If it is time for English then it is English throughout except in the terms one and two when they mix for the case of Primary two (P2). The children in P2 are picking up so much as they now can read and write their own stories in Leblajo especially during creative time.

Background to the most significant outcome as captured in phase one**Respondents perspectives on what really happened/the MSO process.**

The MT workshop where they trained teachers in Leblajo lasted for a week (five days) and this was enough to get to know the new orthography because of the good facilitators.

Other outcomes /impacts from the MSO

Children in Primary one can now read and write some words in Leblajo and this is just after one term which was not the case before. In P2 they are very fluent in reading and writing Leblango thus making the later reading and writing English far easier. . It is now not difficult for them to change to English as P2 children are able to read and write well in both languages.

Annex 2. Description and scoring of relative changes CSS 2012-2014

Annex 3: List of people interviewed

Annex 4: List of documents consulted

Annex 5: ...

Joint MFS II Evaluation: Civil Society Strengthening –Uganda

Technical report on *Gulu Women Economic Development & Globalization (GWED-G)* Civil Society Strengthening

1. Introduction

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MDG Good governance and civil society building; Fragile states

GWED-G was founded in 2004 when it began as a support group to war affected women who met under a particular mango tree. The organisation has since evolved into a very active civil society actor in the district and region. GWED-G is also involved in various national and international networks that aim at championing human rights. It has 30 staff members¹ and works in the districts of Gulu, Amuru and Nwoya in Northern Uganda. What started as a few small local projects has since grown into a powerful regional voice on gender, policy, and grassroots advocacy.

The mission of GWED-G is to strengthen the capacity of grassroots communities in Northern Uganda to become self reliant agents of change for peace and development. The target areas of GWED-G's work are health, Human rights with an emphasis on women and girls, psychosocial support and counselling, research and advocacy, and economic empowerment.

GWED-G is a member of the Northern Uganda Human Rights Partnership (NUHRP) composed of 9 organisations including Amnesty International Netherlands. Amnesty international provides technical support and guidance to the partnership on issues of human rights. Four of the 9 members in the partnership came together to implement the Youth empowerment programme which is being funded by through MFSII funding channelled through Amnesty International. The four organisations are GWED-G, Justice and Peace Commission (JPC), Kitgum NGO Forum and Pader NGO Forum.

From Amnesty international the funds are channelled to ACORD the host institution. ACORD subsequently takes charge of the management and administrative aspects of the program. Each organisation does its planning and the plans are sent to ACORD who forwards the plans to the Amnesty which subsequently undertakes funding disbursement. The programme is being funded for 5 years, (2011- 2015). The partnership and implementation are still challenged with insufficient capacity logistical shortages e.g transport, and institutional development.

¹ and 57 support staffs based at sub-county levels called Community Based Facilitators (CBF) and Community Based Trainers (CBTs).

Purpose and outline of technical report

This report is presenting the context of operation of the Amnesty International funded project to support GWED-G in the period 2011-2015. The project funding relates to GWED-G's work in three districts in the northern part of Uganda (districts of Gulu, Amuru and Nwoya) where it is aiming to reach out to about 110 youth groups. Northern Uganda has gone through a period of civil war of more than 20 years with stability having returned only in 2007. This report looks at the way GWED-G is contributing to peace building and conflict resolution.

The impact evaluation focuses on GWED-G's work on youth empowerment for human rights which is one of the activities for which GWED-G is receiving both Technical Assistance and financial support through Amnesty International. In chapter 5 this report presents the findings of the relative changes for the period 2012-14 (the baseline also includes the preceding years) and presents one case study that illustrates the contribution of SACU to the realisation of their objectives:

2. Context:

Amnesty International Netherlands has developed together with a number of civil society organisations – including GWED-G - a human rights programme for Northern Uganda. This Region is among the most affected by human rights abuse because of the war between the rebels of the Lord's Resistance Army and the Ugandan army, which lasted over 20 years. As a result of this war there was almost total destruction to social, cultural and other value systems that regulated how communities lived together. The period of insurgency which ended around 2007, has significantly affected all sectors of the society and education in particular. Upon the gradual return of peace in the Region, the Government of Uganda launched the Peace, Recovery and Development Plan for Northern Uganda (PRDP, 2007) as a strategy to eradicate poverty and improve the welfare of the populace in Northern Uganda. In the Acholi sub-region most of the population have returned to their villages of origin and only few have remained in IDP camps or in 'transit camps'. The people who have returned to their communities are now involved in efforts to resettle and revive their livelihood.

As a result of the war and the many years of camp life, violence is still rampant, in particular violence against women and land conflicts. The government is failing to provide proper access to justice, and despite the PRDP plan public services are very poor. The land conflicts have emerged because the people returning to their home villages contest the boundaries of each others' lands, with traditional elders having lost authority and becoming susceptible to manipulation by politicians and those searching for quick economic gain (land is becoming increasingly valuable, influenced by foreign and domestic investors and oil discoveries in nearby regions). These conflicts often result in death and destruction of property. Unemployed youth are easily mobilised to fuel the conflicts.

After-war recovery thus required a focused attention to re-establishing communities that were seriously disrupted during the war. The physical result of the war in terms of agriculture production and land access is particularly harmful to the Acholi, as the majority heavily depend on subsistence farming; this posed a serious threat to the economic stability of the communities. On top of that many family members have committed atrocities against others e.g. killing, maiming, stigmatization, abduction, burning of houses and are all threats to the social stability of communities. Like any post conflict area, sexual and gender based violence remains a contentious issue due to poverty and the cultural norms that largely compromise the situation of women. Currently women and children, including orphans and formerly abducted children, are the most vulnerable groups in these

communities. The phenomenon of single parent households or child-headed households is widespread.

The war has also had an enormous impact on the demographic and skills base of the region. A large percentage of the population are currently under 18, with limited or no education and skills. Traditional subsistence farming is unfamiliar to many young people, who have grown up in the IDP camps during the war. This may aggravate the risk of future armed conflicts as young people are unable to secure an income and become an easy target for recruitment into armed rebellion. The lack of skilled labour poses a significant risk that local people will not fully benefit from the opportunities that become available during economic recovery, in turn reinforcing the economic marginalisation of Northern Uganda. The above context also offers opportunity for development organisations to contribute to the resettlement and revival processes.

It is widely recognized that Uganda's PRDP has not addressed the particular needs of women victims, and had not adequately consulted them in its design or implementation. Domestic violence has been steadily increasing over the past years with more than three-quarter of women continue to experience domestic violence. Recently, the Ugandan parliament has enacted a law which brings tough penalties for offenders, and grants power to low level authorities to tackle domestic violence while re-emphasizing women's rights to resources. But for women in northern Uganda, such laws are yet to make a difference where domestic violence-related deaths are still rampant, access to justice very limited and their economic, social and cultural rights violated on a daily basis.

Besides the government itself, civil society plays an own role in the peace and reconciliation efforts from 2006 onwards through the medium of communication, institutions and social networks outside the state and the economy. National and international NGOs have initiated longer-term livelihoods interventions in their programmes / projects. Besides this, interventions geared to child protection and education were initiated. Herein fits well an orientation on improvement of basic education facilities, and caring for the psychosocial well-being of children and youth, who were affected by the conflict in Northern Uganda.

In this context and as part of the Amnesty Youth Project, GWED-G works on peace building, addressing gender based violence, health, youth empowerment, human rights promotion, and is playing a crucial role in social reconstruction.

3. Project description

GWED-G's mission is "to strengthen the capacities of grassroots communities in northern Uganda to become self-reliant agents of change for peace and development through trainings for them to take effective decisions concerning their Rights, Health and Development". The focus of GWED-G is to ensure that the rights of women and excluded communities are respected, promoted, protected and fulfilled. GWED draws attention to the responsibility of the local leaders and district representatives, and government with regard to the rights of women and their participation in government programs.

With this objective in mind, GWED-G is involved in a good number of activities aimed at addressing a wide range of social economic and political issues related to promotion of peace and justice in their area of operation. The activities relate to improving awareness of women's access to Human Rights, economic empowerment of women, enhancement of peaceful co-existence, peace building through youth training, health in the context of gender-based violence, and dissemination of HR awareness material. The organisation is making progress on many aspects as reflected by the outcomes so far realised. GWED-G has endeavoured to maintain its focus on women as its primary target without

losing sight of the fact that other people are equally important in promoting justice, addressing gender based violence and promoting peaceful co-existence.

GWED-G is partner of the Northern Uganda Human Rights Partnership, a coalition of seven local civil society organisations all active in the field of Human Rights. It consists of the following organisations:

- ACORD-Uganda (Agency for Cooperation and Research in Development), also administrator
- GWED-G (Gulu Women Economic Development and Globalisation)
- JPC-Gulu (Justice and Peace Commission, Archdiocese of Gulu)
- Kitgum NGO Forum
- Pader NGO Forum
- WORUDET (Women in Rural Development Network)
- FOKAPAWA (Forum for Kalongo Parish Women Associations)

The programme is funded by Amnesty International as part of the IKV Pax Christi-led consortium under their Special Programme for Africa (SPA). The SPA programme focuses on the Acholi subregion, notably the districts of Gulu, Amuru, Kitgum, Pader and Agago. The project assists in training and supporting 'human rights volunteers' (HRVs) or 'human rights committees', sometimes including paralegals, consisting of people from villages who volunteered to become local experts in human rights issues. The project develops a Training of Trainers (TOT) programme together with the local partners –adjusted to local needs and conditions. Amnesty supplies trainers from its trainers' network. After the training, HRVs provide basic legal advice, organize sensitization and awareness-raising sessions, mediate in conflict situations, refer victims of human rights abuses to the appropriate bodies, inform communities in human rights law and legislation, monitor, document and report violations.

The SPA programme aims to contribute to a human rights culture and a life of dignity for people in northern Uganda, by providing support to existing and new human rights initiatives established by civil society organisations in the North. Currently, the Partnership implements three projects:

- Community Justice project, which facilitates and enhances the activities of community-based human rights volunteers, who sensitise communities on human rights issues and provide an avenue for bringing such issues to authorities;
- Women's Rights project, for women's groups in all the above-mentioned districts, facilitating them to undertake human rights education (incl. theatre), mediation of disputes, and engagement with authorities to address e.g. violence against women;
- Youth Project, for youth groups who are trained on human rights issues and conflict management, who engage in building their communities and their own livelihoods.

GWED-G is involved in all three projects.

Under the youth project it is the aim that 110 established groups will be upgraded to CBOs and are helping community members of to resolve issues within their community. Also the VSLA methodology is now an entry points for youths with savings intended to lead to the formation of micro/projects. GWED-G is offering technical support to the youth groups. Youths now demand for skills related to what they want to do, thus creating opportunities for self employment.

Project period : jan 2011 – Dec 2015

4. Data collection and analytical approach

The methodology applied during the baseline in 2012 and follow-up assessment in 2014 is a general one which is described in the methodological annex 1.

Key Outcomes selected for the contribution analysis

The key outcomes for the contribution analysis for all CSOs under review during the endline in 2014 have been one related to Civil Society Strengthening and one related to advocacy and lobbying of policy makers. However, in the case of GWED-G there has been only one case study of the contribution analysis on Civil Society Strengthening: Youth empowerment for Human Rights.

The GWED-G case study focuses on the entire set of activities they are implementing under the community approach based on support to 110 established youth groups which are serving their communities for peace building and conflict resolution. The contribution of GWED-G to these results are being presented in Chapter 5.2.

5. Results

5.1 Relative changes 2012-2014

The assessment of relative changes has been done against the indicators used in the baseline; the descriptive part for the endline is provided in detail in Annex 2. The scores of relative changes are given in the following table. The table further below presents a short description of the highlights on which the assessment of the Endline relative changes is based including the score given in the endline.

Criterion	1a	1b	2a	2b	2c	3a	3b	3c	4a	4b	4c	Total
Baseline	2	2	3	2	2	2	1	1	2	1	1	1,73
Endline	+1	=	+1	=	+1	+2	+2	+1	=	-1	-1	+6

Score: **Baseline** 0-3 0 lowest score and 3 highest
Endline = no change;
+ 1 resp – 1 little change better resp worse;
+ 2 resp – 2 substantial change better resp worse

Short description of the highlights explaining the relative score of relative change 2012-2014

Evaluation Criterion	Explanation of score relative of relative change 2012-2014
I. Civic Engagement	Positive development: +1 overall
1a- social engagement	Increased active participation, involve them in planning processes. Consultation process: in the process now the community actively participates.
1b- political engagement	Consolidation of results
II. Level of organisation	Positive development: +2 overall
2a-organisational level	Involvement in networks has increased; GWED-G is often taking the lead in the networks they participate in.
2b-dialogue and communication	Consolidation of results; no change
2c-financial and human resources	Expanded expertise and staff numbers; GWED-G experiments with web-based funding innovation

III. Practice of values	<i>Very positive development: +5 overall</i>
3a-internal governance	Increase of frequency of staff meetings in order to better communicate and plan internally; regular discussion of programmes; annual reports & performance evaluation now in place. Board is an active member visiting regularly project sites
3b-transparency	Audit report is regularly produced and discussed with Board. Financial Management now up-to-date. Annual reports and budgets are shared with beneficiaries during inception meetings; discussion of project goals, objective and roles and how much GWED will contribute
3c-internal management	HR manual been revised; conditions of employment for staff have been improved
IV. Perception of Impact	<i>Negative development: -2 change</i>
4a-Responsiveness	Consolidation of activities; no new initiatives
4b-social impact	Because lack of monitoring data on the total of 110 groups, there are anecdotal results communicated (see GWED-G website)
4c-policy impact	No data available on advocacy and lobbying results in terms of policy-changes.

5.2 Contribution Analysis

Case study: GWED–G Contribution to the strengthening of Youth groups for the empowerment for human rights.

1. Case background

Gulu Women Economic Development & Globalization (GWED-G) was founded by grassroots women in Northern Uganda who suffered the impacts of the Lord’s Resistance Army LRA war– women whose rights had been violated and those whose children have been forcefully abducted by the Lord’s Resistance Army (LRA). For over 23 years, LRA terrorized the northern region with physical and psychological torture, forcing over 1.6 million Ugandans to flee their ancestral land and homes and to relocate into Internally Displaced Persons (IDP) Camps. This disruption and insurgency resulted into profound negative effects on the culture, education, health, livelihoods and development in the region. GWED-G was thus founded with a primary focus on women emancipation and currently serves over 300,000 individuals through five main program areas: (i). Health, Human Rights and access to justice, (ii). Peace-building, Psychosocial support, (iii). Education, and Economic Empowerment. Research and Advocacy cut across all program areas. Our main beneficiaries include women, children and youth, and specific vulnerable men.

In the aftermath of the insurgency in Northern Uganda that had taken more than twenty years, people eventually had to leave the internally displaced people’s camps (IDPs), and returned to their homes. To ease the transition process it was necessary to encourage formation of Community-Based Organisations (CBOs). The groups were seen as being able to promote togetherness and to ease access to social services. Through GWED-G’s group formation approach, some groups had been formed while people were still in the IDPs, while many more were formed after people returned to their communities. GWED-G has been at the forefront of the formation and strengthening of the civic confidence and civic competency of the members of these groups. Thus in the various sub counties where GWED-G operates groups have been particularly supported to evolve into strong CBOs that are able to articulate and tackle issues of a broader social significance. The above has thus led to increased numbers of beneficiaries, youth & women, demanding for their rights and for public accountability. Consequently in sub counties such as Awach, in Gulu district, youth groups managed

to advocate and lobby for technical staff to reside within the sub-county so as to increase their availability to respond and resolve community matters such as road improvement.

The Sub-county leadership was able to subsequently respond to these demands and the issues were tackled. As a result many Youth who are organised in groups are now more self-confident, reliant, responsible and productive. For all the GWED-G supported youth groups the VSLA methodology has been introduced as an entry point for the youth groups.

2. Theory of change



3. Results and effectiveness

Network of grassroots youth groups established

GWED-G has established a grassroots network of 110 Youth Groups of mainly war-affected youth in two districts (Gulu and Amuru) with 55 groups in each of the districts. In total more than 3000 youth have been reached through this youth group approach with each group comprising 25-30 youth. GWED-G has introduced several support services to assist the youth groups: Facilitators at Community level and at Sub-county level. In each group Community Activist have been identified and trained in particular in the identification of Human Rights related issues. Rapid Action Teams have been installed as well at youth group level who are responding in the case of signaled Human Right violations or conflicts within the community. Youth groups are stimulated to attend sub-county (LG 1 and 3) meetings and to participate in community meetings in order to lobby for their interests, for instance “right to health”.

Amnesty International has assisted youth groups to become independent groups as an CBO. To this respect partner leaders have been trained to facilitate the process as “Facilitators of Change”. Regularly youth groups are being trained to elaborate their own constitution. A regional Youth Network has been established as well as part of the national Uganda Youth Network.

Impact on governance.

GWED-G through its work has created positive developments. The community where it works is very unique and challenging. It is composed of people who after so many years moved from the camps back to their villages and therefore faced so many challenges. The people lacked all the basic necessities of life and the district needed the efforts, collaboration and support from all possible stakeholders to settle the people down. One of the efforts was mobilizing people to come together through a group approach. When people are together, the aspect of peace building and reconciliation is strengthened. Bringing people together in groups is very useful in strengthening the efforts for rehabilitation the district needs badly. GWED-G’s bringing people together and supporting them to form CBOs has been an empowerment strategy because when people are brought together, they begin to appreciate their position, learn from their colleagues get more enlightened and collectively forge the spirit of participation and ownership. Consequent to GWED-G’s work, people are now more involved and participate in different initiatives such as community meetings, as well as parents and teachers meetings. Through their participation they are now more able to demand for action and accountability. Through the groups people are empowered to demand for better public services. These processes are very sustainable because they know where to go and through which channels and linkages.

Box: Local Government V chairperson Gulu on impact on governance

The district requires every (CSO) working in the district to sign an (MOU) memorandum of Understanding that clarifies the roles of the district and those of GWED-G. This creates a very clear point of collaboration which eases work. Hence we have a very good relationship with GWED-G.

Collaboration with district Local Government

In its post-war recovery efforts Gulu district local government encourages partnerships with other organisations and stakeholders and GWED-G is among its key partners. With a formal Memorandum of Understanding GWED-G shares its work plans and budgets with the district and also participates in district planning and budgeting and implementation processes. This strengthens partnership and enhances the district’s oversight role of monitoring service delivery. Through collaboration between GWED-G and the district youth council a Strategic Youth Plan of Action has been developed, the first of its kind in Uganda. GWED-G is now monitoring the implementation of the Gulu Youth Plan.



The district speaker showing the youth Strategic plan 2014-2018 developed with GWED-G support

Hence as part of implementing the plan Gulu district in collaboration with GWED-G are embarking on the popularization of the youth livelihood program. In addition through the skilling Uganda policy, Gulu district in further collaboration with GWED-G have embarked on training for transformation which enables the youth to undertake skills development training for enhancing job creation. Gulu district experiences a very high rate of HIV prevalence of 10.7% among the youths which is way above the national average of 7.3%. Gulu district together with GWED-G and other partners are doing a lot of sensitization on responsible sexual reproductive behaviours among the young population with a view of reducing these high prevalence rates.

Box : On youth Civic confidence:

There is a letter I have from two groups in Awach Sub County which says that they need the district to hold a meeting with them about the new project by FAO of fish farming in the district

In further collaboration both Gulu district and GWED-G with other partners are involved in efforts aimed at cultural revival in the district. This is aimed as an effort to revive those positive culture attributes that were lost during the war and which have subsequently hampered positive behaviour among the youths. This includes arranging for the Acholi paramount chief to talk to the young people.

Impact on the youth

GWED-G has brought youth in its operational areas of Awach, Paicho and Unyama Sub Counties together in groups and trained them in group dynamics, leadership, human rights and service delivery.

Box: impact of youth groups

As a district we have got very positive feedbacks from parishes of Gwengdiya, Paibona and Pukony in Awach Sub County where these youth groups are doing a great job. In terms of advocacy, these groups have engaged the lower local government in Awach and higher local government in the district in the planning and budgeting processes that have been lacking. For instance the youth groups brought a petition to the speaker of the district highlighting the fact that the Awach – Paibona road was impassable. As a result of their petition, the district opened up this 12km stretch of road thus opening up the sub county to more traffic and business. In regards to the health sector, government is using the push instead of the pull system hence the National Drug Authority would supply drugs which are not relevant to the sickness prevailing in the area. However the youths would know what kind of sickness is affecting the community and consequently they advised the district. The district health department eventually wrote to the Ministry to revive the pull system through which drugs are delivered based on ailments identified by communities. These youths have also been motivated to voluntarily clean the health centres.

Thanks to a more peaceful coexistence among communities, due to different interventions including the youth groups there is now a reduced idleness amongst young people. More survivors have been able to access justice through informed consent, awareness, and knowledge on rights.

Village Loan and Savings Association- VSLA

Although frustration of having been in the camps for so many years had thrown many youths into drinking and drugs desperation, the GWED-G project intends to instill a culture of savings which is slowly reversing that situation.

So far for the 110 group supported by GWED-G, over 33 million UgShillings (about EUR 100,000) has been saved by the Voluntary Savings and Loan Associations established. The savings are being borrowed and repaid by the members. This availability of funding has resulted into the formation of numerous micro projects. VSLA is also interesting because a formal structure needs to be established as every VSLA needs to be registered with the Local Government for official recognition. GWED-G is in turn offering technical support, to the youths to responds to new demands for skills related to the micro projects that they want to do. This dynamic is thus creating opportunities for self-employment leading to improved household incomes. Examples of micro-projects are a 100-acre rice production scheme (FAO provides technical support), bee keeping, fish farming (with support from the District Fisheries Dpt), quarry works for selling construction stones (District provided land but also tax being paid to District).

The district too has been inspired by the positive effect of GWEDG's work and is engaging the Bank of Africa to set up a system in which the VSLA savings could be banked without a cost to enhance their security. Hence a memorandum of Understanding between the district and Bank of Africa has been signed for all youth groups in the district that are saving to bring their money to the bank interest free.

The big debate is how we expand this culture of saving beyond the Sub Counties that GWED-G is operating in so that the youth in other Sub Counties also embrace this culture of saving. In the long run the VSLA should transform into a peoples own bank as this is the only way to break through and even if in the medium term the focus is on a SACCO, the ultimate should be a peoples bank.

Box: The case of VSLA's impact on a group in Patimo Sub County

The group was trained in VSLA by GWED-G. This group has saved over 10 million shillings and members borrow money to buy pairs of oxen for example two members can each borrow 450,000/= to buy a bulls, and then they pair up. They are then able to meet their own farming needs and at the same time offer a service to other people in the community. A pair oxen can plough up to 5 acres a week i.e. an acre per day depending on the land. The members of Patimo youth group at the moment have 3 pairs of bulls bought by six members who borrowed money from the VSLA. Every week they generate approximately 240,000/= by ploughing an acre at 80,000/=. This means that they are able to generate the money to pay back the loan and also invest in other activities. GWED-G advised the group to use the income from hiring out the bulls as an operational funds since with the oxen and ox-plough the operational costs are minimal, mainly just feeding. This is how groups that are moving into CBOs get their operational funds. Since the demand for ox-plough services is constant the funds generated can, for instance, be used to rent a store and to supports their lobby and advocacy work

The VSLA approach in particular has had a very significant impact on the communities. It has suddenly made coming together into groups very meaningful as it enables rapid but manageable and sustainable capital accumulation among very poor people.

It is striking that Amnesty International is not interested in the livelihood enhancement through the VSLAs whereas according to GWED-G economic empowerment for the youth is as important as the Human Rights aspects as according to them "poverty is the root cause of HR violations".

Impact on Lobby and advocacy

Lobby and advocacy is the GWED-G sustainability strategy by which they anticipate that even without GWED-G youths CBOs and other community groups would still be able to demand and or negotiate

for better service delivery. For instance, GWED-G trained and empowered the groups in demanding for service delivery. Hence on one occasion when the LC5 Chairperson was on radio talking about fish farming, the youth that heard him expressed their interest in the service. If they had not been empowered to demand for such services then they wouldn't have presented their demand to the LCV chairperson as they would have felt too inferior to demand anything from the Chairperson of the district.

GWED-G impact on policy- the case of GBV ordinance

One of the major post-conflict challenges faced by the district with is Gender based Violence (GBV); GBV is the major challenge hampering quality service delivery, community participation and income generation in the district. Through a position paper to the district, GWED-G highlighted the challenges of GBV. It underlined the fact that a lot of the GBV issues are related to power and social economic relations in families. Besides GBV being against Acholi cultural norms, it has led to very many suicides. Thus the district, in collaboration with GWED-G and other partners have embarked on a revival of positive Acholi cultural values and norms. In 2014, a GBV ordinance was passed and now pending to be rolled-out into the different sub-counties with support from GWED-G, CARE and UNWOMEN; furthermore the Gulu GBV shelter was built with funds from UKAID through Action AID.

In the fight against GBV, GWED-G has introduced the role model men and women. This was introduced purely by GWED-G that defined the parameters for qualifying to be called a role model person. These include:

- i). Having basic necessities at home such as toilet, shelter, dustbin, rubbish pit etc.
- ii). Sending children to school,
- iii). Being productive agriculturally,
- iv). Avoid being seen publically fighting and abusing your wife or husband.

At the end of every year, role model men and women are recognised at a public event so as to inspire other people to emulate them. In addition the district embraced the idea of setting up counselling centres that was introduced by GWED-G. GWED-G established sub county based counselling centres in Unyama, Paicho and Awach Sub Counties. That district in collaboration with Action Aid has in turn embarked on constructing a gender based violence shelter at district level to serve as a referral for all the GWED-G centres in the 3 Sub Counties and will have legal experts and councillor to expedite redress process for GBV victims. The shelter should be officially commissioned by September 2014.

In addition, GWED-G raised issues around enacting ordinances against the perpetrators of GBV and the district responded positively. As a result in 2009, the district came up with standard operating procedures which were guiding tools for all players (both government and non-government) in the district in the areas of GBV. It was formally passed by the district council and in 2013 it was followed by the GBV action plan and shared with the different stakeholders.

A draft form of the GBV ordinance is already in place and by the end of 2014 it shall have been presented to the council and the Attorney general for final approval². All the issues that GWED-G raised in their position paper were adopted and incorporated in the draft ordinance.

Promotion of women in leadership

Women participation in governance is still a challenge mainly worsened by traditional perceptions that the woman's place is the kitchen and the garden. This hampers their active participation in all governance processes.

² the Bill has already been presented and passed (pers comm, 09 May 2015)

Through its work GWED-G has played an important role in uplifting the role of women in leadership. For instance at the moment in all the Sub Counties (Bobi, Awach, Unyama, Paicho) in Gulu district that GWED-G is operating in , all the Sub County Chiefs are women. The Sub County chief of Bobi Sub County in particular was trained by GWED-G earlier. At the moment the CAO, DPC, RDC and the Chief Finance Officer for the district, though coincidental, are all women marking yet another breakthrough for women leadership in the district considering that such positions have always been a preserve of men.

In most VSLAs too, women are in leadership mainly because they are more reliable in regards to taking care of money. Nevertheless there is still more effort needed to encourage women to get more involved in leadership on their own merits.

4. Contribution analysis.

GWED-G inspired, sensitized and trained the youth and also let them know that they are a generation that can cause positive transformation to the district after the war. Consequently the youth gained the confidence to lobby the district for infrastructure such as road, boreholes etc.

Youths have also taken up the leadership mantle by participating in the planning and budgeting processes at different levels because they are aware that is where the priorities of the district are determined. They for instance attend council meetings in big numbers at Sub County level to listen to the discussions and through their lobby and advocacy actions have helped the districts to focus its interventions. They also alert their councillors about issues they want to be considered in the legislation processes thus being able to influence policies. Some youth also ride their bicycles to the district to attend district council meetings where they also task the district speaker about some of the issues to be placed on the district council agenda.

Gulu district too has in turn embraced the good fruits from the GWED-G approach and is already considering how to scale it up beyond Awach, Paicho and Unyama Sub Counties to reach the other nine Sub Counties and four divisions in the district where GWED-G is not working.

GWED-G doesn't only empower the youth through advocacy and lobby but also builds their capacities to be self-sustainable through economic empowerment. All these youth groups supported by GWED-G are involved in productive activities ranging from farming as a group and also individually because they have oxen and ox-ploughs to till and open the land. The youth are also involved in basket making for sale, goat rearing, bee keeping and fish farming among others.

5. Other key influencing factors

When the war ended in the district and region as a whole, most post conflict interventions tended to focus on infrastructure such as roads, schools, health units, bore holes etc. Few government programmes focused on issues of social economic and cultural rehabilitation of the people such as formation of groups and CBOs. Post conflict flag ship government programmes such as PRDP 1 and 2 did a lot in areas of infrastructure leaving out the aspects of community empowerment, psycho-social support, governance and economic recovery. This thus created the space for GWED-G to lead in those aspects that were left out of mainstream government programmes.

While during the war there were many CSOs both local and international operating in the district, most left shortly after the guns fell silent. This placed the CSO work squarely on the shoulders of the few CSOs such as GWED-G. This thus explains the huge presence of GWED-G in many aspects of work in the district.

The current district leadership are broadly young people and therefore quite receptive to the issues of the youth and in turn making it easy for the youths too to relate with fellow youths in leadership. Therefore by responding to the needs of the youths the district leadership is also responding to their own needs. Gulu district in terms of population age is the youngest district in Uganda. There has been plenty of government focus on the rehabilitation of the North after the war. This opened up collaborative spaces between the local government and other players. On the other hand there has also been a case where a Sub-county Counsellor was complaining that the youth groups had become too political and too critical.

The concerted efforts of the district, political, youth leadership and GWED-G has been pivotal in promoting a savings culture among the youths. This is coupled with the realisation that poverty will best tackled through the efforts of the people themselves.

5.3 Relevance of Results

Social and economic empowerment

GWED-G's work is in a post conflict situation where so much has been lost over the years. However through empowerment of communities, empowering youth groups and making them more involved and informed can recover a lot. Therefore GWED-G needs to continue with its community empowerment initiatives.

The GWED-G continuity is still needed. For two decades we have been in war and as the district we are looking at the recovery process to be in around 30 years from now. Whereas GWED-G can expand, it is also important that they consolidate:
District speaker Okello Douglas

Besides the social empowerment through the building of capacity for peace building and conflict resolution, GWED-G has put emphasis on economic empowerment at the group level. In the first place through the registration of youth groups as CBO and later on to support them to become "enterprises", intending to introduce the concept of a 'youth group as a Company'. Through the Peace Recovery and Development Program (PRDP) most support has been directed to infrastructure development such as building classes, roads, etc. However government focus in the coming year is envisaged to shift more towards economic recovery, psychosocial support and reviving positive cultural norms areas in which. GWED-G has already focused on these issues through their VSLA introduction.

Linking with District

GWED-G dedicates substantial time and effort to build trust with the Districts where it is supporting the Youth groups. It does so by sharing reports, budgets and the annual workplans. They also call the relevant District Authorities and Departments to meetings with youth groups in order to explain the way they are supporting the groups. This process of engagement with the district based on transparency appears to be an effective and relevant way of establishing close collaboration with the District and thus creating trust. In return the District Dpt and authorities are providing assistance to the youth groups if they can. In some instances the District refers donors to GWED-G for information about the situation in the district with regard to psycho-social matters and for further collaboration.

Sustainability

Looking at the background of these youth and the challenges they have gone through, the sustainability of this process requires time. If they are left the way they are now, they can easily give up. While the district Community services department is trying to document, profile and engage them, it has limited capacity. GWED-G is paying substantial attention to creating structures that may assure sustainability for the future both in economic terms as well as social terms.

Other areas of focus for GWED-G in the future include:

- i). - Invest in the young people by popularising and implementing the Gulu district youth council strategic plan.
- ii). Tackle HIV / AIDS rampant among the youths.
- iii). Continuous economic empowerment to poverty eradication through peer to peer learning and exchange visits.
- iv). The idea of Skilling Uganda needs to be taken on very seriously
- v). The issue of sexual and gender based violence is also very serious

To ensure sustainability of the project benefits so far, rather than avoiding government authorities, GWED-G seeks to build the capacity of the groups duty bearers to work closely with government and other stakeholders at all levels. Only in this way the group leaders will have the confidence and ability to approach, engage with and demand accountability from relevant authorities wherever necessary.

The weakest aspect of government in the post war era has been ignoring the youth as reflected in the lack of a post war youth Marshal plan. The biggest challenge of the youth leadership in the district is the lack of well established youth secretariat which would in turn enable the launch and implementation of the activities in the strategic plan. GWED-G could support this effort for instance by seconding staff to the youth council.

A youth group profiling report revealed that many groups are formed with the hope of being supported but failure to receive support leads to their collapse. A strategy to ensure that the youth groups that form should have a sustainability strategy right from the onset.

Sustainability doesn't come from outside but from within the group. This involves issues like group dynamics and also the group should have something that binds it together a shared vision. Beyond registration at the Sub County GWED-G should support the groups to evolve into companies motivated to excel in the production and delivery of identified goods or services. For instance such companies could consider utilising schools in holidays and convert them into learning centres which can tackle other community knowledge gaps such as improved agriculture practices. In collaboration with the district and the NFA GWED-G can support the youth to embark on even larger projects such as reforestation in the depleted Abela forest reserve.

6. Discussion

- **Design**

The design of this project is somewhat different from the other projects as the support provided with MFS II funding by Amnesty International through the IKV Pax Cristi consortium, is directed towards a total of seven partners under the Northern Uganda Human Rights Partnership. The SPOs in the Partnership are supposed to follow a similar set-up of their activities whereas the financial administration and related issues is being done by one of the partners. Amnesty International has been more of a technical assistance organisation who have initiated and implemented a support programme of trainings and capacity development which has been more supply-driven than really attuned to the needs and priorities of each of the individual organisations. GWED-G being a relatively strong organisation with other donor support projects, has been able to accommodate this project design and integrate it into their activities. One issue which was brought up was the strong focus of the donor on Human Rights whereas GWED-G had a huge interest to incorporate Economic Empowerment as well.

- **Future funding**

With Amnesty International having pulled out in 2014, it the question whether this is still relevant. Funding has been relatively small to the individual SPOs under the NUHRP and with administrative

hick-ups in transferring and reporting about funds. Therefore it is suggested that another funding modality will be found for further support to GWED-G. It would be better to go for organisational support on the basis of a Strategic Plan spelling out the priorities and strategies of GWED-G for the near future.

- ***Recommended changes in project design***

As said above the project design should be changed to such an extent that priorities of the recipient SPO is better addressed and more founded on a needs assessment of the target population. A 'one size fits all' programme as has been implemented under the NUHRP is not a sustainable one.

- ***Improvement of impact evaluation***

The evaluation of the potential impacts by GWED-G project should be done by quantifying the results of the activities initiated by the youth groups. The Theory of Change of GWED-G is still very much activity oriented as can be read from 5.2.2. In the ToC there are no quantifiable indicators which may provide a picture of what results have been achieved. Most of the results at outcome or impact levels are only anecdotal, at least as known to the evaluation team. Also the website of GWED-G only provides reporting of individual cases. It is not known how the 110 groups are doing with regard to the objectives as stipulated; it is known how much has been saved in total by taking the savings of all youth groups aggregated, but it is not known what the variation is between groups and what the average loan to their members is. Moreover, quantification of results with respect to actions for human rights or household income is not taking place.

7. Conclusion

Changes in Civil Society Strengthening 2012-2014

GWED-G has a striking picture of the changes which have been realized from the baseline 2012 up to the endline 2014: in the first place Dimension III (practice of values) stand out with a score of +5 (out of a maximum of six). On all three indicators 3a, 3b and 3c GWED-G has seen significant improvements as a result of improved internal communication, planning and administration, improved external communication of their plans and budgets as well as improved internal procedures and staff conditions of employment. Also on the Dimensions I (Civic Engagement) and II (Level of Organisation) there has been modest improvement. However, on the negative side with regard to Dimension IV (Perception of Impact) there has been no progress, in particular as there is no evidence of progress. No monitoring data on relevant indicators has been provided which shows that results have been realized with regard to social impact or policy impact (lobbying and advocacy). All cases mentioned are anecdotal related to an individual case and do not necessarily represent progress with regard to 110 youth groups.

Attribution of changes to GWED-G

With regard to the attribution of the changes there is a need to distinguish between the different dimensions analyzed:

1. With regard to Dimension Three (Practice of Values) it is clear that the GWED-G has pursued a deliberate strategy to improve on a wide array of organisational capacities. In the first place GWED-G did an Organisational Diagnosis analyzing the organisational environment, resources available, its leadership and governance structure. It enhanced the team building and undertook more internal training; it also reviewed its human resource manual, its strategies and its Board; finally it also upgraded its administrative system by introducing new software as well as employing a new finance officer.

2. However, with regard to Dimension Four (Perception of Impact) it remains uncertain what the real results are as the monitoring system in place is not sufficient to document results and analyze the effectiveness of GWED-G. There is no doubt that GWED-G is contributing to the realization of results at outcome and impact levels, but to what extent and how this is not known from the available information.

Relevance of the changes

This has been analyzed in chapter 5.3

Explaining factors to identified changes

Same

Assessment of project design

Statements	Scores
The project was well designed	7
The project was implemented as designed	8
The project reached all its objectives	6
The observed results are attributable to the project interventions	8
The observed results are relevant to the project beneficiaries	7

Scale of Scores: 'Not at all' (1) - 'Completely' (10)

Annexes

- 1. Short description of the MFS II CSS baseline and endline methodology**
- 2. Description and scoring of relative changes CSS 2012-2014**
- 3. List of people interviewed**
- 4. List of documents consulted**
- 5. Testimonies of Group Empowerment**

Annex 1: Short description of the baseline 2012 – endline 2014 methodology applied

Introduction

During the baseline 2012 and the endline 2014 a general methodology has been developed for the CSS Uganda SPO studies which has been applied to all SPO in more or less the same way. This methodology has followed the Civil Society Index methodology with a major focus on the perception of social and political impacts as a result of the activities of the SPO under review. A methodological guide has been developed based on the earlier developed Baseline Methodological Guide and discussions with the Wageningen University CDI studies for Civil Society Strengthening, in particular contribution analysis (Methodological Guide Endline 2014 is presented in Annex). As has been described in the Baseline report, the Uganda study intends to make a comparison of the changes of the five Civil Society Index (CSI) dimensions over the period 2011-2014. In 2012 the Evaluation Framework has been developed on the basis of the Civil Society Strengthening Assessment Framework also known as the CSI as developed by Civicus. The five pillars as prescribed by the MFS II evaluation framework has been elaborated into a set of 25 indicators (excluding the context description). The CSS Evaluation Framework for Uganda has been applied unchanged in both the baseline phase as well as the endline 2014.

In the endline of 2014 the focus has been on the dimensions of Civic Engagement (social engagement and political engagement; dimension I) and the Realised (or perceived) Impact of their social and political engagement (dimension IV). But the scoring and description of relative changes has been done for all 25 indicators including dimensions II (Level of Organisation) and III (Practice of Values).

No monitoring has been undertaken in 2013 as there was no budget available. Furthermore, the period between the baseline and the endline was already relatively short to assess impact.

Endline 2014 SPO selection and reporting

In the baseline 2012, 17 SPOs had been randomly selected from the long list of about 120 SPOs being supported by the Dutch MFS consortia. In addition the 8 SPOs under the 5C study have also been addressed with regard to their Civil Society Strengthening. From the original 17 SPOs under the CSS study, 13 have been retained for the endline study at the start of the endline.

The Criteria which have been used for the selection of the SPOs to be included in the endline were:

- a) Selecting the SPOs that will be part of the process tracing exercise (before fieldwork).
- b) Selecting the specific outcomes that will be analyzed using the process tracing methodology.

From the 13 SPOs retained for the endline, finally 3 organisations have not been included. It appeared to be too complicated and time-consuming to include the two SPOs of the Capacity Building exercise. They could only be included towards the end of the endline exercise as the Uganda CapDev ETC team was still working with these organisations. A third SPO was left out as they did not wish to collaborate during the endline exercise also for reasons of being included in the MDG evaluation. Finally only eight out of ten remaining organisations have been reported upon for the endline 2014 as the lack of data consistency for the two remaining made it impossible to sufficiently address the evaluation questions.

Methods/ techniques

During the baseline 2012 and the endline 2014 the following methods have been used:

1. Before/ after comparison

Upon completion of the 2012 CS baseline study a clear picture of the Civil Society Strengthening efforts by the individual SPOs both in terms of Civil Society engagement as well as lobbying and advocacy (political engagement) had been made. This was realized by taking stock of what was the

situation in 2012 since the start of the individual projects one or two years earlier on the basis of the indicators as formulated for the baseline.

A similar assessment has been made in 2014 during the endline analysis when a description has been made of the changes in the period since the baseline 2012. On the basis of these changes a score has been given for positive/ negative changes or no change at all. The relative changes 2012-2014 have been further analysed to understand what has contributed to these changes in the

2. Case studies

The case studies are described in most of the studies on the basis of the “stories” of the beneficiaries and / or partner organisations as well as representatives of the “lobbying targets”. The 2012 baseline include descriptions of specific cases which have identified and described to illustrate the activities, outputs and outcomes of the SPO in question. In 2014, these cases have been further elaborated to assess the contribution of the SPO to the realization of the achieved outcomes through an contribution analysis.

3. Focus Group Discussions

Focus Group Discussions have been used to interview several stakeholders in order to capture the opinion or meaning of various persons at a time. FGDs have been held in the first place with the staff of the partner organisations in order to address the issue of relative changes 2012-2014 (including timeline analysis) as well as the theory of change which was being applied by the SPO.

Secondly, FGD have been held with groups of the beneficiaries of the SPO in order to assess their opinion on the changes in their organisation and/ or communities.

4. Individual interviews

Both during the 2012 Baseline and the 2014 Endline Individual interviews have been held with selected stakeholders on the basis of the research questions as formulated in the CS research guide. These interviews have been used for the assessment of the relative changes 2012-2014 in the contribution analysis.

5. Timeline analysis

In both the baseline 2012 as well as the endline 2014 and timeline analysis has been done in order to understand the development of the organisation over time in the face of both internal and external developments. The latter timeline analysis has been used to understand better the relative changes, the implementation of concrete activities based on the theory of change as well as to assess the contribution of the SPO to the realization of the intended outcomes.

Sampling of beneficiaries/ informants

During the baseline 2012 and endline 2014 a similar approach to the sampling of beneficiaries and informants has been applied. The sample of the beneficiaries to be interviewed was done by the Ugandan consultants. It was agreed in the Baseline Methodological guide that a wide range of stakeholders would be interviewed, either during the ‘staff analytical workshop’ with the attendance of as many staff member relevant for management, programme implementation and financial management. A similar approach has been used during the endline 2014.

Moreover, focus group interviews were held with beneficiaries at their location, with responsible staff of beneficiary organisations (eg primary schools teachers, cooperative board members, health workers, extension workers, etcetera). In a few instances board members have been contacted and interviewed on their role and vision on the organisation. Other stakeholders from government agencies such as local government staff or ministerial staff have been interviewed on an individual basis.

The selection of groups/ individuals to be interviewed was often made on the basis of the availability, relative proximity (most research was done during the rainy season and in regions with very poor transport infrastructure).

The persons and/ or groups interviewed are mentioned in each SPO report in Annex.

Annex 2: Relative Changes Civil Society Strengthening 2012-2014

Indicator	Assessment (baseline)	Score	Endline
Dimension 1: Civic Engagement		2	Overall Relative change Dimension 1: +1 (positive)
1a – diversity of socially based engagement		2	Change: +1
1. Degree to which the needs of beneficiaries / target groups are included in SPOs analysis, planning and implementation.	GWED-G’s programmes directly relate to the needs of their beneficiaries. The youth programme that is being implemented is responding to the needs of many youths in the region who were affected by the war and are in need of solutions to reinvent their lives. GWED-G programmes include Human rights and security, peace building, and health. All the above are very pertinent for communities that are just emerging from long periods of conflict.		Process of consultation remains the same, new things have come eg VLSDA, new tools. Focus areas such as education. Needs assesment are done on the basis of which GWED-G adapts their programme, through meetings, with participatory tools, eg ratings
2. Degree of participation of target groups in analysis and planning of SPOs.	Field programme meetings during which GWED-G staff engage with the beneficiaries enables them to gather insights in the needs of the beneficiaries and later incorporate them into the GWED-G plans. The beneficiaries contribute to the GWED-G programmes through such consultations.		Increased active participation, involve them in planning processes. Level of empowerment of grassroots network has grown. Enables active network to mobilizing people, involved in passing information to beneficiaries and other way around. Give feedback about best implementation, community meetings dialogue. Consultated process, in the process the community actively participates. Civic enagement in Labworomo. Increased sense of ownership. Youth groups are informed about activities beforehand, they are prepared. GWED-G doesn’t have to accompany visitors, they are self-ware and self-capable.
1b – diversity of political engagement		2	Change: =
3. Number of dialogue platforms with local or national government that SPO is participating in.	GWED-G is interacting with local government related to its core business of promoting justice and peaceful co-existence, in particular with the law enforcement agencies, district human rights department and the community development department. It is also an active partner in the District NGO forums which collaborates with district agencies.		Police cooperation: monthly meetings. GWED-G give reports and concerns and police responds in working groups, child protection & GVP. Forum to take matters up with police. GWED-G supports police with PF3 forms: 4x year training of police and health worker on GBV. Community policing with police Political leader (councillors) Police is actively invited in meeting/ and trainings Sub-county chiefs/SLC Political Leaders. Engagement with government/police: conscious move to follow all procedures and processes to avoid conflict. Proper relationship building. District community service dept. District gender officer participated in trainings and gender issues. Land rights program: distrcet land officers collaborate with GWED on issues land rights, traditional leaders involved in resolving land issues

		District leadership finds it easier to enter the community through GWED-G instead of directly themselves (Lack of trust from community) . BOBI subcountysolving domestic violence GBV cases, the subcounty refers cases to network of GWED-G. resucuers of LC, (have no political mandate)
4. What is the intensity of involvement in dialogue platforms or sectoral networks?		No information
Dimension 2: Level of Organisation		2,3
2a – Organisational level of civil society		3
Overall Relative change Dimension 2: +2 (positive)		
2a – Organisational level of civil society		Change: +1
5. Degree of participation of the SPO (and possibly CFAs) in sectoral networks of civil society organisations.	Several of the GWED-G programmes are implemented through collaborative arrangements. Examples to illustrate GWED-G’s intensity of involvement include the MFSII supported youth programme implemented by a network of four organisations. The Northern Uganda Human Rights Partnership (NUHRP) is another network in which GWED-G plays a lead in implementing projects funded by Amnesty International. GWED-G now has been elected as the new host institution replacing ACORD whose tenure was for over 5years. GWED G is a member of several thematic networks that aim at promoting peaceful co-existence at district and national level. It is a member of the Gulu NGO forum, it is also a member of the human rights network of northern Uganda. In all these networks GWED-G takes key leadership roles on advocacy and communication.	Involvement: UWONET, NUHRP, GBV pervention national network, NAP (National Plan of Action) 1035 resolution group (women peace and security) , GWED-G collecting data in distrctit. CEDEW (investigating cedew principle implementation by government) shadow committee UWOPA (Ugada Women of Parliament Association) , EU project, where GWED-G will link grassroots interest to policymakers at parliament. Issues in implementation Human Right Frameworks & Constitution, direct reporting to parliament member from working committee human rights.GWED-G also sits at the ICGLR (International Conference for Great Lakes Region) platform and monitors the implementations of ICGLR in the country.
6. Nature of the relationship between the SPO (and possibly CFAs) and sectoral networks/umbrella organisations in the MDG/theme.	GWED-G is regarded positively by its partners in the networks that it participates in because of their centrality to the stability of the entire northern part of the country.	Leadership in the platforms where GWED-G is involved, African HR Education Network, 9 countries, implementing HR education programmes. Amnesty pulled out of Uganda, GWED-G elected chairing to continue network. NUHRP GWED-G steering committee. UWONET: GWED-G represents Northern Uganda National GBV network – GWED-G committee of construction and transport SGBV working groups at district levels. GWED-G monitors health centres. GWED-G played active role in Monitoring of right to health, example led to training materials and workshop leader.

			2013 GWED-G was invited to be panel of experts GBV prevention network forum UK govt: GWED-G is known
2b – Dialogue and communication		2	Change: =
7. Degree to which a shared analysis of situation in society exists	<p>GWED-G collaborates with other CS organisations in implementing a number of its programmes. For instance the Youth programme is implemented in conjunction with four other partner organisations having done the joint analysis on the challenges facing the youth in the post war region and through developing a joint implementation framework.</p> <p>GWED –G is active in producing and sharing information on its work. It has a website, produces annual narrative and financial reports which are shared with other stakeholders. GWED-G also shares information with relevant government departments at the district level. Through radio programmes and talk shows the organisation shares information regarding its work, creates a space through phone for people to debate human rights issues and promotes the rights of war affected women and prevention and response to gender based violence.</p> <p>GWED-Gin collaboration with Justice and Peace Commission through the auspices of the Northern Uganda Human Rights Coalition is also jointly implementing a project on improving community access to justice.</p> <p>GWED-G main means of communication with its beneficiaries is during group consultation meetings and training events at community level. In addition GWED-G runs radio programmes on key topics under some of its programmes.</p>		VLSA Youth program Reproductive health in schools
8. Degree of joint activity as a result of joint analysis			
9. Mode, nature and quality of dialogue / communication			<p>Level of information sharing: resource center where a lot of materials , methodologies cen be read.</p> <p>GWED-G also active in HR project in selected schools in 2 districts</p>
2c – financial and human resources		2	Change: +1
10. Composition of current financial resource base of SPO	<p>In terms of financial resources, the organisation is dependent on external financial support and has managed to link up a fairly good number of donor partners. All programmes are funded 100% with external donors.</p> <p>GWED-G staff have a varied educational level ranging from MSc for the executive director to Diploma holder for most of the field staff. The finance officer has a degree in accounting. The organisation has a technical advisor from Germany whose is supporting the organisation to refine its strategic</p>		
11. Degree of dependency of external funding			
12. Human resources management by the SPO			<p>Expanded expertise and staff numbers</p> <p>Technical support for intern. SIT (School of international training)</p> <p>Also voluntary work offered to graduates</p>

	<p>planning. The organisation also provides opportunity for interns from both Uganda and else outside. At the time of the evaluation two interns from the US were doing their practical work with the organisation while several were also hosted from Ugandan universities.</p>		<p>No technical advisor International intern did study on youths groups project. Money being raised to support youth groups micro finance projects. Global giving website GWED G page : build on this program to finance youth groups projects (fish farming, beekeeping, ox ploughing, goats rearing)</p>
Dimension 3: Practice of Values		1,3	Overall Relative change Dimension 3: +5 (very positive)
3.a - Internal Governance		2	Change: +2
13. Degree to which organisational structures are involved in strategic management of the SPO	<p>Regular staff (monthly) meetings are held and this is the main method of sharing information among the staff. Programme meetings are attended by staff working on those specific programmes. Annual reports are shared widely which offers additional opportunity for information sharing.</p> <p>The Executive director is the head of the Secretariat and is supported by a team of senior managers that include the finance and administration manager, the programme coordinators and a technical advisor. The Board meets quarterly to provide regular guidance to the Executive director and the staff in executing their roles. The organisation structures seems to be well managed.</p>		<p>No monthly, but weekly staff meetings: discuss our issues, programs, administration, review the week, what is coming up. VSLA (voluntary savings & loan) every Friday . Mid-term & annual review meetings: discuss our programmes and review annual reports & performance evaluation.</p>
14. Degree of sharing of information to staff (structured and regular)			<p>Quarterly meetings of projects : evaluation and planning of next quarter Monthly work plan: operational meetings (logistics) Board level: review strategic plan engagement of board in finalisation, staff has been actively involved. Aligning government and enabling board to close follow Board: Quarterly monitoring in the field, with the staff. After the board meeting, field monitoring. Sharing reports, from the secretariat always shared with the board Communication from board to staff 3 years board would barely meet, now they meet more than quarterly, meeting itself has improved. Number of board members increased from 5 to 7. Now written report instead of verbal report Efficiency: they way meetings are organised have improved. Systems and procedures are improved. More involvement. Meeting frequently results is less backload, they are better informed.</p>
3b- Transparency		1	Change: +2
15. Independent external (financial) auditing being done	<p>Independent annual audits are undertaken and shared with partners of the organisation and the Board. It was not clear if these audits are shared with the</p>		<p>Audit report is shared, board review and advises how to respond appropriately. Few years gaps in accounting system, has been adressed.</p>

	rest of the staff team although senior management team members do have access to it. The last audit that the evaluation team saw was for the period 2010-2011. GWED-G's annual financial and narrative reports provides detailed information as a way of increasing its transparency. It highlights the programmes implemented, who the donors are and how much money the donors made available to undertake activities. Monthly review and planning meetings are also held to involve staff in agenda and target setting. The organisation seems to provide more upward accountability to the board and its donors than downward accountability to its beneficiaries. It could also be a product of lack of familiarity with the best way of implementing downward accountability.		Board recommended to attract extra Finance person. New accountancy program. Improved: finance people gives financial report in every meeting Project manager is better informed to know where resources are pulled from. Timelines are discussed to meet scope and budget.
16. Degree of transparency towards beneficiaries			Budget/workplan are being sent to district, MoU signed with district and you pull all the budgets, including the name of donor (who is funding what).
17. Extent of upward and downward accountability by SPO			Beneficiaries: annual reports and budgets shared with beneficiaries through inception meetings, discuss project goals, objective and roles and how much do we have to this work. Project implementation Community (beneficiary representatives) at district and subcounty level, monitor budget and project. In every sub-county budget/workplan is shared, sub-county chief has information on what GWED-G is doing. Awach: construction of resource center, at opening community : if community would not have been involved in this project, this would not have been achieved.
3c – Internal financial and human resources management		1	Change: +1
18. Extent to which internal written procedures for financial and human resource management are being respected	The organisation has established internal accountability procedures that are followed. Requisitions and procurements are signed and approved by at least three different people before checks are signed. Also staff advanced funds has to account for the funds if not the advance remains in their name and can be deducted from their pay.		HR manual been revised: still another review. In strategic plan there is a component on organisational development. In HR manual this is taken up.: all salary paid from 1 account, staff budget should not be influencing salary scales. Insurance for staff is secured (workmans compensation) free hospital treatment. 13 year salary. Harmonize in HR manual .when apply to donor, donor has to observe and budget.
Dimension 4: Perception of Impact		1,3	Overall Relative change Dimension 4: +2 (positive)
4a –Responsiveness		2	Change: =
19. Degree of incorporation of priorities of target groups in plans and activities	GWED is responding to a wide range of social economic cultural and political issues and challenges that the communities in Acholi sub region are grappling with as a result of the war. The interventions that the organisation is undertaking are therefore responding to real needs in the community.		
20. Degree of alignment with			New policy : public order management act GWED-G tries to safeguard

<p>government policies (planned and implemented)</p>	<p>Respondents met at community level mentioned the fact that the organisation was helping them to find their voice on matters that they were not able to. Many people had been so traumatised by the IDP experience that they no longer have the self confidence to engage in discussion even around their own rights. GWED-G's interventions and the work that trained Paralegals are doing are enabling them to rediscover their rights.</p> <p>The government has put in place many pronouncements of human rights and justice. However on many occasions the organs of the state have been responsible for violating those rights which is major contradiction. GWED's work draws attention to these policy provisions and helps the general public to equally appreciate the need to get those policy pronouncements to be functional. To the extent therefore that GWED-G's work is grounded in established policy it enhances the work of the government.</p>	<p>against that. GWED –G works involves community dialogues, meetings etc. Work Plan are shared with district in advance to keep govt updated on GWED work. So as not to interfere with public order rules. Signing MoU with district helps to align GWED-G program with govt programs and budget/plan are shared</p> <p>GWED links with national plan of action : GWED-G contributes to plan of actions (human rights : what is govt. action plan and how does it relate to GWED-G actions: gaps addressed, align and contribution.</p> <p>GWED involved in District/sub-county Budget conferences : district youth budget , youth not ware of plan disctrict for next year for youth. 5 years Gulu district youth strategic plan: facilitates youth budget for next 5 years</p> <p>Petition: youtths present petition : telling govt situation about youths.</p> <p>GWED-G collaboratoin with police decreased violation of human rights</p>	
<p>4b – Social impact</p>		<p>1</p>	<p>Change: -1</p>
<p>21. Target group satisfaction regarding fulfilment of their primary social and/ or personal concern</p>	<p>Target group satisfaction is not yet very clearly spelled out. People trained by GWED-G undertake activities at community level. These include counselling and guidance for fellow community members and follow up on people with HIV/AIDS. GWED-G has also supported many women whose land had been grabbed to seek redress through both traditional institutions and formal government structures such as the police to get their land back.</p>	<p>No information available</p>	
<p>22. Degree to which empowerment of target groups towards public and/ or private sectors have been enhanced</p>	<p>GWED's capacity building efforts are spread through its various programme activities. These include community mobilisation, organising dialogue sessions to enhance public awareness, presenting case studies to highlight cases of abuses of human rights, educating women about their rights and obligations, etcetera. Many of the beneficiaries met during the study were not aware of their rights such that when they were arrested by the police did not know what to do and how to assert for their rights. However through GWED training there is growing awareness and increasing numbers of people are now able to demand for fair treatment as defined under the law.</p>	<p>In Awach sub county youth groups managed to advocate for officials residing at the sub-county level:</p> <ul style="list-style-type: none"> - Youth group asked for road improvement. Sub-county has managed to improve how it works with the district; - Youth are becoming more self-reliant and responsible, using their energy productively, due to GWED G interventions. 	
<p>23. Degree of sustainability of the social impact</p>		<p>All structures and CBOs/Youth Groups became independent. When concluding project sub-country authorities are involved to hand over projects for ensuring sustainability. For projects to continue During selection of beneficiaries, every village in incorporated, so at end of project they can continue works . materials stay available even if GWED-G is not there.</p> <p>CBOs are registered so they can be supported also from other souces</p>	

			and can collaborate with district. No parallel system are created, work in collaboration with present systems, ownership within community. GWED-G remains available for advisory and support + capacity is strenthende of other stakeholders, because of GWED-G interventions.
4c policy impact		1	Change: -1
24. Level of influence of SPOs towards major policy changes	GWED-G's work reveals practical challenges that underpin the implementation of some policies. The organisation reveals the challenge they have in having to collaborate with law enforcement agencies, such as the police and the army, at a time when these are often implicated in human rights violations.		
25. Degree to which SPOs are holding government (national and local) and private sector accountable	<p>While it may not be defined as policy shifts, the collaboration between the police and GWED-G has improved. Through its case management and referrals work, GWED-G has become an indispensable partner with the police. In 2011 alone GWED-G recorded 272 cases which were reported to GWED human rights volunteers. Some of these cases were settled through police intervention and arresting of offenders while some were settled through social systems managed at community level.</p>		<p>Community groups influence rehabilitation of road : putting govt. accountable to deliver services to its constituents. GWED-G work on Human Rights to make people aware of the demand side of governement services, eg. Awach: Monitoring of delivery of services by health centres. Demand level is getting rooted. GWED-G is not the demander: the community is the right holder</p> <p>Interface meeting with leaders; where community begins to ask for accountability.</p> <p>Back up civil society voices : documented evidence. At sub-coutry level: budget for celebration of int. women days : women has influenced this Building capacity on revenue collections, tax collections. Local govt act: not reinforced/implemented, Accountability forums Bosco.</p> <p>GWED-G engages directly with district through policy paper: on issues on lack of access of land to women. Participatory proccess: issues identified, position paper offer to district. Govt adopted this now being trnslated into policy.</p> <p>Massive community campaigns on issues affecting women Bills not yet adopted are being pushed (lobbying).</p>

Annex 3: List of participants

People consulted Awach Sub-County

1. District chairperson
2. District speaker
3. Akena Samuel, Awach Sub County Chairperson
4. Akot Gloria
5. Achola Irene
6. Ajok Betty
7. Oroma Annet Treasurer
8. Opio Denis
9. Okot Christopher
10. Olum Bosco Mobilizer
11. Opio Remis Chairperson

Annex 4: List of Documents consulted

1. Gulu District Position Paper
2. GWED-G Five Year Strategic Plan 2014-2018
3. Gulu District Youth Council Strategic Plan 2014-2018
4. GWED-G CSS Baseline Report

The case of Pe Ibwol Wa Youth Group in Awach Sub County Gulu district

Background of the group

The name of the group Pe Ibwol Pe youth means don't deceive us youth group. It is found in Gwengdiya parish, Awach Sub County Gulu district. The group which was started in 2011 comprises of 25 members (9 female and 16 male) was started to:

- i. Foster unity and harmony amongst youth groups so that they can access different services
- ii. Uplift the group members in terms of improving their economic and livelihood activities
- iii. Help rehabilitate other youth indulging in bad acts like smoking, alcoholism to show them a direction that we as youth can come out of this

Projects implemented in partnership with GWED-G

- i. Music, dance and drama
- ii. VSLA
- iii. Training on basic human rights knowledge and concepts
- iv. Monitoring, documentation and reporting on human rights abuses in the community

Impact of the projects on the lives of the group members and the community

- i. Broadened group understanding in terms of human rights and members now observe human rights in their households
- ii. It has fostered unity among the youth because of the group dynamics as we feel now we are a stronger youth group than before. The work that we have done in the community is benefiting the group members and the community on the whole.
- iii. Together as the youth groups in Awach Sub County, we advocated for the rehabilitation of the Awach to Paibona road which is around 12km
- iv. As a group, we advocated for the construction of a borehole in a place where the water had germs that cause bilharzia and at the moment a borehole has been constructed and the people are enjoying clean water hence the cases of bilharzia have reduced significantly.
- v. We are also engaged in group farming with support of ox-ploughs and oxen from GWED-G. We now no longer manually dig and we also plough other community members' gardens which has created more income for us. At the moment if there is any community contribution, members can easily come out and contribute for the community's welfare.

The road rehabilitation and borehole construction the advocacy process.

Following advocacy training by GWED-G to the group, the members were able to engage the community to identify the most important challenges affecting them. The community prioritised unsafe water which had led to so many bilharzia cases. Subsequently letters were written to the local area chief, LC1 of the area and the councillor of the area. They gave community members the go ahead to take the issue to the Sub County authorities. The issue was presented to the Sub County authorities in the presence of the LC5 councillor who in turn referred it to the district. The district subsequently responded by sinking a borehole in the area.

As a group and community we felt so happy because our issue was addressed and we realized that when we work as a group and have unified voice things get done. **Group Chairperson**

The borehole water is now being used by the community members. Each household pays 500/= per month to use the borehole. There is a borehole management committee and also someone at the borehole station who records the households that have paid. This means that if someone from that household that hasn't yet paid the monthly fees comes to fetch water, they are prevented from doing so.



MFS II evaluator on the newly constructed borehole in Gwengdiya parish, Awach Sub County

The case of lobbying and advocacy for the Gwengdiya to Paibona road repair:

The process of the road rehabilitation began through initiating exchange visits by group leaders between the youth groups in Gwengdiya and Paibona parishes. One of the celebrations for the international youth day for Awach Sub County was organized in Paibona where the road was very bad. Such days attract so many people including the big district leaders such as MPs. The celebrations were in August, a rainy season. The youth leaders deliberately decided to hold the celebrations in Paibona parish so that the big leaders in the district could also experience the bad roads. In the process of going to Paibona, some leaders' vehicles got stuck while others had to find alternative means of reaching the venue in Paibona. When the celebrations got underway, the status of the road was one of the key issues presented by the youth to the people attending the celebrations. Although the MPs and other leaders noted the concern, they failed to speedily respond prompting the youth group leaders to go back to Paibona and with the endorsement of local leaders, LC1 and 2 wrote a memorandum. The youth leaders then took the MOU to the Sub County authorities where the LC3 Chairperson, Speaker of the Sub County and LC5 councillor also endorsed it. From there the issue was taken to the district speaker who used his office to have the road worked on and at the moment it is in a much better state.

The now better road has eased transportation along the route eased access medical services, one of the reasons why the youth advocated for the rehabilitation of the road.

The road has now boosted trade especially boda boda riders that offer transport and trucks that transport sand and agricultural produce thus raising the revenue to the Sub County because there is a charge levied on each truck that passes through.



The rehabilitated Awach – Paibona road which is about 12km

Other projects handled by the group

Fighting child abuse and neglect

We have tried so hard to fight against child neglect and abuse in the community. With the initiative of the group, we have built a small learning centre where such children whose parents have abused them or can't afford to send them to nursery schools go during the day to get some basic elementary knowledge to help push them in life.

Good relationship with the Sub County

The relationship is good because most times if we have meetings and want some space at the Sub County, we simply ask for it and it is given to us. Our relationship stems right back from the grass roots. The local chiefs who are all in Awach have very good working relationships with the group. Most times if there are any meetings, we normally call upon the LC3 Chairperson to come and join us which he does.

VSLA in the group members

- i). VSLA has helped to promote a saving culture into the group members to save for the future. The minimum amount for a share is 1,000 and the maximum 5,000 shillings with welfare being at 200 shillings We began VSLA in 2011 and in 2012 after the first action audit (cycle) we had saved around 3.8 million shillings. The group Chairperson used his savings to buy piglets which he eventually sold to buy a cow. The cow has already produced and is pregnant again.
- ii). Other members have been facilitated to set up small business around the centre such as buying local beans which you can resell with a profit.
- iii). VSLA has enabled one of the members to set up a shop although thugs broke into his shop and took most of what he had invested.
- iv). VSLA has enabled one of the members to pay school fees for her children in primary one and two. The money also helps her in feeding at home and buying scholastic materials for the children.

Women participation in the group

As a group we value gender and encourage in all our activities equal gender participation e.g. if we are going to plough land using oxen, we don't segregate either a lady can be on the ox-plough while the male is trying to keep the animals going and vice versa. In our leadership it is constitutionally stated that anyone irrespective of gender is encouraged to participate and take up leadership of any position. The problem is that the issue of culture comes in which plays a very big role where roles mostly are played by male. This is very difficult to challenge and manifests everywhere.

The group dealing with cases of gender based violence

Among the activities we are conducting is music, dance and drama. We normally try to act in drama for some of the gender based violence issues that are reported to us to show that men and women have equal rights, to promote equal responsibilities in a house, to sensitize the community that in a relationship there shouldn't be marital rape and so many more. Whenever we hear of any case of GBV, we as a group normally go to conduct immediate response services like referrals and emotional support. This service is given to the general community.

Other expectations from GWED-G

- i). The region is blessed with a lot of land therefore if GWED-G can support us with mechanized agricultural equipment that can increase production with less labour.
- ii). There is need for continued human rights education, awareness and knowledge especially for us to understand the latest frameworks in regards to declarations and human rights issues so that as a group we can continue conducting awareness creation in the community in this regards.
- iii). Given the large geographical area in which the demand for human rights education and awareness is, for us to reach out to more people with our activities using our drama, referrals etc. we would suggest that if some means of transport is availed to the group or individually to facilitate a faster and wider area of coverage regarding our activities. This knowledge is not only needed in Gwengdiya but also in other parishes. If we as youth don't come out to act then the other youth may remain ignorant.

On group sustainability

At the moment the engagement with GWED-G is not so regular and the outreaches we are doing are voluntarily. With time we can stand alone as a group without GWED-G's support.

Research Manual

Evaluation Study *Capacity development* of Southern partner organisations - Uganda

Process Tracing

Molenrij: April 2014
Eric Kamphuis

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1. Introduction

This manual to specify the 'endline' of the capacity development study within the framework of the Joint MFS II evaluations at country level – UGANDA. It regards guiding the research on 3 selected SPO's out of the sample of 8 to trace more in detail the factors that were contributing to changes in the capacity of these SPO's. As was mentioned in the previous research manual a separate additional manual would attend to this Process Tracing¹. In the Endline manual the selection of the 3 SPO's out of the total of 8 the next table the 3 selected SPO's are mentioned and also the reasons why those were selected². The next table gives the 3 selected SPO's, their location and the CFA consortium they are associated with.

	SPO	Location	Consortium
A	Ruwenzori Consortium for Civil Competence (RWECCO)	Kasese	People Unlimited 4.1
B	Save for Health Uganda	Kampala	Communities of Change
C	War Child Uganda Office	Pader	Connect Now

The Manual Process Tracing has been put up in line with the Terms of reference Joint MFS II evaluations at country level, as formulated by NWO/WOTRO³. It concentrates on two of the four predefined evaluation questions with respect to the capacity development of Southern Partner Organisations (SPO's):

- a) *To what degree are the changes identified in partner capacity attributable to development interventions undertaken by the MFS II consortia (i.e. measuring effectiveness)?*
- b) *What factors explain the findings drawn from the questions above?*

Besides that exchanges on the Evaluation methodology MFS II country evaluations, Capacity of Southern Organisations (5C) component have been taken into account⁴. The manual reflects ETC's approach to Process Tracing. The same research team charged with the endline study will also carry out activities in accordance with this additional manual: it describes the chosen approach to process tracing and outlines the steps to be taken in this research. A detailed outline of special responsibilities of the members of the Uganda research team (ETC research team plus the in-country research team of Makerere University) cannot be given, as the process tracing per each selected SPO will require a tailor-made approach. This manual is thus confined to the main steps to be taken; experience will learn what is possible within the budget constraints of the total endline MFSII evaluation. It is noted that this manual will be used in addition to what was described and indicated in the Endline Manual.

¹ Research Manual Evaluation Study *Capacity development* of Southern partner organisations - Uganda - Endline, Eric Kamphuis, Molenrij/Kampala: March - April 2014, p.p. 6-7

² Research Manual Evaluation Study *Capacity development* of Southern partner organisations - Uganda - Endline, Eric Kamphuis, Molenrij/Kampala: March - April 2014, p. 9 and Annex 5 of this Manual

³ Call for proposals Joint MFS II evaluations of development interventions at country level: Second call Bangladesh, Ethiopia and Uganda, The Hague, January 2012, Netherlands Organisation for Scientific Research, p. 26

⁴ With the Centre of Development Innovation, Wageningen and within the Workshop Joint MFS II Evaluations Amsterdam, 26 and 27 February 2014 - Synthesis team

2. ETC's Approach to Process Tracing (PT)

2.1 Introduction

After completing the capacity development baseline studies of 8 SPO's in Uganda in 2012, the way of approaching the evaluation questions on attribution and explaining factors in the endline was intensively discussed with all involved in the Joint MFS II evaluations at country level. This resulted in agreeing upon embarking with Process Tracing (PT) to what actors/factors capacity changes of SPO's can be attributed with special attention to the relationship between the SPO's and their respective supporting CFA's. As such approach was expected to be resource intensive, the capacity development PT would concentrate on a subsample of the 8 SPO's that are in the Uganda capacity development sample. Within this subsample would then be focused on 2 or 3 key outcomes⁵. For the capacity development study Uganda this meant a selection of 3 SPO's out the sample of 8 and also a concentration on 2 capacity development outcomes that are related to the Core Capabilities To Act & Commit and To Adapt & Self Renew⁶.

2.2 Process Tracing and Theory of Change

The literature on Process Tracing shows that PT can serve different objectives, and also that different PT concepts can be used⁷. In the ETC approach to PT entails *the plausible explanation of an specific outcome in a specific historical case, the identification of actors/factors that contribute to this outcome, and the assessment their relative importance*⁸. For this, the collection and processing of qualitative as well as quantitative data needed.

Based on this dealing with data the chosen approach to PT should result finally in providing a plausible explanation of outcome changes. In this explanation the use of the core concept of Theory of Change (ToC) is essential, because a ToC makes explicit in what way outcomes should be realised as a consequence of strategic choices and implementation activities thereof. A ToC gives thus orientation to PT: it gives the areas of analysis that should be covered.

In ETC's approach each ToC encompasses the following areas:

1. **Programme/project/initiative** that seeks to support long/medium-term changes for clearly defines beneficiaries (what outcomes are intended for the beneficiaries?)
2. **Context** of a programme/project/initiative, including social, cultural, political and environmental conditions and other influencing factors/actors (what is important in the context for the realisation of intended outcomes?)
3. **Ideas/theories** about how changes might happen and for checking whether activities and resulting outputs are appropriate for influencing the desired changes (what outputs should be produced to realise the intended outcomes?)
4. **Process/sequence of change** that is anticipated for creating conditions for the desired long/medium-term outcome (what organisational conditions should be fulfilled for the activities that produce the outputs needed for the realisation of the intended outcomes?)

⁵ Report Workshop MFS II Joint Evaluations, Amsterdam, 17 and 18 June 2013, Prepared by Gerton Rongen, Synthesis Team, p.p. 1-2

⁶ See Introduction and Annex 5 for the explanation of the selection criteria

⁷ Process tracing can be used for: Testing theories, Theory building , or Explaining special outcome(s) in specific historical case

⁸ "Contribution analysis explores attribution through assessing the contribution a programme is making to observed results", Contribution analysis: An approach to exploring cause and effect, John Mayne ILAC Brief 16, May 2008, p. 1

5. **Reflection and decision making** for developing strategies, and review of success and failures (what mechanisms and practices for pondered decision making are needed for reviewing, adapting or developing strategies for the realisation of intended outcomes?)⁹

A ToC does not only refer to a fixed scaffold as logical frameworks do. It refers as well to an ongoing process within CFA's and SPO's of pondering current and new approaches to alternative policy options along with actions to safeguard their implementation.

Each ToC contains thus an idea about how a results chain for an organisation looks concretely. Schematically a Results Chain is depicted in Figure 1.

Fig 1: Results Chain scheme with Outcome Areas

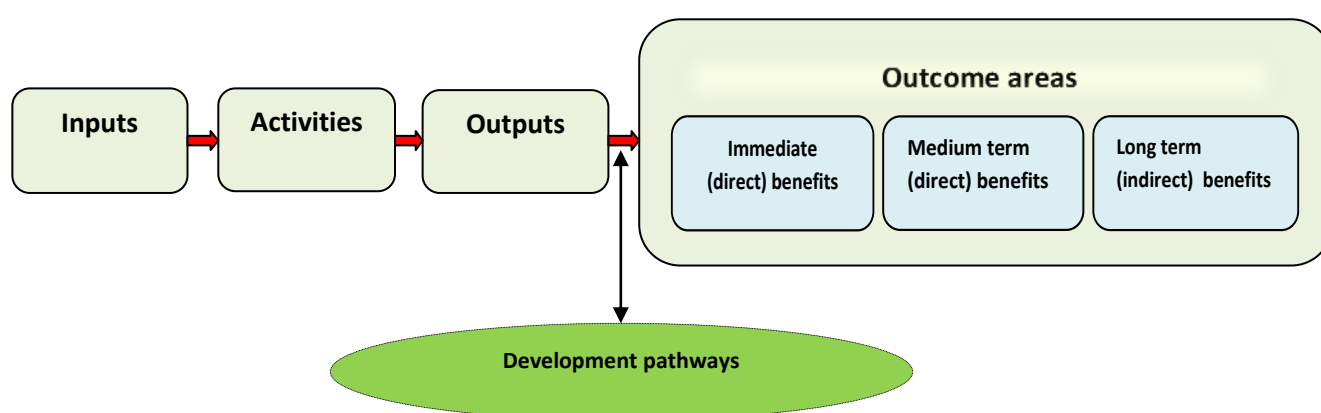


Figure 1 shows that each organisation (in case of the MFSII evaluation CFA's and SPO's) produces *Outputs* for beneficiaries (for example: technical trainings, health insurance, advisory/counselling services, extension services, educational services) by carrying out *Activities* (organisation & delivery of mentioned services, and by using *Inputs* (for example: own income, funding from thirds, services from others, upgrading own personnel).

In Process Tracing (PT) there is a main focus on the question how and to what extend the *Outputs* an organisation produces contributes to the realisation of a range of differing *Outcomes* (i.e. educational services can contribute to higher literacy, but also at a stable learning environment for youngsters). Additionally, *Outcomes* can be realised *Immediately (maximally 1 year)*, *at Medium term (2-3 years)* or *at Longer term (4 years and beyond)*, depending on what was intended by the organisation. Hence answering the questions how and to what extend *Outputs* do contribute to the realisation of intended *Outcomes* is complex, because the organisation attends to different *Outcome Areas*.

PT tries to deal with these questions by providing the best possible insight by analysing step-by-step how and to what extend *Outputs* have made their contributions to the realisation of intended *Outcomes*, or in other words: PT tries to describe possible *Development Pathways* per each *Outcome Area*. This description is based on oral evidence gathered from the organisation itself, from its beneficiaries, from others that see the organisation operate (through interviews, focus groups, discussion/web platforms) and different written sources (internal: strategic plans, year reports,

⁹ See also Review of the use of 'Theory of Change' in international development, Review Report, Isabel Vogel, April 2012, p.p.14-15 and p. 28

background papers, etc.; external: reviews, media statements/exposure, national/regional policy papers, sector studies, etc.).

2.3 ETC's choices using the described PT/ToC concepts and elements

ETC's approach to Process Tracing within the joint MFSII evaluation on capacity development of SPO's in Uganda will use the above described PT and ToC concepts and elements. Within this frame of reference emphasis will be put on Outcome Areas that reflect *Medium term* benefits for the beneficiary group(s) of the organisation. The choice for the Medium term benefits is in line with NWO/WOTRO's Terms of reference Joint MFS II evaluations at country level that envisages measuring and explaining changes over a period of 2-3 years. PT will be related to firstly the *CFA that is engaged in the SPO under analysis* (one of the 3 selected SPO's) and secondly to *the SPO itself*.

2.3.1 Tracing realisation of CFA's Outcomes

This means that for PT of the CFA's engagement in the SPO is concentrated on the outcomes realised through outputs the CFA has provided during the period 2011-2013. In the capacity development component of the joint MFSII evaluation Uganda this entails that the CFA aimed at bringing about changes in the SPO's capacity, which is reflected by changes in the SPO's 5 core capabilities. As was mentioned in paragraph 1. *Introduction* PT will only be concentrated on the core capabilities To Act & To Commit and To Adapt & Self Renew.

Basically the research question now is: *What CFA Outputs and what factors/actors have contributed to changes in these 2 core capabilities as intended by the CFA?* This implies that the research should be attended to making an inventory of the *Direct benefits of the CFA's Outputs* at Medium Term, to what extent this generated direct benefits for the SPO (for example: did the assignment of a M&E officer contribute to the SPO's capacity? If so, what was the *development pathway* (contributing factors/actors) to the SPO's improved capacity? If not, what was the development pathway (obstructing factors/actors) explaining not taking advantage of the CFA's Output -i.e. funding the assignment of the M&E officer?).

2.3.2 Tracing realisation of SPO's Outcomes

Capacity strengthening is not a goal in itself, but should serve the SPO's programme implementation and consequently its beneficiaries. Apart from attending to tracing changes in the SPO's capacity, will therefore be looked at the question whether changes in the SPO's capacity contributed to a better performance for the benefit of the SPO's beneficiaries as well (for example: did improved acquisition of funding positively influence the stabilisation of the educational environment at medium term? What *development pathway* (i.e. improved quality and reliability of educational services as factors) has lead to this stabilisation? If not, what *obstructing factors/actors played a role?*).

3. Practical consequences stemming from the approach chosen

In the next paragraphs the practical consequences of the chosen approach for the field research are highlighted. PT of contributions to outcome realisation will build on the results yielded in the endline exercise; hence a clear linkage with the research steps taken in the endline exercise are indicated in the following.

3.1 Tracing of the realisation of CFA's Outcomes in SPO's capacity development

In the tracing of the factor/actors that contributed to the realisation of the CFA's intended capacity development outcomes *4 subsequent steps are foreseen*, going from the collection of *general* information/data to *specific* of the same regarding the 2 CC (To Act & To Commit; To Adapt & To Self Renew). All collected endline data/information should serve as basis for tracing of contributions to the CFA's intended outcomes.

	Subject	Approach	Persons involved
General to particular	1. Analysis CFA's <i>Theory of Change</i> and Strategic planning with emphasis on subsequent steps for realisation intended changes	- Document analysis, partially <i>information gathering</i> and <i>verification</i> interviews based on analysis over the period 2011-2014	Relevant CFA management and M&E officers in the Netherlands and staff of decentralised field offices
	2. Assessment whether and how approached 2 CC's <i>fitted within entire CFA support</i> (geared to isolated themes vs to comprehensive capacity strengthening)	- Identification with of subsequent actions taken by CFA and the reasons for those through policy papers, year plans over the baseline - endline period 2012 -2014 - Reality check of CFA's actions through progress reports over same period	Relevant CFA programme officers in the Netherlands and staff of decentralised field offices SPO members involved in strategy and top management
	3. Overview of CFA's <i>activities</i> aiming at concretisation of intended changes of 2 CC's within ToC (level, frequency, external expertise, internal coaching)	- Identification with CFA of <i>intended outcome areas</i> per CC over the baseline - endline period 2012 -2014 - Analysis 5C endline – support sheet CFA (6.4 Endline Manual) - CFA field reports - External evaluations and <i>informing</i> and <i>prompting</i> interviews - Half day <i>workshop/focus group</i> in case of CFA's decentralised field office	Relevant CFA programme officers in the Netherlands and staff of decentralised field offices
	4. Tracing: - Confrontation CFA's <i>ToC outcomes</i> with <i>realised outcomes</i> - Description most plausible development pathway per core capability	- Analysis separate data/information from ToC and outcome realisation - Own analysis and peer reviewing	Evaluation team, external resource persons

3.2 Tracing realisation selected SPO Program/Project Outcomes through CFA CD support

In the tracing of the factor/actors that contributed to the realisation of the SPO's intended service delivery outcomes *4 subsequent steps are foreseen*, going from the collection of *general* information/data to *specific* of the same regarding the 2 selected outcome areas per SPO and their linkage to the 2 CC (To Act & To Commit; To Adapt & To Self Renew). All collected endline data/information should serve as basis for tracing the contributions to the SPO's intended outcomes.

	Subject	Approach	Persons involved
General to particular	1. Overview SPO's <i>Theory of Change</i> and Strategic planning with focus on <i>inventory of programme/ project outcome areas and their needed inputs with focus on SPO's CFA support</i>	- Document analysis, partially <i>information gathering</i> based on endline exercise over the period 2011-2014	Relevant SPO board members, management and M&E officer
	2. Selection of 2 <i>programme/project outcome areas</i> that: - are related to SPO's <i>service delivery</i> - have <i>closest linkage</i> with the CC's <i>To Act & To Commit and To Adapt& Self Renew</i>	- Document analysis on all outcome areas SPO through policy papers, year plans over the period 2011 -2014 - Selection of outcome areas based on o <i>endline exercise</i> , o <i>consultation focus group of SPO's service delivery beneficiaries</i> o analysis information from <i>other sources</i> (externals websites, press, interviews)	Relevant SPO board, management, field and programme officers
	3. Overview realisation <i>selected outcomes</i> by SPO over the period 2011-2014	- Analysis of 2 <i>selected outcome areas</i> with SPO on period 2011 -2014 - SPO field reports - Analysis information endline from entire Annex 6 Manual - External programme/project evaluations and <i>informing</i> and <i>prompting</i> interviews - Half day <i>workshop/focus group</i> with SPO's beneficiaries	Relevant SPO field and programme officers, beneficiaries/beneficiary groups, and externals
	4. Tracing: - Confrontation SPO's ToC intended outcomes with realisation 2 <i>selected outcome areas</i> with emphasis on <i>CFA support to 2 cc's</i> - Description most plausible development pathway per selected outcome area	- Analysis separate data/information from ToC and outcome realisation - Own analysis and peer reviewing	Evaluation team, external local, independent resource persons

3.3 Linkage between CFA support and SPO Programme/Project Outcomes

The results of the tracing exercises related to the CFA support and the SPO Programme/Project Outcomes will be brought together. It is on beforehand not certain whether this linkage (or: different linkages) can be made: it may be the case that CFA's support generated improvement in the cc's To

Act & To Commit and To Adapt & To Self Renew, but that these improvement cannot yet be clearly linked to the 2 analysed SPO service delivery outcomes. May be they contributed to a certain extend to the SPO's outcomes, but the development pathways explaining changes in the SPO's outcomes may indicate other factors/actors as much more important.

The other factors may concern the 3 remaining core capabilities (To Deliver on Development Objectives; To Relate; or To Maintain Coherence), or a variety of external factor/actors. This given urges the researchers to be careful to postulate too easily linkages between CFA support and SPO programme/project outcomes.

The concluding part of the reporting on tracing should therefore be written in terms probable linkages between CFA support and SPO Programme/Project Outcomes. Probable linkages can be formulated and also be verified against the perceptions of the CFA, SPO, and possibly external resource persons.

The next Annex provides a scheme of a result chain that will be used in the reporting.

Annex: Scheme Results chain time line CFA and SPO perspectives

Inputs of CFA	Activities of SPO	Outputs	Outcome areas		
			Immediate (direct) benefits	Medium term (direct) benefits	Long term (indirect) benefits
<p>Resources / strategies CFA</p> <p>Finance:</p> <ul style="list-style-type: none"> Funding SPO for 2 CC's: Capacity to act & commit <p>Capacity to adapt & self-renew</p> <ul style="list-style-type: none"> <p>Personnel support:</p> <ul style="list-style-type: none"> Coaching/backstopping SPO for 2 CC's: Capacity to act & commit <p>Capacity to adapt & self-renew</p> <ul style="list-style-type: none"> 	<p>Listing activities within SPO strategy</p> <p>Selection outcome areas:</p> <ul style="list-style-type: none"> SPO's service delivery Closest linkage to CC's To Act/Commit and To Adapt/Self Renew 	<p>Listing outputs related to selected outcome areas from SPO reporting</p> <ul style="list-style-type: none"> Inventory of realisation listed outputs per outcome area and per core capability Assessment of influence realised outputs to immediate (direct) benefits 	<p>Listing of immediate outcomes, with evident benefit to target audience</p> <ul style="list-style-type: none"> Listing in terms of persons reached In terms of improvement service delivery In terms of improved access to service delivery Assessment of possible influence of realised immediate (direct) benefits on medium term (direct) benefits 	<p>Overview selected outcomes after 2 years of MFS2 funding</p> <ul style="list-style-type: none"> Description plausible explanations of selected outcome areas 	<p><i>In this research not touched upon, because the period baseline - endline is maximally 2-3 years (depending on whether MFS2 funding started in 2011 or in 2012)</i></p>

DRAFT

Research Manual

Evaluation Study *Strengthening Civil Society* - Uganda

MFS II Uganda – Strengthening Civil Society 2011-2014

1. Introduction

This research manual regards the 'endline' within the Civil Society Strengthening (CSS) study of (initially) 25 Southern Partner Organisations (SPOs) within the framework of the Joint MFS II evaluations at country level in Uganda. As the first manual served to guide baseline study on these SPOs, this second manual describes how to build on the results the baseline has yielded and how to pursue attending all endline issues.

This manual, as also the previous one, is a further detailing of the Evaluation methodology MFS II country evaluations, which is aligned with the WUR-CDI approach to implement the 5C and CSS studies, as well as the Terms of reference Joint MFS II evaluations at country level. The manual also takes into account the experience with the implementation of the baselines of the organisations into account. The researchers charged with the endline study will carry out the activities in accordance to this second 'endline' manual.

2. Selection of SPOs in the survey

Initially, at the start of the Joint MFS II Evaluations – UGANDA, 17 SPOs have been randomly selected from the long list of about 120 SPOs being supported by the Dutch MFS consortia. In addition the 8 SPOs under the 5C study have also been addressed with regard to their Civil Society Strengthening

From the 17 SPOs under the CSS study, 13 have been retained for the endline study.

Criteria used for the selection of the SPOs to be included :

- a) Selecting the SPOs that will be part of the process tracing exercise (before fieldwork).
- b) Selecting the specific outcomes that will be analyzed using the process tracing methodology.

In Annex the full list of SPOs studied is presented.

	Southern Partner organisation	Consortium
	MDG 1 - Eradicating poverty and hunger	
2	Vredeseilanden-Coopibo (VECO) Uganda	Communities of Change
4	Send a Cow	IMPACT
5	Southern & East Africa Trade Information Negotiation Institute	IMPACT
6	Kabarole Research Centre (KRC)	People Unlimited 4.1
	MDG 2 Education	
10	Mango Tree	ICCO Alliance (+Connect4Change)
11	African Network for the Prevention and Protection Against Child Abuse and Neglect	Child and Development Alliance
	MDG 4,5,6 - Health	
13	Save for Health Uganda	Communities of Change
14	Diocese of Jinja	Communities of Change
15	Health Child	Connect4change; Communities for Change
16	Uganda Catholic Medical Bureau	Connect4change; Communities of Change
17	HEPS Uganda – Coalition for Health Promotion and Social Development	People Unlimited 4.1

18	Reproductive Health Uganda	SRHR Alliance
	Theme - Fragile state/ Post conflict rehabilitation/ Good governance	
19	Gulu Women Economic Development and Globalization (GWED-G)	Freedom from Fear
21	Kitgum NGO Forum	Freedom from Fear
22	Facilitation for Peace and Development (FAPAD)	ICCO Alliance
23	Uganda Governance Monitoring Platform (UGMP)	People Unlimited 4.1
24	Ruwenzori Consortium for Civil Competence (RWECO)	People Unlimited 4.1

3. Addressing the key CSS evaluation questions

The **MFS II research questions** for the Civil Society Strengthening study have been formulated as follows:

1. What are the changes in civil society in the 2012-2014 period, with particular focus on the relevant MDGs & themes in the selected country?
2. To what degree are the changes identified attributable to the development interventions of the Southern partners of the MFS II consortia (i.e. measuring effectiveness)?
3. What is the relevance of these changes?
4. *Were the development interventions of the MFS II consortia efficient?*
5. What factors explain the findings drawn from the questions above?

Definitions of the most important concepts have been given by the ToR:

- **Change over time:** the difference between the situation at baseline in 2012 and at follow-up in 2014 as measured using uniform and specific outcome indicators;
- **Effectiveness:** the extent to which direct results of development interventions of MFS II consortia and/or their (Southern) partners (output) contribute to the sustainable achievement of policy objectives²⁰ (outcome);
- **Relevance:** the extent to which the objectives of a development intervention are still appropriate (consistent with beneficiaries' requirements, the country's needs, global priorities and partners' and donors' policies) in 2014 given changed circumstances;
- **Efficiency:** a measure of how economically resources (inputs) of MFS II consortia or their (Southern) partners are converted into direct results (outputs);
- **Explaining factors:** factors explaining change over time (or the lack of change), effectiveness, relevance and efficiency.

With respect to the evaluation questions it has been decided during the Workshop Joint MFS II Evaluations of February 2014 not to include the EQ 4 on Efficiency in the 5C and CSS studies.

Research Question number 5 "What factors explain the findings .." will be answered by the Dutch Teamleader on the basis of the information provided. The national researchers will focus on providing the inputs for answering the Research Questions 1-3.

3. Analyzing changes in partner organisation's CSS –Evaluation Question 1

This paragraph describes the data collection and analysis methodology for answering the first evaluation question:

1. What are the changes in civil society in the 2012-2014 period, with particular focus on the relevant MDGs & themes in the selected country?

During the baseline in 2012 information has been collected on each of the 26 agreed upon indicators for each of the four dimensions of Civil Society Strengthening:

- I. Civic engagement (social and political engagement)/
- II. Level of Organisation/
- III. Practice of Values and
- IV. Perception of Impact.

Moreover, the political, social and economic context of Civil Society development has been briefly described in a contextual analysis. On the basis of the 26 indicators for each of the four dimensions of the CSS framework a score has been given on a scale 0-3. Besides, for each of the indicators a summary description has been provided, based on the information provided by staff and external stakeholders as well as based on document review. Also a summary description has been provided for each dimension. The results of this assessment has been reported in the individual baseline reports. A short summary report has provided an overview for all of the 25 SPOs studied and

The description of indicators for the baseline in 2012 will now serve as the basis for comparison during the endline in 2014. In practice this means that the different categories of respondents¹ will be requested to review the descriptions per indicator and indicate whether and how the present 2014 situation is different from the described situation in 2012. Per indicator they can indicate whether there is an improvement or a deterioration or no change and also describe these changes. Furthermore, per indicator the interviewees can indicate what interventions, actors and other factors explain this change compared to the situation in 2012. See below the specific questions that are asked for each of the indicators in the Evaluation Framework as used during the baseline. Per category of interviewees there is a different list of indicators to be looked at. For example, staff members have the ability to provide insights for all the indicators, whilst external people, for example partners, will not be able to respond to all of the indicators and therefore will only be requested to look at a selected number of indicators.

In the endline of 2014 the focus will be on the dimensions of Civic Engagement (social engagement and political engagement; dimension I)) and the Realised (or perceived) Impact of their social and political engagement (dimension IV). But the scoring of changes we will do for all 26 indicators including dimensions II. Level of Organisation and III. Practice of Values

The information on the indicators will be collected in different ways:

Workshop at the SPO: similar to data collection during baseline, different categories of staff will be brought together in a workshop and requested to respond to the list of questions for each of the indicators. They can do this in their own category of staff members.

Interviews with staff members: additional to the workshop, interviews will be held with staff – either individually or in a small group setting; the interviews serve to provide more in-depth information on the information that is provided during the workshop or to provide additional information if this staff member(s) was not present at the workshop.

Timeline 2012-2014: as a follow-up of the earlier timeline a new one will be made to review major changes relevant for the organisation both inside the organisation as well as external changes impacting on the organisation.

Most Significant Achievements: together with the staff members it is important to identify the most relevant, important or visible achievements of the NGO over the past 3-4 years. The main question

¹ Respondents: the same categories used during the baseline: staff categories including management, program staff, project staff, monitoring and evaluation staff, field staff, administration staff; stakeholder categories including co-financing agency (CFA), consultants, partners, beneficiaries, other funders..

here is : *“What do you consider to be the key changes in terms of how your organisation/ SPO has developed its capacity since the baseline in 2012?”*

Revision of Theory of Change:

Document review: similar to the baseline in 2012, relevant documents will be reviewed so as to get information on each of these questions per indicator. Documents to be reviewed include progress reports, evaluation reports, training reports etc.

Changes in indicators

In 2012 for 25 indicators a score has been established (not for indicator 26. Context) . In 2014 we want to assess the changes of these indicators. The box below presents a list of questions that will be asked for each of the indicators. For each of the NGOs it will be necessary to answer these questions for the indicators.

Box : Scoring of changes in CSS indicators

List of questions to be asked and reported for each of the CSS indicators:

1. *How has the situation of this indicator in 2014 changed compared to the situation during the baseline in 2012? Please tick one of the following scores:*

- 3 = Considerable deterioration
- 2 = Deterioration
- 1 = A slight deterioration
- 0 = no change occurred, the situation is the same as in 2012
- + 1 = slight improvement
- +2 = improvement
- +3 = considerable improvement

2. *Describe what exactly has changed since 2012:*

After a description has been provided for each of the indicators and for each of the capabilities, the **key changes** will need to be identified and this will provide the basis for answering the second evaluation question on attribution. Key changes will be identified by the (Dutch and in-country) evaluation team, after reviewing the information per indicator. The changes could be positive, negative or absent. In addition to reviewing the information that is collected through the above-mentioned methods, there is a need to also ask key respondents what they see as the major changes in terms of capacity development of the SPO. This question will be added to the formats for each of the respondent categories. The responses on this question will be compared with the results for each of the indicators and combined into conclusions of what the key changes are in terms of organisational capacity development of the SPO. This information will be fed back to the SPO and the CFA to come to a final conclusion on what are the key changes/ outcomes in terms of organisational capacity development of the SPO.

One of the issues of addressing changes will be the change of staff involved. The staff participating in the endline exercise may be (significantly) different from the staff involved in the baseline. It will be of importance to cautiously record the participation of ‘new’ and ‘old’ participants in the assessment.

Stage 2. Attributing changes in partner organisation's capacity – EQ Two

This paragraph describes the data collection and analysis methodology for answering the second and third evaluation questions:

- 2. To what degree are the changes identified attributable to the development interventions of the Southern partners of the MFS II consortia (i.e. measuring effectiveness)?**
- 3. What is the relevance of these changes?**

Key changes/ outcomes in terms of CSS have been identified as explained in the previous paragraph. These key changes/ outcomes will serve as the basis for addressing the attribution question, the question of defining causality between the inputs/ outputs and the realized outcomes. Not all changes/ outcomes can be looked at in-depth. For those outcomes where a relation with MFS II is expected, more in-depth research will be done to understand the processes that led to this particular outcome.

For this purpose, the approach of contribution analysis will be used. This approach was presented at the synthesis workshop on 17-18 June 2013 by the 5C/ CSS teams for the eight countries of the MFS II evaluation. This approach has been accepted by the synthesis team, NWO/WOTRO, the country project leaders and the MFS II organisations present at the workshop. It was agreed that this approach can only be used for a selected number of SPOs since it is a very intensive and costly methodology. Below a description is provided on how contribution analysis is to be carried out. Note that this description of contribution analysis provides not only information on the extent to which the changes in organisational development can be attributed to MFS II (evaluation question 2), but also provides information on other contributing factors and actors (evaluation question 4).

Box: Contribution (or attribution) analysis: establishing causality

Concepts of causality

All development interventions endeavour to make a difference and to demonstrate that they are doing so. They undertake activities and produce outputs that are expected to lead through a sequence of events to specific improvements in the well-being of beneficiaries.

However, as is well known, making the causal link between the activities and outputs and subsequent impacts can be challenging:

- The causal path between the activities/outputs and the impacts can be quite extended, involving a long causal sequence of immediate and intermediate results and often a long time-scale;
- Events and conditions outside those of the intervention can influence the extent to which the impacts are brought about;
- There may be a number of causes, including other concurrent interventions, contributing to the realisation of the impacts in addition to the influence of the intervention. The intervention is not working alone.

Can we say the intervention 'caused' the impacts? For example, that a particular intervention on farming methods caused a reduction in rural poverty. Clearly we cannot. There will be a number of 'causes' of any observed impacts and we hope that the intervention is one of these and, perhaps, a significant one. Saying the intervention caused the impacts is much too simplistic and scarcely credible.

Causality involves relationships between events or conditions and is often discussed in terms of necessary and sufficient conditions. Is then, the intervention a necessary cause of the impacts? I would argue that, most of the time, the answer is no. Necessity means that the impacts can only be realised if

there is the specific intervention. Yet most desired impacts, such as better health or education, reduced poverty, improved environmental conditions, greater democracy, etc., can potentially be realised through a variety of different types of interventions, and not only the specific intervention of interest. It would be presumptuous to say that your intervention is the only way possible to bring about the desired impacts.

Might we instead be able to say that the intervention is sufficient? Again, clearly, the answer is no. We are assuming that there are a number of – perhaps many – other factors also at work. So, on its own, the intervention is not sufficient. In the NRM case, it is widely recognised that many other events and conditions will have to be in place in addition to the activities of the intervention for the desired impacts to be achieved.

However, we do expect that the intervention, along with the other influencing factors, is indeed sufficient; that collectively this set of actions and conditions, including the intervention, did bring about the impacts. And indeed, when we say X causes Y in everyday discussions, sufficiency is probably what we usually mean; that X did indeed produce or lead to Y.

The intervention, as a cause, may have differential effects (or contributions) about which we want to be able to make some credible causal claims, such as:

- The intervention caused the impact(s)
- The intervention made a difference
- The intervention contributed to the impact(s).

With these perspectives on causality, the key causal questions related to an intervention are:

1. Is it likely that the intervention has made a difference?
 - Is it likely that the intervention was a contributory cause of the result?
 - What role did the intervention play in the causal package?
2. How and why has the intervention made a difference?
 - How did the causal factors combine to bring about the result?
 - What context was relevant and which mechanisms were at work?
 - Has the intervention resulted in any unintended effects?

Source: CGIAR ILAC brief 26

Key steps in process tracing for the CSS study

On the basis of the previous steps already made during the

1. Review theory of change and MFS II CSS development interventions
2. Identify key changes/ outcomes

These 2 activities are undertaken during the first joint activity with the CSO staff. In Annex 1 the methodology has been more elaborated.

The key follow-up steps developed for the CSS contribution analysis methodology. These steps will be further explained below:

3. Select outcomes for process tracing
4. For each of the selected outcomes, make explicit the underlying result chain
5. Collect data
6. Analyse data
7. Describe findings

Step 3. Select outcomes for process tracing

The next step is to agree on the outcomes that we will focus on with the contribution analysis methodology. For this selection the first criterion for selection of outcomes is that there is a likely link between the key outcome and the MFS II support. This will need to be demonstrated through one or more of the following situations:

- in the *theory of change* of the SPO, a link is indicated between the outcome and the MFS II support (in case of institutional funding this is assumed; in case of project funding the direct link should be there);
- during the interviews done in 2014 the staff of the SPO indicated a link between the actual MFS II support and the changes in civil society strengthening and/ or the policy and lobbying outcomes of the SPO;
- the outcome should be in line with the core elements of Civil Society Strengthening:

Responsiveness:

- 1) Are SPOs responding to the needs and priorities of the target groups that they support?
- 2) Are SPO activities aligned with national (and/ or local) policies?

Social Impact:

Do SPOs (and the organisations they support) provide services that changed the livelihoods and social and personal needs of their target group?

Policy Impact:

Do SPOs successfully influence policies, budgets and actions of government (national and local)?

An additional selection criterion for choosing outcomes to focus on for contribution analysis is that the outcome is relatively important in the overall theory of change of the SPO.

In the evidence we will focus on **two** selected key outcomes per SPO for the contribution analysis. This selection is done by together by the Dutch coordinator and the in-country national consultants. After selection this needs to be verified with the CFA and the SPO. For each of the selected key outcomes data will be generated to verify or reject the manifestation of these outcomes. This can be done by document review and interviewing key respondents such as management of the SPO and the CFA.

Step 4. For each of the selected outcomes, make explicit the underlying causal mechanism

For each of the selected outcomes we will need to make explicit the underlying causal mechanism. This means finding out about the range of different actors, factors and events etc. that have contributed to a particular outcome. This will lead to a causal mechanism defined at a theoretical level. After that, for each part of the causal mechanism empirical manifestations will need to be looked for, so as to verify or discard that particular part of the causal mechanism (or causal relationships).

Step 5. Data collection phase

Once the causal mechanism has been defined, (empirical) evidence will need to be collected to verify (or discard) the different parts of this causal mechanism. Particular attention should be given to the idea of falsification of a causal mechanism. Hence the question should be posed "*was an alternative approach also possible?*". A causal mechanism that can resist falsification is more robust.

In order to verify (or discard) and to analyze what has been the different relevant contributions to the realization of the Most Significant Changes in Civil Society Strengthening data relevant for the analysis of the causal mechanisms to achieve the outcome will need to be collected. This will be based on a document review and interviews with different stakeholders (internal to the organisation and external)

Interviews with external respondents: different types of external respondents, like partner organisations or other CSO organisations will need to be interviewed in order to clarify their view on the

contribution of the CSO to the realization of the Outcome and to collect more in-depth information. These interviews can be done either face-to-face or by telephone/ skype.

Interviewing beneficiaries During the baseline also the final beneficiaries were interviewed though at a limited scale due to distance and time. Hence the information that has been provided by beneficiaries was relatively limited. For the endline, the interviews with beneficiaries will be of great importance. In particular to assess the relative importance of the activities of the CSO for the realization or contribution of a specific outcome relevant for the needs of the targeted population. These interviews are best to be done in a focal group session preferably with separate sessions for men and women; and if applicable with youngsters or adolescents.

Interviewing policy makers It will be necessary to liaise with policy makers (local and national) as well in order to get their view of the role of the CSO to lobby and advocate for specific topics and the success of this in changing policies, budget allocation or action by (local and/ or national) government.

Interviewing the co-financing agency (CFA): this will be done by the Dutch team either with the staff of the HQ in the Netherlands or Regional staff based in East Africa. Information to be provided by the CFA is on how they planned and supported a particular MFS II intervention to contribute to the key Outcomes, how they have contributed financially and with TA or training, and how they assess the contribution of the CSO to the realization of the Key Outcomes.

An overview of already identified sources of information that will help develop the causal mechanism of the contribution are:

Box... Sources of information to develop the causal mechanism for a particular key outcome

- **Timeline** 2000-2012 and timeline 2012-14
- Original **theory of change** by the SPO during baseline on how they expect to see their role in CSS between baseline and endline;
- CFA's baseline perspectives on what MFS II CSS interventions they expected to undertake and what they expected this would lead to at the short-term and the long-term (defining **expected outcomes**) ;
- **Perspectives from different categories** of staff, beneficiaries, allies and other stakeholders on what caused or contributed to the achievement of the particular outcome: interviews, questionnaires.
- **Documentation:** reports, studies,
- Beneficiary **focus group discussions**, in principle sub-divided by age and gender; and if necessary by type of beneficiary (intermediate or ultimate)

Based on the information collected as above, a causal mechanism at theoretical level can be drawn up visually. This will need to be done by the evaluation team, and to be validated during the analysis phase.

Triangulation of findings and additional information is an important step in the data collection phase. Triangulation will need to be done by requesting from stakeholders and other external informants confirmation or disagreement (falsification) of causal relations. As much as possible information will need to be collected from other sources who may confirm or discard the causal mechanism of the realization of the Key Outcome (Contribution).

Different opinions may be collected through visits or by phone interview of :

- Stakeholders: Government agencies, network partners, government agencies (relevant local government, Ministries), faith-based organisations, Board members (if not present on day 1)
- Other external informants : auditing company, private sector, journalists, financial sector, parliamentarians, past employees

Topics:

1. Triangulation of collected information on result areas identified
2. Collect additional information on dialogue, networking, policy influencing, empowerment, holding public and private sector accountable

For an overview of the external stakeholders to be interviewed for each of the relevant indicators, see annex III

Step 6. Analysis

Here we will try to answer the questions identified above on the basis of the collected information:

With these perspectives on causality, the key causal questions related to an intervention are:

1. Is it likely that the intervention has made a difference?
 - Is it likely that the intervention was a contributory cause of the result?
 - What role did the intervention play in the causal package?
2. How and why has the intervention made a difference?
 - How did the causal factors combine to bring about the result?
 - What context was relevant and which mechanisms were at work?
 - Has the intervention resulted in any unintended effects?

Annex 1: Theory of Change and Identify Most Significant Change in detail

Step 1. Review theory of change and MFS II CSS interventions

During the baseline in 2012 a theory of change has been developed with SPO staff during a workshop and on the basis of additional information. This theory of change describes how the organisation sees itself implementing its development-oriented activities including CSS. For most of the theories of change that were developed key outcome areas have been identified which the organisation is focusing on and how they would like to work on improving these areas of CSS. The CFAs have also been consulted on what support to the SPO they are providing and on what they imagined this would lead to at the short-term and at the longer-term. Very often these theories of change only partly overlapped or did not overlap at all. The SPOs were often not completely aware of the support they could expect from MFS II and other funders.

The purpose of Step 1 is to review the original theory of change as developed by the SPO during the baseline workshop. What did they have in mind two years ago in terms of developing their organisational capacity?

In addition to reviewing the theory of change, the CSS interventions will need to be reviewed. What were the originally planned MFS II capacity development interventions and which of these took place in reality?

Step 2. Identify key changes/outcomes

The second step involves identifying the key changes/ outcomes that took place in the SPO in terms of organisational capacity between the moment of endline and the initial baseline. This will be done in two ways:

1. Reviewing changes in scores of indicators (the methodology for this is described in the previous chapter).
2. Reviewing key changes in organisational capacity development as indicated by the different categories of respondents.

Ad 1. The evaluation team will review the description of all the indicators and agree which of these indicators have changed the most, either positively or negatively. Identify the indicators that changed most in a positive sense (+3 or +2) or changed most in a negative direction (-3 or -2).

Ad 2. In addition to that, the responses from the different categories of respondents will need to be reviewed on the question what, according to them, has been the most important change in terms of the organisational capacity of the SPO. These two types of outcomes will need to be compared and if possible brought together. Please note that the answers of respondents to what they consider to be key changes in terms of organisational capacity development of the SPO may not be exactly corresponding with the fixed indicators that were developed for this study. But there may come close to one of these indicators or more generally reflect a particular capability. For example 'improved monitoring and evaluation system' may be a reflection of the capability to adapt and self-renew as a whole.

The questions that will be added to the interview guides/ list of questions to be answered by the different categories of respondents are described below.

Box

Check-list on Key Outcomes (achievements) CSS 2012-2014:

Please think back of how the CSS has changed between now and the baseline in 2012. From the perspective of the CSO what have been the most important changes/ outcomes in terms of CSS ? Together with the staff of CSO it is necessary to review the different indicators as listed in the

analytical framework and think about other area in which the organisation has changed within this period (2011-2104). For each of these changes please describe the change what has happened and why this change took place according to your perspective. Please also describe some general factors, actors and developments that you think have influenced the organisation as a whole between the baseline in 2012 and the endline in 2014.

Key factors actors and events that have influenced the SPO as a whole:

Major Achievement 1: *Strengthening Civil Society*

Civil Society: CBOs, Farmer organisations, member organisations,

- What activities have been identified to strengthen Civil Society
- What was the purpose/ goal to be achieved?
- Which specific community based organisations were targeted?
- How were the specific needs of the beneficiary organisations and their members identified?
- What has been the role of the members to identify activities?
- Has coalitions been set up to work together for this specific goal?
- What has been the role of ICT in the strengthening activities?
- What were the specific steps in the process; what was planned and what were the modifications on the way?
- What specific obstacles were to be overcome to reach the objective/ goal of the activity?

Major Achievement 2: *Policy influencing/ Advocacy / Lobbying*

Checklist : a number of elements that will need to be taken into consideration

- Why starting a policy influencing etc activity?
- What was the purpose/ goal to be achieved?
- What analysis of the specific reason for Policy Influencing etc. has been made?
- Who is being targeted: politicians, beneficiaries, general audience, etc?
- What coalition partners has been build?
 - Was there a clear agreement on the common goal pursued?
 - How was the coalition maintained/ communicating between members?
- What were the specific steps in the process?
 - Were they planned from start
 - What deviations did occur and why
- Role of ICT in the Policy Influencing etc.?
- What communication tools have been used?
- What have been other external factors contributing to success or failure?
- What obstacles were to be overcome (internal / external)?

The evaluation team will review and compare the different changes/ outcomes in terms of organisational development of the SPO and agree on the maximum five to ten key outcomes in terms of organisational development.

Annex 2: Southern Partner Organisations

	Southern Partner organisation	Consortium	5C or CS
	MDG 1 - Eradicating poverty and hunger		
1	Vredeseilanden-Coopibo (VECO) Uganda	Communities of Change	CS
2	Tujjenge	IMPACT	CS
3	Send a Cow Uganda (SACU)	IMPACT	CS
4	Southern & East Africa Trade Information Negotiation Institute (SEATINI)	IMPACT	CS
5	Kabarole Research Centre (KRC)	People Unlimited 4.1	CS
	MDG 2 Education		
6	War Child Holland - Uganda Office	Connect Now	5C
7	Mango Tree	ICCO Alliance (+Connect4Change)	CS
8	African Network for the Prevention and Protection Against Child Abuse and Neglect	Child and Development Alliance	CS
9	Livelihoods Development Initiatives (LDI)	Child and Development Alliance	CS
10	Masaka Diocese Development Organisation	Child and Development Alliance	CS
	MDG 4,5,6 - Health		
11	Save for Health Uganda (SHU)	Communities of Change	5C
12	Diocese of Jinja	Communities of Change	CS
13	Health Child	Connect4change; Communities of Change	5C
14	Uganda Catholic Medical Bureau (UCMB)	Connect4change; Communities of Change	CS
15	HEPS Uganda – Coalition for Health Promotion and Social Development	People Unlimited 4.1	5C
16	Reproductive Health Uganda (RHU)	SRHR Alliance	CS
	Theme - Fragile state/ Post conflict rehabilitation/ Good governance		
17	Uganda Governance Monitoring Platform (UGMP)	People Unlimited 4.1	CS
18	Ruwenzori Consortium for Civil Competence (RWECO)	People Unlimited 4.1	5C
19	TWAVEZA	People Unlimited 4.1	5C
20	Gulu Women Economic Development and Globalization (GWED-G)	Freedom from Fear	CS
21	Justice and Peace Commission (JPC)	Freedom from fear	CS
22	Kitgum NGO Forum	Freedom from Fear	CS
23	Facilitation for Peace and Development (FAPAD)	ICCO Alliance	CS
24	Dodoth Agro Pastoral Development Organization	Freedom from Fear	5C
25	Forum For Kalono Parish Women Association	Dutch Consortium for Rehabilitation	5C

Annex 3: List of possible external stakeholders to be interviewed

<i>External stakeholder</i>	<i>Topic relevant for this interview</i>
Board and/ or General assembly	18: Financial and HRM procedures
	17: Upward and downward accountability
Faith based organisations	20: Alignment with government policies/ and private sector
	22: Empowerment of target groups
Government agencies	2: Participation/ involvement in planning etc.
	3: Representation: dialogue platforms or collaboration
	4: Intensity of involvement of SPO in platforms and collaboration
	9: Mode, nature and quality of dialogue and communication
	22: Empowerment of target groups
	24: Influence on policy changes
	20: Alignment with government policies/ and private sector
	25: Holding government and private sector accountable
International organisations	24: Influence on policy changes
Journalists	9: Mode, nature and quality of dialogue and communication
	24: Influence on policy changes
Network partners	2: Participation/ involvement in planning etc.
	3: Representation: dialogue platforms or collaboration
	4: Intensity of involvement of SPO in platforms and collaboration
	5: Representation in Networks and alliances
	6: Intensity and nature of involvement
	7: Information sharing
	8: Joint activity/ implementation
	9: Mode, nature and quality of dialogue and communication
	24: Influence on policy changes
Parliamentarians	24: Influence on policy changes
(of relevant committees)	25: Holding government and private sector accountable
Private sector	20: Alignment with government policies/ and private sector
(e.g. financial institutions)	22: Empowerment of target groups
	25: Holding government and private sector accountable