



INTER-THEMATIC EVALUATION

FORUT's 2014-2018 – MULTI-YEAR PROGRAMME

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**NEW ECONOMY
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EXECUTIVE SUMMARY

This evaluation focused on how three themes: alcohol, drugs and development (ADD), child rights (CR), and gender equality (GE) that have come together for the wellbeing of children, women and men supported by FORUT and its partners in Asia and Africa. Attention was placed on the interconnectedness and synergies between the three thematic areas and seven programmes of FORUT and its partners.

This review followed a Utilization-Focused Evaluation (UFE) approach. UFE is based on the notion of primary evaluation users who define the “uses” or purposes of the evaluation. The users own the decisions on what to evaluate. In this case, the user group comprised staff at FORUT Norway, as well as staff working with the partners in Nepal, Sri Lanka, India and Malawi. The primary users produced a sub-set of key evaluation questions (KEQs) with the assistance of the evaluation team. The data collection tools were selected to respond to the nature of the evidence needed to address the KEQs. A learning approach was encouraged by the evaluation team with a commitment to provide evidence that would contribute to decisions in a practical manner.

The evaluation began in May 2017 and was completed in October 2017, by a team of five evaluators based in India, Kenya and Canada. Two evaluators joined a partners’ meeting in Bangalore; and others in the team completed field visits to Nepal, India, Sri Lanka and Malawi. This research was complemented by phone or Skype-based interviews with stakeholders in Zambia, Norway and Geneva.

The overall direction of the FORUT evaluation USES was the following:

- 1) Making sense of the Theory of Change;
- 2) Exploring the details of integration;
- 3) Reviewing capacity-building; and
- 4) Informing future directions.

A large number of KEQs were developed to respond to these USES. The FORUT partners adapted, added or substituted additional KEQs. Many of their evaluation USES were consistent with FORUT's, though in several cases they were more specific with attention paid to documenting outcomes, impact and sustainability. The data collection instruments were qualitative: they included focus groups with partner staff; focus groups at the community level with youth, women and men; in-depth interviews, as well as participatory learning tools (especially with children and youth). The participatory tools allowed the stakeholders to witness some of the emerging findings during the sessions themselves and during the debriefing at the end of each data collection effort in Nepal, India, Sri Lanka and Malawi. The partners were able to review each Partner Summary Report (Volume 2 of this report).

THEORY OF CHANGE

The theory of change (ToC) is due for a renewal, with attention to developing variations at the partner or country level. The existing ToC depiction is broad, and the multiple interrelated aspects are displayed in linear fashion. The diagram (see Figure 3 in Section 4) profiles Capacity Building, Advocacy, Empowerment and Service Delivery as four strategies depicted by a series of circles at the top of the diagram. The main stakeholder groups are shown in the middle, and the change areas appear at the bottom. The narrative associated with the ToC places emphasis on the integration of the three thematic areas, with attention to the four strategies. The following summarizes the ‘theory in practice’ emerging from the findings.

The overall process is understood by partners and by FORUT as being **developmental**. It means avoiding an individualized, behavior perspective and working for systemic change, along the lines of the more fundamental sustainable livelihoods or the social determinants of health frameworks. The evaluation team found evidence that the themes are combined through service delivery. They also found evidence that can lead to positive impact, including empowerment. This finding confirms that the circles, as depicted in a row as strategies, are not an accurate reflection of the work on the ground. The evidence confirms that the partners are instrumental in the very process of integration, something that is not shown visually in the ToC.

The evidence in this report shows that **integration** has multiple meanings and variations. The way partners combine the “themes” and “strategies” is organic. The evidence shows how – through **service delivery** – partners are able to assemble a suite of services that combine themes and strategies at different levels in an opportunistic manner. They know how to respond to windows of opportunity because they understand the context, its internal workings, and the individuals in the system who can be called upon to take action. The essence of the approach (being delivered by FORUT’s partners) is the **localized decision making** behind the selection of elements, something that comes from experience and being embedded in the context.

Advocacy and grassroots work go hand in hand to have impact. Field experience provides credibility and evidence, while changes in policy hold the potential of shifting overall institutional programs and services in the longer run to effect systemic and sustained change. These connections are strategic and are not evident in the Theory of Change visual. **FORUT and its partners form a symbiosis**: each one needs the other for the organism to thrive. FORUT is a channel for financial resources from NORAD, it provides ADD and results-based management (RBM) expertise and technical support, it enhances the partners’ legitimacy and credibility, and the staff work as catalyzers. FORUT has stature in global ADD circles and it draws on its partners’ experience as part of its lobbying.

FORUT is also the connector – or broker – at international gatherings and when linking with other bilateral and multilateral agencies. In turn, the partners are also brokers, they are a bridge between FORUT and the local organizations and individuals whom they seek to assist. Brokers face the challenge of translating information at various levels: what may seem

important at the grassroots level for a community based organizations (CBO), may not appear as significant to a hard-nosed policy maker.

The RBM reporting has been biased towards activities and outputs, and yet the evidence collected shows additional benefits in the form of outcomes, many of which are significant, yet they do not seem to find a home in the analysis. When youth in Nepal and Sri Lanka were given the opportunity to provide their views, using participatory tools, they demonstrated important and positive changes – as they have perceived them. The evaluation team observed that that **RBM has curtailed the partners' appreciation of outcomes** and their ability to showcase their stories.

THEMATIC INTEGRATION

FORUT's approach is that for ADD to be effective, it is necessary to integrate it with development issues such as gender, child rights, HIV and other livelihood issues. FORUT supports partners who themselves are focused on either child rights or gender, and uses this window to introduce ADD if it is deemed appropriate. FORUT, in turn, integrates the learning from the local level to inform their work at the Global policy level. Where possible, FORUT partners are brought to Global Conferences to enable two-way learning. Finally, FORUT strives to bring together (integrate) partners within a single country, and at annual conferences, thus integrating knowledge and learning across partners and between partners and the global arena.

It has been difficult for FORUT to easily explain their concept of the 'integrated' approach or inter-thematic approach. This confusion appears to have created expectations that may not have been possible to meet. When FORUT prepares its proposals for funding, it focuses on the inter-thematic nature of its work and the requirement for funding to cover ADD, Gender and Child Rights. This diversity of focus suggests that FORUT itself has expertise in gender and child rights, as well as their established knowledge in ADD. But FORUT doesn't have any gender or child rights specialists on their team – this input they leave to their partners who specialize in these areas.

There is a logic in FORUT seeking partners with strong capabilities in both gender and child rights, since there is a proven connection between these issues and the wholesale effects of alcohol consumption. Despite the challenges, findings amongst all partners strongly support the integrated approach to alcohol, child rights and gender equity. CWC in India sums it up by stating that issues such as child rights violation, gender discrimination or alcohol abuse are part of the **strategic bottom up, organic, comprehensive and integrated approach**, and that any bifurcation of these issues would be artificial. The findings have shown that at a developmental level, the FORUT approach to integration has been successful and has enabled FORUT to support its partners strategically by only introducing ADD when it is appropriate.

ADVOCACY

FORUT's presence in the global arena began almost 20 years ago, and is most notable for its support to global policy development through the World Health Organization (WHO) and the

Global Advocacy Policy Alliance (GAPA). Advocacy is something that underlies the entire ethos of the organization and is, to paraphrase the words of a FORUT interviewee, “...in our DNA so we don't even think about it or name it since it is so related to everything we do.” Yet, while FORUT staff members do an impressive amount of advocacy, there is no written advocacy strategy that captures the history of successful methodologies and initiatives, and can be adapted as times change. In the evaluation team's experience, organizations tend to have a de facto communication way of doing things, and oftentimes it is not expressed explicitly in a Communication Strategy.

FORUT's presence at the local and national level, and its involvement in support of policy development in almost all its partner countries, has given the organization traction at the global level. FORUT's great strength lies in its vast repertoire of facts and figures and experiences about the alcohol debate, and it has gained considerable traction through its contribution to research on this issue.

At the national and regional levels, the partners play a central role in advocacy. They have gained legitimacy from their years of grassroots engagement, which they lean on for their advocacy work. They are present in multiple policy-making circles and have, in many instances, gained the trust of government. The partners are able to work across silos, something that ministries are traditionally incapable of doing in a coordinated manner. Major achievements have been confirmed, including the recent approval of alcohol policies in both Malawi and Nepal. As noteworthy as that is, all parties agree that a new policy is only a milestone, as effective implementation is essential for impact on the ground.

With regards to **sustaining change**, the evidence confirms that the issues at hand are complex, ingrained in cultural and institutional practices, and difficult, if not impossible, to solve in the short-term. The evidence above provides examples of service provision, capacity development, and advocacy actions that seek to create organizations to sustain the effort, both at grassroots and national levels. While the evidence underscores the justification for a longer term, sustainable process, the partners are faced with uncertainty of funding and a high level of dependency. This situation means that the overall partnership is vulnerable, and its current achievements can be reversed without continued engagement. The achievements to date reflect years of work. While handing over responsibility is not the same as walking away, a sustainability plan may need to confirm who, and under what conditions, is someone or some organization able to take on some of the tasks performed by the partners and by FORUT.

CAPACITY DEVELOPMENT

FORUT's 2016 Policy Document situates capacity development as one of its four strategies, with the others being advocacy, empowerment and service delivery. In describing its capacity-building strategy, FORUT acts as a catalyst and facilitator of a mutual learning process in which its partners – national organizations – share their national, regional and local knowledge, both content related especially in the CR and GE fields, as well as strategic.

As one of FORUT's four strategies, capacity building is the centre piece of its relationship with its Non-Governmental Organization (NGO) partners in six countries through which it shares its world-class research and core ADD expertise. Uniquely, it is not seen as a one-way street, but is explained as a multi-directional process, whereby partners share their knowledge with FORUT and amongst each other. The areas of expertise of the partners vary considerably and thus their training needs differ. FORUT sees itself as the hub of a diverse network linked by a shared view of development as being holistic and grassroots driven.

FORUT's capacity building has focused on specific areas of ADD, advocacy and, for the last few years, the use of RBM for reporting. Although the RBM approach to reporting is seen by FORUT and its partners as inflexible and inadequate to tell the full story associated with their work, the capacity to use it is being built and is a work in progress. Recently FORUT has begun to explore the use of outcome mapping and UFE as complementary reporting approaches to RBM, in order to tell the full story of its work.

For the partners there are new challenges. The passage of new ADD related legislation such as in Malawi has accentuated the importance of having the capacity to support governments and their officials as they address implementation. This challenge extends to the need to expand the technical knowledge about ADD by government officials, many of whom are charged with the responsibilities of adopting new policies, and creating appropriate regulations and enforcement. Partners will also need some form of capacity to deal with the relentless pressure from the commercial lobby groups.

CONCLUSIONS

The central conclusion of this evaluation is that this collective work is a gem in the rough whose value has not been captured or shared adequately; yet there are concrete opportunities to build on the achievements. It is clear from the evaluation findings that the work FORUT and its partners is doing is highly valuable, so the focus here is on strengthening and sustaining the work for the longer term.

- 1. Theory of Change (ToC):** There is enormous potential for variations of FORUT's **theory of change** that better reflect the actual work underway with its partners and the strategies being utilized as well as its place on a continuum of change. This evaluation has pointed at the features that are central, and merit to be included in future versions. There is room to capture the underlying assumptions and the context-dependent factors that enhance or limit the work of FORUT and the partners. As part of the reworking of future ToCs, there are opportunities to clarify the **concept of integration** and its ramifications within FORUT and with its partners. Moreover, a ToC should be seen as a living document, a reflection of how change happens – as conditions shift – that adds a significant communication value.

- 2. Communication Strategy:** FORUT exhibits a *de facto communication strategy* that does not exist on paper. There is value in explaining the mechanism (communication purposes, audiences, methods and media preferences, opportunistic response to windows of opportunity, etc.). FORUT's communication 'way of being' is evident in its respectful approach to partners, in its advocacy efforts at various levels; not to mention the parallel work by partners in their context. Making clear what works and the role of its partners can be part and parcel of telling this complex story.
- 3. Country Platforms:** FORUT has facilitated interactions among partners in countries and regions. There is scope for explicit development of **country specific program platforms** to support the coordination, planning and cooperation amongst its country partners, as well as for sharing of resources and skills to open up the opportunity for new partnerships so as to interest new funders.
- 4. Capacity Building:** FORUT is being approached for additional **capacity building** to help its partners build greater technical capacity in its three theme areas, their integration, as well as on ways to assess and report on their outcomes. With limited resources available to FORUT, there are opportunities to facilitate greater inter-project sharing of expertise on a planned basis, and also by approaching new partners willing to share their knowledge.
- 5. Evaluation:** FORUT is already exposing its partners to **additional approaches to evaluation** alongside its RBM. The exploration into Outcome Mapping is timely, especially since this evaluation has documented 'gradients of outcomes' that are compatible with the approach. There is an opportunity to combine capacity development in evaluation with communication and future theory of change variations.
- 6. Sustainability:** FORUT and its partners are dependent on NORAD for its ADD work and there is scope to broaden the variety of partners and new sources of funds. With demand for FORUT's help increasing, its limited supply of human and monetary resources is a significant problem. It already operates with a skeleton staff in Norway, thus the work of FORUT and its partners is extremely vulnerable. Telling the story better is a sustainability issue for vulnerable people whom FORUT and the partners seek to assist: the investment of the last 20 years has yielded significant outcomes, but discontinued support means the loss of a momentum that can change lives.

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ACRONYMS

AATWIN	Alliance Against Trafficking of Children and Women in Nepal
ADD	Alcohol, Drugs and Development
AIDS	Acquired immunodeficiency syndrome
APSA	Association for Promoting Social Action, FORUT partner, Bangalore
CR	Child Rights
CBO	Community based organizations
CSO	Civil society organizations
CWC	The Concerned for Working Children, FORUT partner, Bangalore
CWIN	Child Workers in Nepal Concerned Centre
CWWU	Construction Workers Welfare Union, Bangalore
DFM	Drug Fight Malawi
FISD	Foundation for Innovative Social Development, Sri Lanka
GAPA	Global Alcohol Policy Alliance
GBV	Gender based violence
GE	Gender equality/Gender Empowerment
GEE	Gender economic equality
HIV	Human immunodeficiency virus
HLAD	Healthy Lanka, Sri Lanka
IOGT	International Organization of Good Templars
KEQ	Key Evaluation Question
MAGGA	Malawi Girl Guides Association
NATA	National Authority on Tobacco and Alcohol, Sri Lanka
NAPA	National Alcohol Policy Alliance, Nepal
NAP	National Alcohol Policy, Malawi
NIMHANS	National Institute for Mental Health and Neuro Sciences, India
NCA	Norwegian Church Aid
NGO	Non-Governmental Organization
RBM	Results-based management
RDTA	Rural Development TUKI Association, often referred to as TUKI
SDG	Sustainable development goals
SHARPZ	Serenity Harm Reduction, FORUT partner, Zambia
SLAPA	Sri Lanka Alcohol Policy Alliance
SWOT	Strengths, weaknesses, opportunities and threats
ToC	Theory of change
UFE	Utilization-focused evaluation
WHO	World Health Organization
WOCELIP	Women and Children Empowerment and Livelihood Improvement Project, Nepal

1 INTRODUCTION

1.1 ABOUT THIS EVALUATION

The focus of FORUT's Request for Proposals and Terms of Reference for this evaluation is "inter-thematic". The three themes in question are alcohol, drugs and development (ADD), child rights (CR) and gender equality (GE). These themes are translated by FORUT into 7 different long-term development goals that are grouped into programmes (see Table 1). *"The evaluation will focus on the interconnectedness and synergies between the three thematic areas and seven programmes of FORUT and its partners."* (TORs for Inter-thematic evaluation: p.2).

Table 1. FORUT's programmes and long-term goals

<p>ADD 1: Global Policy Programme <i>ADD Goal 1: Alcohol is a recognised problem in global health and development policies.</i></p>
<p>ADD 2: National Policy Programme <i>ADD Goal 2: Reduced harm from alcohol and other substances in Malawi, Zambia, Sierra Leone, Sri Lanka, Nepal and selected states in India</i></p>
<p>ADD 3: Community Interventions Programme <i>ADD Goal 3: Reduced harm from alcohol and other substances in local communities in Malawi, Sri Lanka, Nepal and India.</i></p>
<p>CR 4: Education and Protection Programme <i>CR Goal 4: Children's rights to education are ensured and children at risk of exploitation are protected against harm.</i></p>
<p>CR 5: Advocacy and Empowerment Programme <i>CR Goal 5: Children's rights are respected by government institutions who are accountable to civil society, and to children in particular.</i></p>
<p>GE 6: Gender Based Violence & Women's Health Programme <i>GE Goal 6: Women and adolescent girls have good physical and mental health and their social and political rights are respected.</i></p>
<p>GE 7: Economic Empowerment Programme <i>GE Goal 7: Women from poor families benefit from economic resources and influence decisions affecting them.</i></p>

The NORAD-funded programming shows a different illustration by countries & partners:

- Sri Lanka: FIRD, HLAD, FRIENDS & RAHAMA (ADD2, ADD3, CR4, CR5, GE6, GE7)
- India: APSA & CWC (ADD3, CR4, CR5, GE7)
- Nepal: CWIN & RDTA (ADD2, ADD3, CR4, CR5, GE6, GE7)
- Sierra Leone: FORUT (ADD2, CR4, GE6, GE7)
- Malawi: DFM, MAGGA, NCA, CCAP (ADD2, ADD3)
- Zambia: SHARPZ, SAAPA (ADD2)
- Norway: FORUT (ADD1)

The approach underpinning this assignment is Utilization-Focused Evaluation (UFE). UFE is based on the notion of primary evaluation users – those who can apply the findings – that define the “uses” or purposes of the evaluation. Those “users” own the decisions on what to evaluate. In this case, the user group comprised staff at FORUT Norway, as well as staff working with the partners in Nepal, Sri Lanka, India and Malawi. This meant that the original thrust of the “inter-thematic” evaluation, as set forth in the Terms of Reference, allowed for a wider group of users among the partners to add their uses or purposes. In addition, in UFE, for each use, the primary users produce a sub-set of key evaluation questions (KEQs). The data collection tools are selected to respond to the nature of the evidence needed to address the KEQs.

This means that this evaluation was collaborative, in the sense that FORUT and its partners were in control of the design. It also meant that there was openness to review a number of complementary uses or purposes, and that a learning approach –as opposed to a top-down, accountability one – was encouraged by the evaluation team. The intent was to provide evidence that would contribute to decisions in a practical manner. After all, in UFE, success is measured in terms of the level of actual use of the findings and recommendations, and also of the process whereby an evaluative capacity building is built into the UFE process and a way of thinking becomes internalized (more details are included in the Section on Methodology).

1.2 THE EVALUATORS

The New Economy Development Group (New Economy), founded in 1990 with headquarters in Ottawa, is a values-based national and international consulting firm that specializes in community-based and participatory approaches to community issues and development from a policy, research and practical perspective. For this evaluation, New Economy’s assembled a team with proven skills in a broad range of areas such as capacity development, project and program analysis and evaluation, research methodology, data collection techniques and data and analysis, as well as community driven and cooperative development, communication for development and social change, micro-enterprise and micro-finance. All team members have grassroots experience and a firm rooting in community development and empowerment with an emphasis on adult education, participatory action research (PAR) and participatory development. Some have taken this participatory development background into their work with development communication and advocacy. The team members were based in Ontario, Canada, Mumbai, Bangalore, and Nairobi. The Asian and African team members completed the partner visits in Nepal, Sri Lanka, India and Malawi. Two of the Canadian team members joined a gathering of all FORUT partners in Bangalore in June 2017.

1.3 TIMING

The Request for Proposals (RFP) for this evaluation was published in April of 2017. The winning bid was announced in May and two members of the evaluation team joined a FORUT partners meeting in Bangalore, India in early June. Thereafter the evaluation design process continued throughout July and was completed in mid-August, with a set of uses and KEQs prepared by FORUT as well as by the partners in Nepal, India, Sri Lanka and Malawi who became users. The

Zambian partners did not become evaluation users, but some evidence from Zambia was collected. Field trips to Nepal, Sri Lanka, India and Malawi took place in August and September, along with numerous interviews of FORUT staff and global stakeholders connected to the program. A full draft report was shared with the evaluation user group in early October and was finalized later the same month.

1.4 STRUCTURE OF THE REPORT

Section 2 of the report provides a summary of the evaluation framework, the methodology, its scope and limitations. It includes a summary of the evaluation USES, and the key evaluation questions (KEQs).

Section 3 of the report provides a brief summary of FORUT, its history, approach and style of working.

Section 4 provides a summary of the Findings and Analysis that are organized on the basis of three of the broad USES and some KEQs developed by FORUT and its partners.

Section 5 provides the Conclusions.

A second volume provides the ten Partner Summary Reports prepared by the evaluation team.

2 EVALUATION FRAMEWORK

The evaluation team applied utilization-focused evaluation (UFE) as a decision-making framework. In the early steps of UFE the evaluation team facilitated a process of design that covered the following.

- Initially, a number of primary evaluation **users** were identified from within FORUT and among senior staff working with its partners in Nepal, Sri Lanka, Malawi, and India (Sierra Leone was handled separately, and with emphasis on advocacy).
- The **users**, in turn, were charged with defining a number of **evaluation purposes or uses**.
- Thereafter, with the assistance of the evaluators, the users produced several **Key Evaluation Questions (KEQs)** and subsequently a number of **data collection questions** and associated **data collection tools**.
- This process followed a hierarchy whereby the USES defined WHY the evaluation is carried out, the KEQs determined WHAT is to be explored, and the data collection tools defined HOW the inquiry would be completed.
- The methodology was assembled based on this sequence of decisions, as data collection tools or methods were selected on the basis of the evidence needed to respond to each KEQ.

The design process began during the Bangalore meeting in June. The exercise allowed FORUT and its partners to begin to appreciate UFE as a decision-making framework, as well as the opportunity to begin formulating evaluation uses and KEQs. The process was followed by coaching of each of FORUT's partners by an assigned evaluation team member via Skype and, in the case of India, in-person contact. In all cases, this process required multiple iterations before an evaluation design came together.

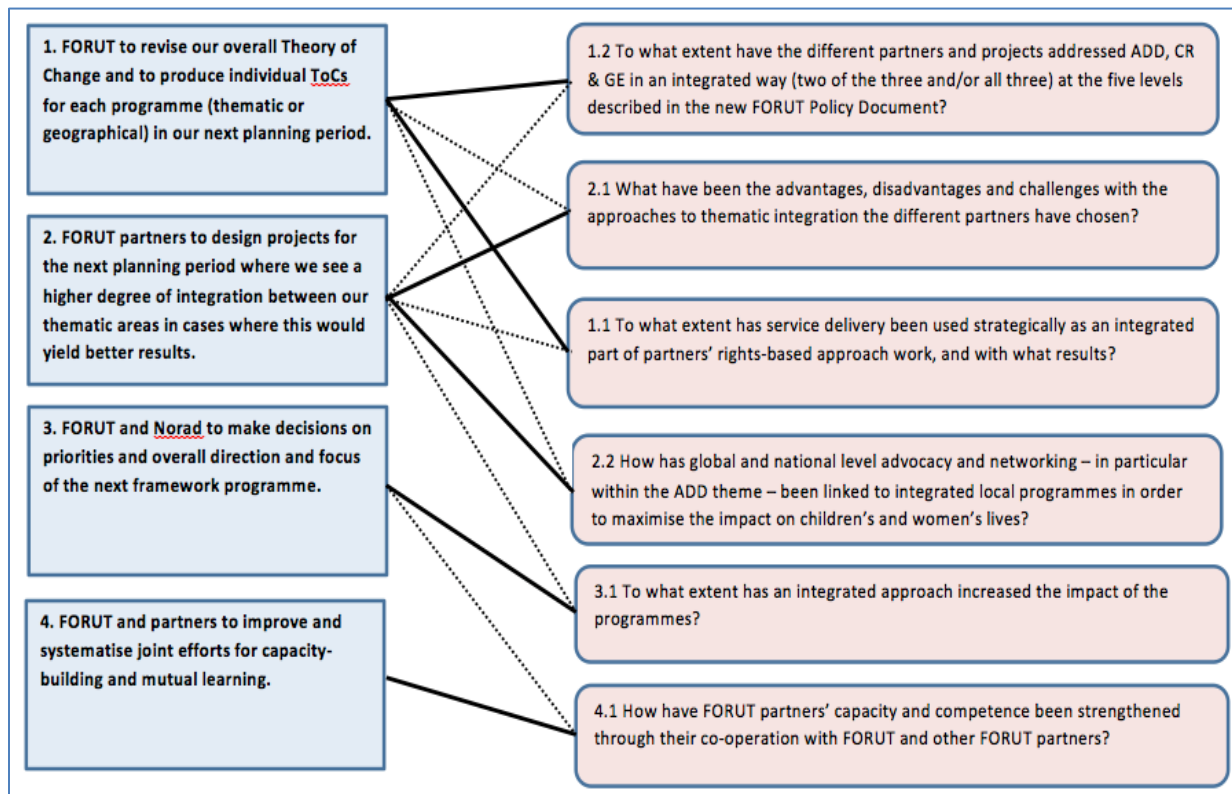
The overall direction of the FORUT USES was the following: 1) Making sense of the Theory of Change; 2) Exploring the details of integration; 3) Reviewing capacity-building; and 4) Informing future directions. The FORUT partners adapted, added or substituted additional KEQs to reflect their interests (see Annex 1 for details). In some cases, these USES varied from those FORUT included in the Terms of Reference noted below:

1. The extent to which ADD, CR and GE are integrated in the programming of FORUT's partners, and how such integration impacts positively and negatively on achievement of results.
2. The extent to which service delivery in each of these thematic areas is being used strategically to increase the effects of advocacy, capacity-building and empowerment.
3. The extent to which work on the global, national and sub-national level support and reinforce each other.
4. The extent to which the programmes contribute to the individual, relationship, institutional and cultural dimensions of sustainable change.

Many of the partners' USES were consistent with these four FORUT directions, though in several cases they were more specific, for instance, to document outcomes and impact. It was

also evident that many of FORUT’s KEQs were applicable to several of the USES, which is an indication of the systemic and complex nature of the work (Figure 1).

Figure 1. FORUT evaluation USES and KEQs, illustrating multiple connections



The data collection instruments utilized were qualitative; they included focus groups and semi-structured interviews, as well as participatory appraisal tools (especially with children and youth). The participatory tools allowed the stakeholders to witness some of the emerging findings during the sessions themselves, and during the debriefing at the end of each data collection effort. This process meant that the users in the partner organizations had exposure to the evidence in the context of the uses that they had identified. It also encouraged considerable process reflection, and focus on outcomes rather than outputs, and how this contrasted with the data requirements for the results-based management (RBM) framework.

The evaluators followed each organization’s consent protocols to ensure the safety and anonymity of the children and youth involved in data collection. Where these were not available, evaluators provided a standard protocol for obtaining consent. The evaluators also used their experience, cultural familiarity and language skills to ensure questions were worded in accessible terminology, especially when working with beneficiaries at the grass roots level. The text box below, from one of the Nepal Summary Reports provides a glimpse into the process.

“Days were very long either because of the distance of the nearest field sites (not so near) and because it takes time to do participatory activities with partners. Children also cannot be rushed. Child consent and participation is critical and needs appropriate facilitation. I changed the tools and order of the discussion in order to make the girls at ease. At all times, [organizational] staff was present. I also planned the sampling of the girls and adapted the itinerary after arrival as so many changes in schedules had taken place. At least six hours of Skype discussion and many emails were needed for preparation.”

2.1 METHODOLOGY

The methods used in this evaluation were qualitative:

- A total of 34 in-depth interviews were conducted with FORUT staff, partners' staff, officials of government in five countries, international organizations, and other country-based organizations.
- A total of 21 focus groups were conducted, which included 165 individuals, most of them staff of the partner organizations.
- A further 24 focus groups were conducted with 238 clients or stakeholders on the ground.
- Fifteen participatory sessions were conducted with 138 clients, mainly youth.
- Twelve participant observations of events were completed.



CWC - Bhima Sangha Activists Immersed in FGD

Appendix 2 provides a detailed breakdown.

2.2 DATA COLLECTION AND ANALYSIS

The bulk of the data collected was qualitative. The evaluation team members followed the following process:

- *Preparation*: production of data collection guides, agendas, consent forms (for photos as well)
- The evaluators added FORUT's uses and KEQs to the data collection.
- *Data summaries*:
 - Tables with responses to KEQs and sub-questions;
 - Strengths, weaknesses, opportunities and threat (SWOT) tables;
 - Summary of statements about change in the form of 'before and after tables' (based on drawings of a person to show: heart, mind and hands);
 - Participatory ranking;
 - Names of participants at Focus Groups.
- *A Partner Summary Report (using a standard format) was prepared for each partner: a draft was shared with each partner for verification (see Volume 2).*

Each Summary Report provides a summary of the findings, and focuses on responding to the Key Evaluation Questions. To approximate a systematic comparison across summary reports, the full evaluator team met via Skype (11 Sep. 2017) to produce a high-level summary of Findings, mainly at the level of USES and select KEQs. This led to the development of the Findings & Analysis sections of the report, with a further harvesting of evidence from the Summary Reports, documentation, and interview notes.

A subsequent group Skype on October 2nd, 2017 engaged the full evaluation team in a review of the Analysis and a brainstorming on Conclusions. A first Draft Report was submitted to all users in early October.

2.3 SCOPE & LIMITATIONS

The resources available to this utilization-focused evaluation were insufficient for a comprehensive investigation. The primary evaluation users were made aware of this limitation from the beginning of the process. The following scope and limitations are worth noting:

The UFE followed the most important steps of UFE (based on the 12 steps in Patton's 2008 book) as follows:

Step	Scope
1. Assessing program readiness	Skype exchanges with FORUT; Bangalore event
2. Assessing evaluators' readiness	The evaluation team was familiar with UFE
3. Identifying primary intended users	Many iterations with FORUT and partners following Bangalore event
4. Situational analysis	Superficial due to short data collection times
5. Identification of primary intended uses	Many iterations with FORUT and partners
6. Focusing the evaluation	Many iterations with FORUT and partners to confirm KEQs
7. Evaluation design (*)	Limited iterations to list data collection instruments relative to KEQs
8. Simulation of use	Not applied
9. Data collection (**)	Limited to sampling, far from comprehensive
10. Data analysis (***)	Integration of findings from standardized field data summaries
11. Facilitation of use	Limited to the review of final evaluation Report
12. Meta evaluation	Not applied

(*) The evaluation design called for the integration of USES and KEQs from FORUT and from its country partners. While the partners were aware of FORUT's emphasis on inter-thematic uses (as expressed in the Bangalore meeting), they were free to propose their own as well. In the case of Nepal and Sri Lanka, the regional evaluator encouraged the users from the partner organizations to develop their own uses and KEQs without introducing FORUT's. Once they had developed their own, the FORUT ones were

brought to bear and it did not change their design. The evaluators integrated the FORUT KEQs and data collection questions into the final Data Collection Plan. In the cases of Malawi and India, the partners were reminded of FORUT's uses and KEQs early on, and they were accommodated and combined with their own. In both cases, they were then also integrated into the Data Collection Plans.

The number of Key Evaluation Questions, and data collection questions, was significant and in all cases, it was necessary to reduce them in number. The large number of KEQs posed was indicative of a significant interest by the primary users in exploring their work in depth, and to expose the achievements in a manner that was not possible with the activity and output-focus of the results-based management tool.

(**) Data collection was limited in terms of scope: This called for the selection of sample sites and of sample stakeholders for each partner. The choice of sites and stakeholders was discussed with each partner, yet the final selection was in their hands. The evaluators requested exposure to a variety of contexts, yet the extent to which they are representative of the overall partner's work is unknown. Limited time meant travel to visit project sites distant from main centres was not usually possible (for instance it was not possible to go to Dolakha, a RDTA field site in Nepal). Significant documentation was made available to each evaluator, yet time constraints allowed only for an overview of some of the materials.

(***) The data analysis did not include a uniform coding process of all data. This would have been desirable, but the time constraint made it impractical. The three lead writers did basic coding of the summary reports, and they cross-checked each other's work, which allowed for a process of verification. This was repeated with the three regional evaluators with the same purpose. The Partner Summary Reports constitute a systematic summary of findings as each evaluation team member was engaged in the data collection process directly, thus allowing them to integrate their appreciation of the context and the dynamics of each data collection event. These Summary reports (reviewed by each relevant partner) are included in Volume 2 for further reference.

3 FORUT BACKGROUND

The Norwegian NGO FORUT was established in 1981. FORUT is an abbreviation for the Norwegian words FOR UTVIKLING that translates to FOR DEVELOPMENT. The organisation is owned by the Norwegian peace and sobriety organisations IOGT, JUVENTE and JUBA.

The International Order of Good Templars (IOGT) was founded in 1851. Although it is known primarily for its fight to promote a life without alcohol, IOGT is an international advocacy organization focused on campaigning for peace, human rights, harmony, racial justice, empowerment and a life free from the harms of alcohol. Its work was recognized when IOGT International was nominated for the Nobel Peace Prize in 1951. While IOGT has independent chapters all over the world, the Norwegian chapter that was formed in 1877 is home to several other NGOs that share the overall IOGT mission and focus particularly on children and youth. JUBA is a child rights organization that works to prevent and reduce harm by alcohol and drugs, as well as to empower kids to democratically engage in society. Its sister organization, Juvente has a similar mandate, but it is focused on youth (13–26 years). FORUT, as its name implies, was specifically formed to manage the international development arm of the IOGT movement in Norway. FORUT's overall vision is *"...a peaceful, democratic and just world where everyone is secured human rights and a dignified life, and where alcohol and drugs do not jeopardise people's safety and human potential."*¹

Mandate

FORUT is focused on development and advocacy both at home and in six developing countries. Originally formed to take over the Juvente (formerly NGU) work in Sri Lanka, FORUT has expanded its work into five additional countries: Nepal, India, Sierra Leone, Malawi and Zambia – where it partners with local and national NGOs. FORUT supports its partner organizations in those countries to mobilise, organise and empower people, especially women and children, believing that people have the power to change their lives and their communities. It takes a rights-based approach, working with local and national NGOs through equitable and meaningful partnerships.

Policy

FORUT's five core values² emphasize solidarity and friendship; equality and respect; unity and confidence; honesty and loyalty; as well as transparency and humility. These characteristics reinforce the importance of human relationships to FORUT. There is a holistic, developmental point of view. Thus, FORUT works closely with NGO partners based in Africa and Asia to approach the issues of alcohol and drugs, which they consider as causative factors contributing to poverty and underdevelopment. It promotes its ADD mandate by supporting developing country NGOs which work primarily in the areas of children's and women's rights. It introduces ADD to these NGOs appropriately, and integrates its interests into the work of its partners

¹ FORUT Policy Document

² FORUT Development Strategy 2018-2024, First Draft – 30 August 2017

when and where relevant. Its inputs come in the form of research, and capacity-building in ADD, and reporting (RBM), in addition to its role as a conduit of NORAD funds.

FORUT is also known for its world-class research and advocacy at the global, regional and national levels. Based upon its research, it understands that the fight against misuse of alcohol and drugs faces opposition from strong international commercial interests, which are actively expanding the global alcohol market into Asia and Africa. FORUT's advocacy work takes place at home in Norway, at the United Nations and Regional Forums, as well as in developing countries where FORUT supports partners in their national policy work, both at the ground and national levels.

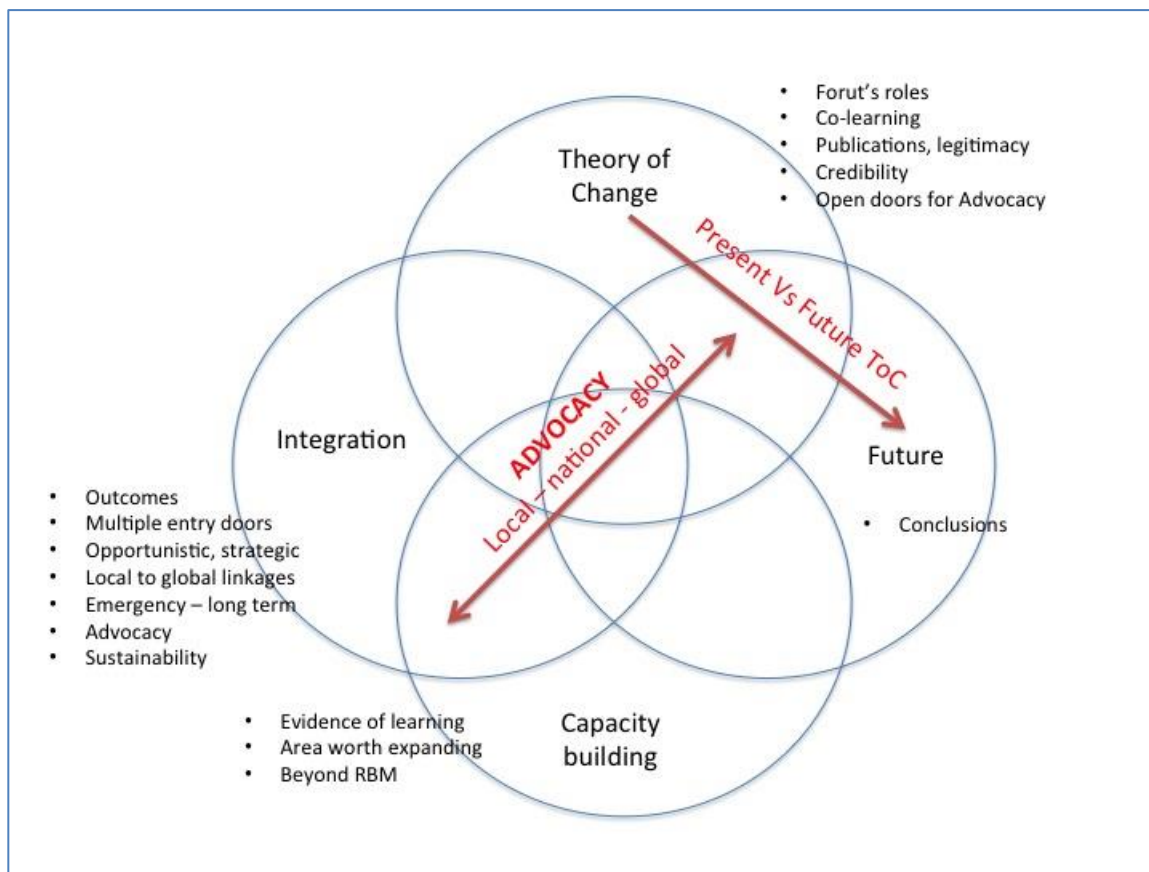
Organization

FORUT is a relatively small organization with its headquartered in the town of Gjøvik, Norway, with a small regional office in Oslo. The international program, staffed by six people, is funded largely through a multi-year framework agreement with NORAD, the Norwegian Agency for Development Cooperation. Its current program covers the period 2014-2018.

4 FINDINGS and ANALYSIS

Both this Findings Section and the Analysis Section (next) are organized on the basis of three of the four evaluation uses (theory of change, integration, and capacity building), while the fourth use (priorities and overall future direction) is addressed in the closing sections. The topics are very inter-related, as illustrated by Figure 2.

Figure 2. Visual summary of the inter-related nature of the findings



4.1 THEORY OF CHANGE

This sub-section responds to the following USES and KEQs:

1. FORUT to revise our **Theory of Change** (ToC) and to produce individual ToCs for each programme (thematic or geographical) in our next planning period.
 - 1.1 To what extent has **service delivery** been used strategically as an integrated part of partners' work?
 - 1.2 To what extent have the different partners and projects addressed ADD, CR & GE in an **integrated way** (two of the three and/or all three)?

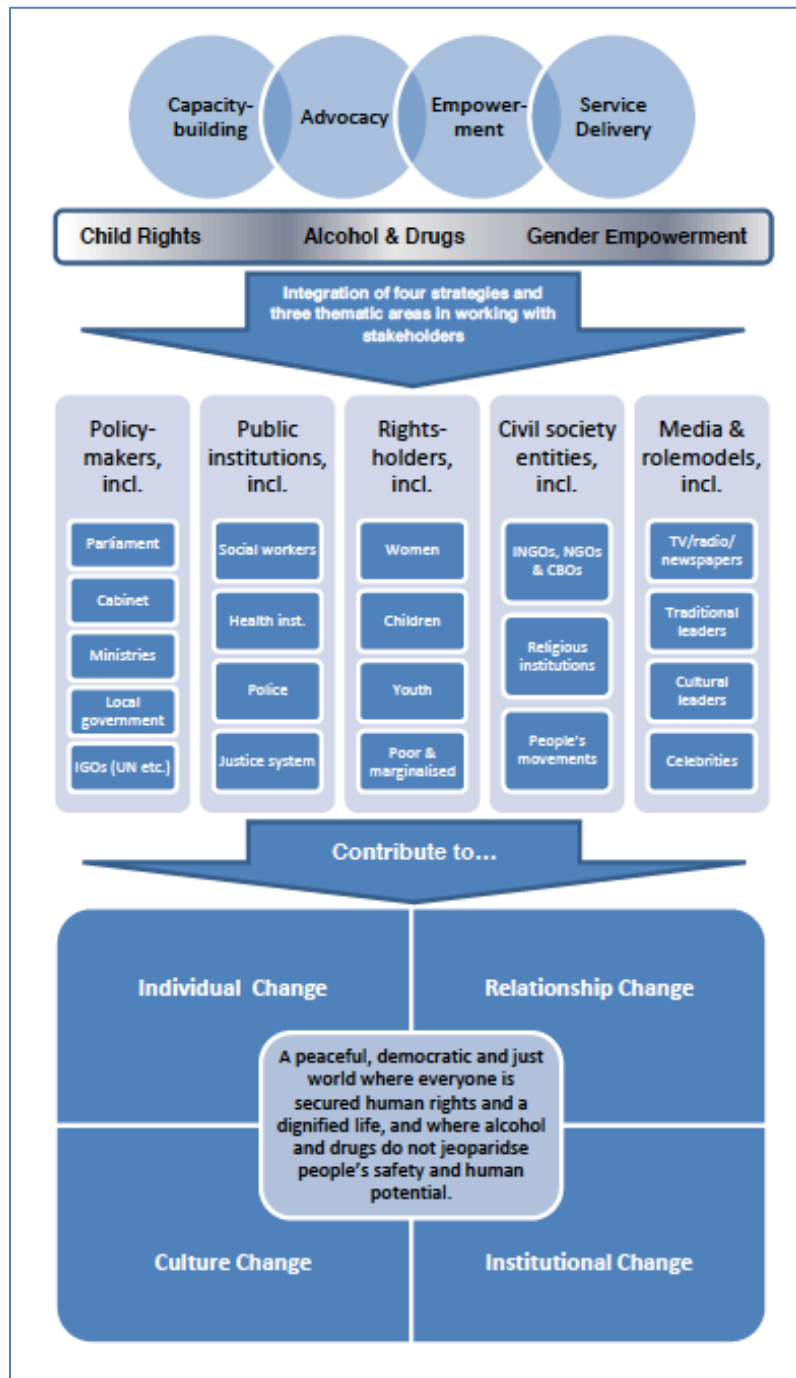
The original TORs sought to clarify several directions, to which the evaluator added a set of remarks and implied assumptions (Table 2).

Table 2. Evaluation directions in the TORs and remarks

Statement in TORs	Remarks / Assumptions
1. The extent to which ADD, CR and GE are integrated in the programming of FORUT's partners, and how such integration impacts positively and negatively on achievement of results.	The focus of "integration" is around these three "themes". The integration takes place in the context of partners' programming. Integration is associated with effectiveness for achieving results.
2. The extent to which service delivery in each of these thematic areas is being used strategically to increase the effects of advocacy, capacity-building and empowerment.	Service delivery, advocacy, capacity-building and empowerment are "strategies" that can work synergistically. These "strategies" emphasize the operational aspects.
3. The extent to which work on the global, national and sub-national level support and reinforce each other	There are three 'dimensions' of work and they are interrelated; 'work' refers to the "strategy" combinations.
4. The extent to which the programmes contribute to the individual, relationship, institutional and cultural dimensions of sustainable change.	These are four inter-connected outcome areas.

The above table suggests that **integration** is the means of combining ADD, CR and GE, and FORUT's Policy Document (2016) elaborates on the interconnections among them. It also refers to local, regional, national and international scales, as **vertical integration**. The Policy Document suggests **four dimensions of change**: individual, relationship, cultural and institutional; and **five groups of stakeholders**: political policy-makers, public institutions, rights-holders (with emphasis on those at risk), traditional media channels, and civil society entities. These different dimensions of the work are summarized into the existing FORUT Theory of Change (Figure 3).

Figure 3. FORUT Theory of Change (FORUT, 2016: 19)



The following are examples collected from the Partner Summary Reports and from the interviews that illustrate how FORUT and the partners implemented their work, very often in the form of **service delivery** on the ground. The intent was to provide a picture of the 'theory in practice'. The evaluation team then reviewed to what extent the FORUT Theory of Change captured that reality. [The reader is reminded that Section 4.3 below provides additional evidence of the different interpretations and manifestations of 'integration'.]

- FORUT staff confirmed that their approach is guided by the notion of ‘starting where people are at’³ – a principle that the evaluation team associates with adult education and community development. They respect partners and expect them to lead in the choice of intervention strategies (service delivery). They are cognizant that some of the partners have been at work longer than FORUT itself (more on partnerships in section 4.2 below) and that they know the terrain. FORUT provides expertise in ADD, especially around ADD related global priorities and thinking which is usually seen to be supplementary to their initiatives in CR, GE and other local priorities. Partners confirmed that this is the FORUT approach and complimented them for taking on this supportive, rather than top-down role.

The following are some examples from the field visits that illustrate this important merging of interests and expertise.

- Partners have expertise in different themes and the context directed which of the themes could be easily introduced at the community level. Therefore, the “entry” point varied for each partner and for each different context. For example, Healthy Lanka had found entry into villages to be easier through child clubs. From there, it was able to form social groups which then became actively involved in ADD activities and morphed into community service organizations (CSOs). That was why, **each partner had its unique ‘take’ on integration of the various themes; it was contextualized and also related to their own interests, skills and capacity.**

At the conceptual level, integration of themes was continually evolving. Although each partner had different thematic ‘entry’ points and may have worked extensively on one or more themes, there was a recognition that each partner, while strong in one or more themes, may have needed to strengthen their skills in others, as well as to integrate the themes more effectively.

- In Nepal, CWIN used an empowerment model with girls who are victims of physical and sexual abuse. The girls were very well versed in CR, ADD and GE and were able to understand the practicalities of integrating the three themes, particularly in risky situations. Evidence from the evaluation indicated that as the girls spent more time with CWIN at Balika, their shelter home, they had progressively become more confident, able to deal with their trauma, get educated and acquired skills, built relationships with their peers and established goals for themselves to reintegrate with society. The many trainings, child friendly counseling and various forms of therapy (art, theatre, music) had contributed to these outcomes, ensuring that children will be able, in the future, to avoid violence and not be ‘re-victimized’. Table 3 summarizes some of the statements by girls who had spent 3-6 years at Balika.

³ CWC Partner Summary report, India, (Volume 2)

Table 3. Before and after changes - expressed by girls at the Balika shelter (CWIN).

Changes	Before	After
In myself	<ul style="list-style-type: none"> - Afraid - Feel ashamed - Could not tell problems to others - Did not want to speak to others - Loneliness 	<ul style="list-style-type: none"> - Not afraid with others - Don't feel ashamed to disclose their problem - Capacity built through trainings, so we can speak with adults, peers
Relationship with others	<ul style="list-style-type: none"> - Afraid to speak with family and community and with adult - Don't express their feelings and tell about their needs - They feel ashamed and afraid to talk of physical changes 	<ul style="list-style-type: none"> - Lot of trainings and exposure to different programs. - Developed confidence to speak out - Comfortable atmosphere to express needs
In their situation	<ul style="list-style-type: none"> - No education - Had problem with family and society so lot of physical and psychosocial problems - Abuse – sexual, exploitation - Society perception towards them was negative - Because of poverty had to work as domestic worker, in hotel and in factory - Could not explore their interests 	<ul style="list-style-type: none"> - Get education and all materials needed - Away from family so no physical and mental problems or family pressures - Developed skill to protect themselves against sexual abuse, exploitation, negative perception and other violence - Can make their future plan - Because of their empowerment, can express feelings to others, know more and participate in school

The above are example of outcomes, some short-term and others longer-term that are significant in changing lives. They respond to the change categories in the ToC at the individual and relationships levels. There is a difference in the priorities of girls who had recently come to Balika and those who had been there for more than three years. The new entrants prioritized counselling, whereas the older residents prioritized education and legal aid. It appeared that as girls were able to deal with their trauma, they wanted to move on with their lives.

- These are positive changes at the individual level and in terms of relationships, following a focus on Child Rights (CR). Yet CWIN – as well as their partner RDTA in Nepal – followed an implementation strategy that fit within a **wider developmental approach**. With CWIN, ADD was introduced and the integration of GE (and later GEE) with CR and ADD had proved to be successful. CWIN and RDTA firmly believed that ADD had been successful because they did not approach the problem as: “Who drinks, who does not, and how much,” which is an individual behaviour angle. Instead, the impact on children, their savings, gender violence and impact on family relationships was emphasized – all were part of a system. Similarly, for MAGGA, Malawi, as a result of the life skills imparted, the



CWIN Balika girls engaged in PRA

girls had been able to stand firm against any violation by alcohol and drug culprits. A similar approach was employed by CWC in India, which utilized a bottom-up strategy, based upon the understanding that local issues were inter-related and that the issues of children had to be perceived as being within a larger societal context.⁴

- Similarly, the interrelationship between issues was seen in APSA (India), girls/boys had come from difficult situations and backgrounds. The children entered first into APSA with the problems of alcohol, low income, deserted by parents/broken homes, addicted to smoking/marijuana, and chewing tobacco (*hansa*). Most of them were sexually abused, mentally disturbed, had dropped out from schools, and had no life or livelihood skills. APSA provided the care according to each child's needs and their interests via group and individual care. At times, they used external support like professionals from NIMHANS (National Institute for Mental Health and Neuro Sciences) for counselling and related training.⁵

CWIN, as well as APSA in India, are involved in crisis management: they integrate immediate rescue for victims or those at risk, with long-term capacity development. This is a form of integration that is strategic and longitudinal. CWIN uses the evidence from its Child Helpline for advocacy with different ministries. This approach is an example of the relationship between service delivery and advocacy. Not surprisingly, this is a difficult process given that there are many government officials who work on these issues in silos, do not have technical know-how on this subject and tend to be overburdened regarding their scope of work. To deal with this complexity, APSA responds to the needs of children at the individual, community and state levels in a comprehensive way where the rights of children take the lead.⁶ CWIN also worked with both child related and health related government departments to integrate the issues. One shining example is the introduction of the 2017 National Alcohol Policy spearheaded by the National Alcohol Policy Alliance (NAPA) led by CWIN; a remarkable feat.

- Another form of **integration** happens at the local level, as women are given a space to share their predicament and broaden their understanding of the multiple and interrelated forces of their situation. In Nepal, CWIN/RDTA staff described the relationship between gender violence and alcohol: *“Women started to talk about women rights and their violation, cases started to come to the women’s group and even to the police. Silence was broken, and it was acceptable to talk about the issue. There is domestic violence, but beating by the husband is now understood as violence rather than being ‘normal’. Anecdotal evidence exists that domestic violence rates **that are ascribed to alcohol use are declining**. It is also likely that there are pockets in the community that are not responding to these changes.”*⁷

⁴ CWC Partner Summary report, India (Volume 2)

⁵ APSA Partner Summary Report, India (Volume 2)

⁶ APSA Partner Summary Report, India (Volume 2)

⁷ Partner Summary Report –CWIN – TUKI, Nepal (Volume 2)

Several of the partner's evaluation USES focused on verifying results or impact. In the FORUT ToC, change was expected to happen within individuals, across relationships, in culture and across institutions. The FORUT Policy document and the Theory of Change do not specify a gradient of outcomes for these four change areas. The evaluation team did note however, that valuable outcomes were evident.

Table 4 provides a rough example of a gradient of outcomes extracted from the APSA Partner summary report. This categorization could be done with many other cases reported in the Partner Summary Reports. (The team notes that agreeing on what constitutes each level of outcome could become part of a planning strategy – as the differences are open to interpretation. The same challenge applies to the overlap between the vertical columns, as often change happens across several interrelated areas.)

Table 4. Harvesting outcomes across the four change areas

Outcomes	Individuals	Relationships	Culture	Institutions
<i>Expect to see</i>	Children & public aware of ill effects of alcohol and drugs			Interventions through different networks of CBOs
<i>Like to see</i>			Federations provide support at community level	Changes to government policies & guidelines
<i>Love to see</i>	Children in contact w/APSA have stopped smoking, consuming alcohol, chewing tobacco			

There was evidence that the current emphasis on reporting using Results-Based Management (RBM) had conditioned the partners to think in terms of outputs and activities, and not change. RBM favours a view where programs are seen as discrete units (RBM X.X) with associated indicators; yet it does not capture theme integration or a gradient of outcomes. As a result, it was noticed how outcomes – though available – have often not been captured, as they do not fit the RBM structure, thus making it hard for FORUT and its partners to tell their story. The Malawi partners have requested capacity on evaluation to be able to capture and document these (behavioural) transformations.

Some of the partners' key evaluation questions focused on the enabling factors as well as the barriers that may be faced in their country context. Acknowledging these conditions is an important dimension of any Theory of Change, as it often uncovers unexpressed assumptions about how a change is expected to happen. The following are examples of a variety of strategies collected during the evaluation:

- **Existing government policy around alcohol eradication vs. regularization:** In Sri Lanka and Nepal, women's and popular movements have often advocated for a total ban, but this is not the FORUT policy nor that of its partners. FORUT holds that alcohol should remain a

legal product but that appropriate control measures (pricing/taxation, accessibility, marketing), need to be in place to reduce the level of individual and societal harm.

- **Commercial determinants of health:** A member of GAPA underlined the power of alcohol and tobacco lobbies indicating that some now are talking about the commercial determinants of health. Several of the Partner Summary Report list challenges that are expected from the commercial interests, and by some government groups interested in the revenue potential.⁸
- **ADD policies in place, vs policies in place but not yet implemented:** As with the CWIN major achievement, in Nepal, a major milestone for Malawi has been the introduction of the Alcohol policy which took 10 years, and now the FORUT partners are seeking to focus on its implementation.
- **Supplementing or complementing government services:** In some countries, the government is happy to let the FORUT partners do their work: As one government official said: *“Healthy Lanka has taken 50% of the government’s responsibility.”* In others, the NGOs do both. They supplement the government work and become catalysts, by convening stakeholders, and by heading or participating in influential committees hosted by government. The Nepal government wants CWIN’s Child Helpline Crisis Centers to be supported by donors, although they know it is a critical activity of Helplines. In Sri Lanka, partners active involvement in community mobilization for implementation of government policies are appreciated by the local government authorities, giving rise to requests to expand to other areas.
- **In-country coordination and origin:** The Sri Lanka partners were all part of an earlier single organization founded by FORUT; today they work in various parts of the country with limited coordination outside of FORUT-organized events. In both Nepal and Malawi, the two partners work in a complementary manner, one with a stronger arm in the policy world and the other on the ground. The Indian partners have a longer history than FORUT itself and bring in decades of experience, while some others follow FORUT’s ADD approach more closely, as is the case of DFM in Malawi. In India, the APSA team indicated that interventions through different networks, forums and collectives of civil society organisations, NGOs, government etc. were a significant enabling factor creating favourable changes in the policies, government guidelines and its implementation.

Funder pressures: Partners with high dependency on one, or a few, funders are more vulnerable to the preferences and pressures placed on them by their donor(s). MAGGA in Malawi has been able to work with a variety of funders but in almost all of them, target results are set, and the partners are not able to develop strategies and changes that are not in line with the funder interests. In some cases, they even support campaigns that are contrary to MAGGA’s principles. The problem is that very few donors provide the freedom to do both grassroots and high-level advocacy work, and many are not interested in a long-term

⁸ See the example of the British American Tobacco threatening governments in at least eight African countries: <https://www.theguardian.com/world/2017/jul/12/big-tobacco-dirty-war-africa-market>

investment. In a nutshell, context matters⁹ and oftentimes, changing it is beyond the control of FORUT and its partners. Yet it establishes what is achievable and what is not realistic and can help make a Theory of Change more grounded in what is possible.

ANALYSIS

Theory of Change

The theory of change depiction is broad and, not surprisingly, the multiple interrelated aspects are difficult to convey. For instance, how the partners are instrumental in the very process of integration is not mentioned in the ToC.

The overall process is understood by partners and by FORUT as being **developmental**. It means avoiding an individualized, behavior perspective and working for systemic change, along the lines of the more fundamental sustainable livelihoods or the social determinants of health frameworks. These frameworks are **systemic** by nature, and so is FORUT's, yet the ToC has a linear format that fails to capture this complex and effective approach.

The ToC identifies Capacity Building, Advocacy, Empowerment and Service Delivery as four strategies depicted by a series of circles at the top of the diagram. The evaluation team found evidence that they are often combined through service delivery. The team also found evidence that they can lead to positive impact, including empowerment. This finding confirms that the circles, as depicted in a row as strategies, are not an accurate reflection of the work on the ground.

The team produced one [rough] example of a **gradient of outcomes** from the findings (Table 2) to provide a connection to Outcome Mapping. This action was in response to partners' KEQs about outcomes and impact. They also listed a first approximation of contextual factors that can enable or hinder the outcomes and impact of the approach. These factors are elements of change that are not yet expressed in the ToC.

Service delivery – one venue for integration

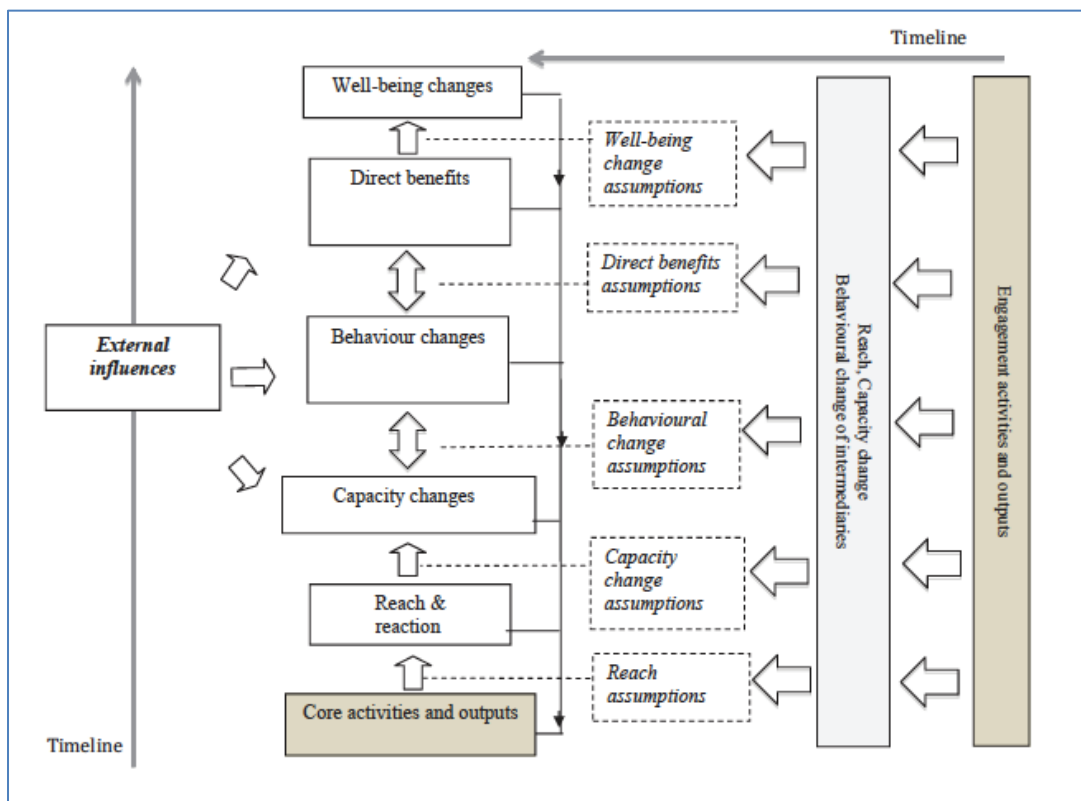
The team found in the evidence that **integration** has multiple meanings and variations (and they expand on this in other sub-sections). The way partners combine the "themes" and "strategies" is organic. The evidence shows how – through **service delivery** – partners can assemble a suite of services that combine themes and strategies at various levels in an opportunistic manner. They know how to respond to windows of opportunity, because they understand the context, its internal workings, and the individuals in the system who can be called upon to act (for instance, CWIN/RDTA knows the champions in government and sensitizes them).

⁹ For a thorough review of the multiple dimensions of this notion, see: Beyond Context Matters: <http://www.politicsandideas.org/contextmatters/>

A **theory of change** that resembles a buffet restaurant, whereby the partner assembles a mixed salad, differently every day, but with a purpose [staying healthy] comes to mind. The essence of the approach (being delivered by FORUT's partners) is the localized decision-making behind the selection of ingredients, something that comes from experience and being embedded in the context. It is important to stress that advocacy and grassroots work go hand in hand to have impact. Field experience provides credibility and evidence, while changes in policy hold the potential of shifting overall institutional programs and services in the longer run, to effect systemic and sustained change.

These connections are strategic and are not evident in the **Theory of Change visual**, yet they refer to what is compressed into the two large arrows (see Figure 3 on page 12 of this report). A different Theory of Change diagram supported by a number of complementary diagrams, could capture other important dynamics. In the example in Figure 4, the interconnections and especially the assumptions are made more evident. Additional visuals could capture how FORUT and the partners build on each other's values so deeply embedded in the work they are doing with CR and GE and inter-community integration.

Figure 4. A basic theory of change for multifaceted interventions (Mayne, 2015: 130)¹⁰



¹⁰ Mayne, J. 2015. Useful theory of change models. Canadian Journal of Program Evaluation 30(2): 119-142 (with permission).

4.2 ROLES IN THE PARTNERSHIP

Central to the Theory of Change is the organizational configuration: a partnership between the FORUT team in Norway and the partners in Nepal, Sri Lanka, India, Malawi, Zambia and Sierra Leone. In this partnership, FORUT enables the organizational partners to broaden and strengthen their reach, while adding an alcohol and/or a drug/tobacco dimension. As is described below, the partnership extends to the local organizations supported by each country partner, and to the exchanges of experience amongst the different country partners. FORUT has been working with some of the partners for decades: CWIN/RDTA (23 years), CWC (26 years) and APSA (30 years) – thus it is a long-standing, well regarded partnership.

When the FORUT staff visit a country, the evaluation team heard that ‘things happen’, which means they bring their enthusiasm and energy. The following are **examples of the roles** it plays:

- FORUT plays a **catalyst role** that is augmented during their country visits.
- FORUT is a **broker** at the global level. It has built trust and respect in the international community and is able to bring its partners’ experiences into higher level policy circles. It shares their commitment to long-term systemic change.¹¹
- FORUT **opens advocacy doors** for its partners, both by intentional invitation to conferences, and by providing expert research evidence in ADD that the partners can build on. The Malawi policy change is a good example.
- FORUT is a **co-learner**: partners mentioned how FORUT comes in to work *with* them. It respects the partner’s expertise and seeks to introduce their ADD agenda, cognizant that the partners bring their own experience. While the evaluation team has signalled challenges with how this ‘merging’ takes place, the team did hear that FORUT staff are perceived as respectful.
- FORUT brings **legitimacy and credibility** with their authoritative research publications and advocacy.

At the country level, the partners build their work from the ground up. While FORUT’s expertise is ADD, their partners integrate those issues into their work where relevant.¹² The partners often start from other dimensions, such as Child Rights, or Gender Empowerment and a larger vision than FORUT.¹³ Yet, most are system thinkers and they integrate the other determinants of a healthy community strategically.¹⁴

The partners are well aware that alcohol, although a problem, is often not an effective development entry point into communities. The partners are able to build on their work that has, in some cases, predated their partnership with FORUT.

¹¹ CWC Partner Summary Report India (Volume 2)

¹² CWC Ibid (Volume 2)

¹³ CWC ibid (Volume 2)

¹⁴ CWC ibid (Volume 2)

- One example is APSA, in India, which is a 35-year old organization with experience working in three areas: Child Rights and Child Rights Advocacy; Empowerment and Development of Youth; and, Gender Empowerment and Advocacy. Their areas of intervention cover a wide range of topics, from non-formal education, to running residential homes and shelters for youth and children in crisis, to offering emergency services, as well as formal education programs.
- In both Nepal and Sri Lanka, the partners such as RDTA and RAHAMA work in post-conflict zones and/or disaster areas. This context has meant that they are addressing a myriad of livelihood issues that are interrelated and inseparable. It also requires that immediate concerns such as resettlement, security and income generation must come first in priority.¹⁵ Thus, ADD, CR and GE are only a few of the many elements that require attention. This approach is very much in line with the notion of holistic livelihood strategies, which influence the social determinants of health. The text box below illustrates this dimension of the work in Nepal (and there are comparable examples from RAHAMA and FISD in Sri Lanka).

The collaboration with CWIN/RDTA included the “peace dividend” in the aftermath of the Maoist struggle in that area titled WOCELIP – Women and Children Empowerment and Livelihood Improvement Project. That is why Dolakha was selected as it was in the conflict zone. Many youths from the indigenous people were killed or were part of Maoist parties. RDTA were the first, after the Nepal army, to reach the area. The project activities include maternal health, development of education, water and sanitation infrastructure, early childhood education, livelihood and empowerment in ADD, CR and GE. This includes supporting the child friendly committees at the village level.

Source: Partner Summary Report – CWIN/RDTA, Nepal (p. 2)

The level of integration of the partners within the local policy and service delivery context is illustrated by the following examples of APSA's integration with government, at times as an ally, and other times as a critic:

- The government's open shelters needed to be critically assessed from the point of children/their rights. APSA played a role in observing, monitoring the open shelters and was instrumental in closing down the government run shelters wherever it was not functioning well.
- APSA used the government schemes wherever it was in line with the 'rights' perspective and its intervention strategy. APSA didn't take or collaborate on any government schemes that did not fit in. Sometimes it was difficult to fulfil the criteria of the government schemes like National Child Labour Program (NCLP), and it was a challenge. However, APSA as an institution had the scope to make independent decisions.

¹⁵ RAHAMA Partner Summary Report, Sri Lanka (Volume 2)

- APSA has sought expertise locally to complement its own, by engaging professionals from the National Institute for Mental Health and Neuro Science (NIMHANS) for counselling and related training.¹⁶

The integrated approach demonstrated here was reported to be essential: *“inevitable and advantageous in protecting the rights of children.”*¹⁷

Another form of partnership was evident in what the organizations stimulate locally. Very important for RAHAMA (Sri Lanka) is their underlying philosophy of inter-community integration post-conflict for collectivization of women. In response to a question about what difference collectivization has made in RAHAMA, the evaluation team heard that they have made numerous connections, starting with personal friendships, linkages with income generation opportunities, strengthening civil society organizations, formation of women’s cooperatives, self-help groups and micro-credit revolving funds. Moreover, in these post-conflict zones, there remains a government representative that coordinates all actions. RAHAMA has achieved recognition and support by the government for its gender empowerment and vocational training.

ANALYSIS

FORUT and its partners form a symbiosis: each one needs the other for the organism to thrive. FORUT is a channel for financial resources from NORAD, it provides ADD expertise and technical support, it enhances the partners’ legitimacy and credibility, and the staff work as catalyzers. FORUT has stature in global ADD circles and it draws on its partners’ experience as part of its lobbying and give their partners a platform to present their work at the global level. The following characteristics are summarized from the evidence; they are central to the overall approach, and deserve to appear in a Theory of Change.

Community Development

The partners are grounded in each local set of circumstances and they are the ones that operationalize the service delivery. They combine their expertise with FORUT’s in a strategic and opportunistic manner.¹⁸ Some partners such as FRIENDS and RAHAMA concentrate almost entirely on local livelihoods, especially with poor women¹⁹ while others, such as APSA, take the lead in local and national policy advocacy through their membership in committees. The partners are familiar with existing services and issues in each area – be they public or private – and they seek to complement and challenge them. Many piggy-back ADD onto their community development work,²⁰ and this grassroots expertise gives them credibility when advocating with authorities for changes in policies and programs.

¹⁶ APSA Partner Summary Report (Volume 2)

¹⁷ APSA ibid (Volume 2)

¹⁸ APSA, India, IBID (Volume 2)

¹⁹ FRIENDS, Sri Lanka, IBID (Volume 2)

²⁰ FRIENDS, Sri Lanka, Ibid (Volume 2)

Context Specific

The partnership is healthy in terms of mutual respect: the partners and FORUT share similar views on ways forward (as illustrated by the alignment and complementarity in the identification of the evaluation uses and Key Evaluation Questions). FORUT is committed to principles of community development and adult education, especially 'starting where people are at' and responding to each unique context. The partnership exhibits a hub and spoke configuration whereby FORUT is the hub and the partners are the spokes. While there are examples of bilateral collaboration across partners in different countries without FORUT's involvement, there is an overall sense that without their support, the collaboration may not take place. FORUT is able to spearhead important bilateral interaction and cross learning²¹ between partners through exchange visits and annual partnership meetings that are organized by FORUT (more on this in Section 3: Capacity Building).

CWIN, well known for CR advocacy; works at the national policy level whereas RDTA is a grassroots farmer organization. CWIN with RDTA worked together on post-conflict development issues to learn how issues get translated at the grassroots level. CWIN believes that such partnership enhances our learning about the issues they work on. For example, RDTA for the first time took on CR issues in their work with women farmers. In other words, sector-based implementation was understood as a wider development issue.

"The common link between us was empowerment"

In the same way, ADD was introduced and the integration of GE through economic empowerment (GEE) with CR and ADD has proved to be very successful. CWIN firmly believes that ADD has been successful because they DID NOT approach the problem as who drinks, who does not and how much. Instead, the impact on children, their savings, gender violence and impact on family relationships was emphasized. CWIN's partnership with RDTA was encouraged by FORUT, allowing CWIN to plan its own implementation plans.

Source: Partner Summary Report – CWIN/RDTA, Nepal (pp. 4-5)

Brokering linkages

In some countries, there are also internal networks among the partners: a strong link and unique relationship²² exists between CWIN & RDTA TUKI in Nepal, whereas in Sri Lanka the coordination among the different partners is mainly informal, and aided by the fact that many of the staff were formerly part of FORUT. In Malawi, DFM and MAGGA work at different levels²³ and as institutions, they have not been strategically linked.

While the symbiosis is evident, the findings reveal some challenges. Both FORUT and each partner are brokers. While FORUT is the bridge between NORAD funding and the partners, it is

²¹ APSA, India, IBID (Volume 2)

²² CWIN TUKI, Nepal, Ibid (Volume 2)

²³ Malawi Summary Profile (Volume 2)

also the connector at international gatherings, and when linking with other bilateral and multilateral agencies. In turn, the partners are the bridge between FORUT and the local organizations and individuals whom they seek to assist. Brokers face the challenge of translating information at various levels: what may seem important at the grassroots level for a CBO, may not appear as significant to a hard-nosed policy maker. What a funder may need to satisfy its performance metrics, may not capture the outcomes that are witnessed on the ground. Brokers are knowledge managers, they are translators and learning partners. In the evaluation team's analysis, the symbiosis between FORUT and its partners is central to the approach, something that is not made evident in the Theory of Change.

Beyond RBM: Telling the story

The brokering role is most challenging with regards to 'telling the story'. Outcomes at the ground level need to be documented, analyzed and shared. Making sense of what changes are happening, and aggregating them upward, has so far been limited by the results-based management (RBM) reporting approach. FORUT's provision of RBM in-house technical training has not served to mitigate these challenges.²⁴ The RBM reporting has been biased towards activities and outputs, and yet there have been untold comprehensive outcomes.²⁵ The evidence collected shows additional benefits in the form of outcomes, many of which are significant, yet they do not seem to find a home in the analysis. When youth in Nepal and Sri



PRA with RAHAMA boys

Lanka were given the opportunity to provide their views, using participatory tools, they demonstrated important and positive changes – as they have perceived them. The evaluation team observed that RBM has curtailed the partners' appreciation of outcomes and their ability to showcase their stories. Some partners have perceived RBM as the "...artificial imposition of thematic-linear proposal format."²⁶ Other partners such as CWIN/RDTA have been locked into thinking of specific outputs, which are the focus of RBM reporting.²⁷ FORUT is exploring other evaluation methods, including Outcome Mapping, and this is a positive innovation. There are precedents of other funders seeking to combine predictive frameworks, like the logical framework analysis, with appreciative inquiry that open the way for a broader way of 'telling the story'.²⁸

4.3 THEMATIC INTEGRATION

In the previous section there are numerous examples of different manifestations of integration, with attention to how they are part and parcel of partners' operations. This section is

²⁴ APSA India, Ibid (Volume 2)

²⁵ CWC Ibid (Volume 2)

²⁶ CWC Ibid (Volume 2)

²⁷ CWIN/RDTA, Nepal, Summary Profile (Volume 2)

²⁸ <http://www.urban-response.org/resource/12390>

complementary, with attention paid to the advantages, disadvantages and challenges of integration.

USE: FORUT partners to design projects with more integration among thematic areas for the next planning period

KEQ: What have been the advantages, disadvantages and challenges with the approaches to thematic integration the different partners have chosen?

The integration of various themes within FORUT's approach to development has its roots from within its founding organizations, IOGT, Juba and Juvente. In particular, Juba, representing the children's branch of IOGT, focuses on child rights while Juvente represents the youth. FORUT was initiated in 1981 to essentially take over the earlier work of its parent organization NGU (now Juvente), in Sri Lanka. FORUT now supports four partnerships in the country, with RAHAMA, FRIENDS, FISD and Healthy Lanka. All are NGOs rooted in issues focused on child rights, gender equality and alcohol as an obstacle to development.

Advantages

This history has the **advantage** of bringing authenticity to today's FORUT. As noted earlier, the FORUT approach to development and its relationship with partners are based on the understanding that you begin where people are at (or with the issues that are important to them). Moreover, FORUT's approach avoids focusing only on alcohol control and reduction that tends to come off as moralistic, and often flies in the face of cultural norms within a community or a country.

The following examples illustrate FORUT's approach:

- In the case of RAHAMA in Sri Lanka, with its focus on helping women-headed households resettle after the civil war, FORUT began by supporting the organization in their work with women and youth long before introducing the possibility that alcohol might be contributing to women's economic and social problems.
- CWIN/RDTA, in Nepal, strongly believes that it is the integration that has enabled them to address alcohol issues. When CR and GE are introduced, alcohol prevention becomes understandable and easier to implement in their lives.
- As noted above, CWIN/RDTA further believes that ADD has been successful because it was NOT approached head on, but instead, FORUT supported their work with children and child rights and later introduced the understanding of the potential impact of alcohol on children, family savings and gender violence.
- **FISD**, also in Sri Lanka, works in all three of the FORUT themes (ADD, CR and GE), but focuses on one over the other (with other themes in 'light' mode), in different districts (GE in one district, ADD in the other and so on). While this approach has created artificial silos, it has enabled FISD to work closely with the different government departments that also work in silos for women, children and health.

The **advantage** of this approach to development is that it allows FORUT to partner with organizations whose main focus is often gender/women's rights and child rights, and not alcohol *per se*. FORUT's use of the Alcohol Expectancy Model (AEM) was cited as particularly useful as an introduction to gender issues in Sri Lanka. Thus, FORUT is able to bring ADD to the table if it is useful in a particular context – it is not always the focus. In many instances, alcohol and drugs are seen as causal factors affecting child rights. There are other situations, however, where alcohol does not factor strongly into the equation. In the words of one interviewee, “...*in development there are certainly partners who work with child rights and not with alcohol, but it is not possible to work with alcohol without bumping into child rights and gender.*”

- CWIN's decision to partner with RDTA TUKI, a farmers' organization,²⁹ offered the opportunity to learn how issues got translated at the grassroots level. **Their work together revolved around livelihood and empowerment for women, support to children and child rights and ADD.**
- The CWIN/RDTA work is centred in Dolakha, where both conflict and the earthquake crises served to derail efforts at development. The service delivery related to relief has contributed significantly to the integration of the three themes. The evidence shows that women have increased awareness/knowledge on gender rights and gained a greater knowledge of agriculture, health and literacy. They also reported a decrease in alcohol-related³⁰ domestic violence (although there are pockets in the community that are not responding). Children are aware of their rights, the schools are free of corporal punishment and most children are aware of the harm of alcohol and play a role in raising awareness through street dramas and rallies. The people of the community have formed an ADD Committee and developed a code of conduct with the support of social ethnic welfare societies. Many community leaders gave up alcohol themselves and became ambassadors against alcohol. This livelihood strategy utilized by CWIN/RDTA is, by definition, also an integrated approach that illustrates the multiple dimensions of wellbeing that needed their attention.
- APSA, India works primarily in **four inter-thematic areas: Child rights and child rights advocacy; Empowerment and Development of Youth; and Gender Empowerment and Advocacy; Alcohol, Drugs and Development.** It is evident that APSA's integrated programs have brought significant changes to the lives of children. At the individual child/youth level, they provided basic education, developed youth livelihood skills, built positive attitudes toward life, helped with addictions (smoking, alcohol and tobacco use), improved their health and helped them reintegrate into their homes/parents. In addition, the opportunities provided by the APSA institutions have prevented children/youth from being vulnerable to abuse and early marriage. Both FISS and Healthy Lanka both present high-level advocacy work and thoughtful integration. Healthy Lanka is considered to be an expert on ADD issues with the Sri Lanka government.

²⁹ TUKIs are created through selecting village farmers who undergo 15 days “Integrated Progressive Farmers” training for social mobilization and agricultural technical transfer.

³⁰ Many women used to make alcohol to increase income but are now switching to other products.

- The Child Line³¹ run by APSA provides access to immediate response for children in distress/ need. The evaluator found many cases where the Child Line has prevented young girls from getting married or protected them from the traffickers or alcoholic parents. The awareness and knowledge of the Child Line help the children or girls who are in need. See one example in the text box below.

Arthi (name changed) came to APSA through the Child Welfare Committee¹ of Bangalore. She is 20 years old and has no mother. She has two sisters, and they are in government hostels. Her father, a daily wage earner as a painter was sentenced to seven-year imprisonment for the crime of being cause for the suicide of his wife. Arthi along with her sisters were left alone and deserted without any care after her mother's death. The police got Arthi to the Child Welfare Committee, Bangalore, and with their interventions and recommendation, she got introduced to APSA. Arthi was able to continue her education at the Bridge School run by APSA, and is now qualified to be in 10th standard in the open school system. She has been a resident of Nammane for three years, a shelter home run by APSA in Bangalore. She says, "I got the opportunity in APSA to get education, shelter, food, and I have caretakers like mothers." She further says, "I had an eye problem and weak health, but I am now out of all those problems. I became aware of my rights as a child and as an adolescent. The knowledge I have acquired has opened my eyes. I was 2nd standard school-dropout and I have now reached 10th standard, and I am so excited. I have gained the confidence to lead my life. I know how to protect myself and want to live as a dignified and self-dependent person. I have taken leadership in the Nammane and am on the Food Committee. I want to become a dancer. I want to help my sisters."

(Source: APSA Partner Summary Report, pp 7-8, Volume 2)

It is a **challenge** to separate the issues faced by the children in question, and it was advantageous to intervene comprehensively and in an "integrated" way bringing in the four themes of child rights, youth, gender and ADD.

- RAHAMA, in Sri Lanka has focused on women (particularly women-headed households) in the former conflict areas in the north of the country. RAHAMA formed women's groups and offered support in resettlement, in skill training for livelihoods along with counselling giving help to women to gain confidence and self-sufficiency. The data collected indicates that women in the program are now much more confident, articulate and able to take decisions. RAHAMA organized 10 women's collectives with a membership of 1,400 resettled women; trained selected leaders, helped 869 women find employment; helped 465 production groups reach markets and helped women participate in policy forums. Women's appreciation of the multi community collectives is high. RAHAMA's focus on children and child rights has worked to get children back into school (particularly early childhood education) after the war, and has created the RAHAMA Resource Centre where children have their own space. RAHAMA's intervention around alcohol and drug use has had high to medium success.

³¹ Child Line is a government supported toll free number for children in distress. It is run by NGOs.

- FIRD has adopted the **Happy Family model** that serves to open up a platform for all family members to address gender issues, and brings into the open issues around violence in the family, and alcohol related issues. Data shows that the focus on forming **women's collectives** (vigilante groups) has been positive and has, in fact, been adopted by the government. The groups have increased a sense of inclusion and offer peer, as well as self-learning opportunities, assisting women in changing their family environment. The formation of **men's groups**



PRA with RAHAMA girls



FIRD: Women's Vigilante Committee discussing risk mapping in their community

(also adopted by the government as an important strategy) helped members reduce or quit their consumption of alcohol as they had a peer group for support. The **community action groups** did not attract adult men in general, and users (alcohol) in particular, but did lobby with government. In many ways the environment that promoted alcohol use changed as people challenged the alcohol expectancies; young people delayed their initiation into alcohol, and lifestyles free of alcohol have started to become popular. In addition, FIRD works with **child friendly committees** that are active working groups around child rights and protection. These committees maintain confidentiality with regards to child rights violations and have identified risky places through mapping and mitigating risks. They conducted children's camps and offer a place for children to show their talents, offer leadership and exploration. A children's poster campaign on alcohol prevention has minimized consumption

amongst the youth and has lessened the youth gathering to smoke. The Child Rights program also organized house to house visits and managed to get children back to school – children gained confidence and violence against children was minimized.

In essence, FIRD's integrated/inter-thematic approach works. It has resulted in:

- Men's reduced spending on alcohol and tobacco allowing money to go to the needs of the families; men have spent more time with their families, but women and children still lack decision-making skills and role sharing skills within the family;
- Women no longer pardon or sanction the misbehaviour of men under the influence of alcohol, but are unable to challenge power relationships;
- Children are aware of gender differences and gender justice (aware of ill effects of child marriage, gender bias and cultural barriers).

The positive outcomes of FIRD are encouraging, and the component parts of the strategy [bold, above] show “integration” across family members, gender groups, community groups; and advocacy activities.

- FORUT's partner in Malawi, the Malawi Girl Guides Association (MAGGA), works with both boys and girls, but is mainly focused on girls. The Association's staff (workers and volunteers) mentor the girls by giving them life skills to enable them to develop good character and stable values, and empower girls to help them make their own independent and positive decisions. MAGGA staff report that they have reached (directly) a total of 12,623 girls with their ADD program. They came up with activities where girls expressed the effects of alcohol abuse in their families. MAGGA recently (about two years ago) started the Happy Family initiative in one district (Patsakonde), where they were able to address the relationship between ADD, CR and GE with the community and been able to minimize the related negative effects on women and children. Based on testimonials shared by the benefitting families, there is increasing demand for replication in other areas.

Challenges

FORUT takes what they call a ‘programmatic approach’ to their partner support. This means that they support partners development work that may be focused on children, health or socio-economic issues etc., and do this by acting as a broker for funds from NORAD, as well as assisting in coordinating their work with other FORUT partners, offering capacity building and exposing them to international fora where possible. FORUT's main contribution is the expertise they bring to ADD along with its willingness to experiment with how to make ADD interventions more effective and holistic. In sum, the evaluators did not find any disadvantages to the integrated approach and found their method of working with partners with particular expertise an ideal way to find an entry point for ADD.

FORUT's approach is not without its challenges, particularly given its dependence on partners to manage the child rights and gender elements of integration. Added to this complexity are the multiple interpretations of the word ‘integration’. It can imply vertical integration from local to global, as well as partner integration in term of mutual learning and sharing, as well as the inter-thematic approach that has been the focus of this section.

ANALYSIS

“The integrated approach is only when FORUT and others look at alcohol as a development issue.”³²

There are multiple-dimensions to FORUT's use of the word ‘integration.’ At the most fundamental is the FORUT understanding that if ADD is to be effective in the development context, it will be necessary to stress the inter-thematic relationship between ADD and other development issues such as gender, child rights, HIV and so on. As already noted, FORUT supports partners who themselves are focused on either child rights or gender (or health), and

³² Interview with Zambian, Phillip Chimponda.

uses this window to introduce ADD if it is deemed appropriate. FORUT, in turn, integrates the learning from the local level to inform their work at the more Global policy level (and vice versa). Where possible, FORUT partners are brought to Global Conferences to enable two-way learning. Finally, FORUT strives to bring together (integrate) partners within a single country, and at annual conferences, thus integrating knowledge and learning across partners and between partners and the global arena.

As mentioned in the first section, the Theory of Change encapsulates integration into two arrows, however, the evidence shows that the process is hugely varied, offers significant advantages, and may need to be explained differently – depending on the audiences, and purposes of explanation. In a nutshell, one ToC does not fit all needs.

At the same time, or perhaps because of the above, it has been difficult for FORUT to easily explain their concept of the 'integrated' approach (or inter-thematic) sometimes to their partners, their funder and maybe even to themselves. This confusion appears to have created expectations that may not have been possible to meet. For example, when FORUT prepares its proposals for funding, it focuses on the inter-thematic nature of its work and the requirement for funding to cover ADD, Gender and Child Rights. This diversity of focus suggests that FORUT itself has expertise in gender and child rights, as well as their known knowledge in ADD. But FORUT doesn't have any gender or child rights specialists on their team – this input they leave to their partners who specialize in these areas – neither does FORUT provide capacity building in integration – instead FORUT's capacity building (and willingness to allow partners to innovate) has focused on specific areas of advocacy and, for the last few years the use of Results-Based Management for reporting.

There is a certain logic, however, in FORUT seeking partners with strong capabilities in both gender and child rights, since there is a proven connection between these issues and the wholesale effects of alcohol consumption. This finding was amply illustrated by the CWC story in which they asked children what was impacting their family life, and the children mentioned alcohol sold in plastic bags. The children took the initiative and collected the empty plastic alcohol bags in the village the day after pay day, and calculated the amount of money that must have been spent on alcohol, instead of on the family. They took this evidence to the village council to raise awareness about the impact of alcohol on family life. Children themselves could gauge the impact that alcohol had on their well-being, both in terms of loss of finances and, in many cases, domestic violence at home.

Despite the challenges, findings amongst all partners strongly support the integrated approach to alcohol, child rights and gender equity. CWC in India sums it up by stating that issues such as child rights violation, gender discrimination or alcohol abuse are part of the **strategic bottom up, organic, comprehensive and integrated approach** and that any bifurcation of these issues would be artificial.

The application of RBM itself has been a stumbling block towards a greater understanding of the importance of the integrated approach. When first introduced more than 30 years ago by

donors to track results, RBM has morphed into something of a straitjacket of numbers, rendering it difficult for implementers to show process results around learning, or a gradient of outcomes. The integration of development themes that revolve around relationships and partnerships cannot be gauged in numbers, hence there is no strong way to indicate the progress of a more process-oriented, gradual and multi-faceted approach, that is at the heart of integration. FORUT has invested a great deal in building partner capacity in RBM but may have, in the evaluators view, taken a rather narrow approach to RBM. It does not appear to have pushed the boundaries towards a more flexible approach (only now introducing Outcome Mapping and Most Significant Change) to try and tell its stories better.

The findings have shown that, at a developmental level, the FORUT approach to integration has been successful and has enabled FORUT to support its partners strategically by only introducing ADD when it is appropriate. FORUT's long experience has demonstrated that it is never expedient to first raise the alcohol issue without backing into it through its interrelationship to other issues – child rights, gender and so on.

4.4 ADVOCACY

USE: FORUT partners to design projects with more integration among thematic areas for the next planning period

KEQ: How have **global & national level advocacy and networking** [emphasis on ADD] been linked to maximise local impact [emphasis on children's and women's lives]?

FORUT has its roots in IOGT, a Norwegian organization advocating for public policy about alcohol and its harms since the late 1800s. After FORUT was established as a development NGO in 1981, it expanded its horizon into the Global arena where it has gained a reputation as being a force able to bring local advocacy concerns to Global fora and vice versa.

Global

FORUT's presence in the global arena began more than 20 years ago and is most notable for its support to global policy development through the World Health Organization (WHO), and the Global Advocacy Policy Alliance (GAPA).³³

- FORUT's view that alcohol and drugs are public health (rather than individual medical) issues, has gained a reputation particularly within the public health arm of WHO. WHO values FORUT's support and participation at their global meetings, particularly for their ability to be instrumental in suggesting names of those from African and Asian civil society organizations who would benefit from attending meetings (and it uses its own resources to fund their attendance).
- FORUT also funds public health activists to come to the WHO meetings in Geneva, and shares the learning from their activities at the field level in Africa and Asia. This

³³ "...a network of non-governmental organizations and people working in public health agencies who share information on alcohol issues and advocate evidence-based alcohol policies - free from commercial interests."

involvement, in the eyes of WHO, is important, since implementation is always at country level. In the words of a WHO interviewee – *“FORUT is a strong presence and their development view of drugs and alcohol is extremely important.”*

- FORUT holds a particularly strong position within GAPA. It is the only entity that provides financial support by way of funding partner attendance at GAPA meetings. In addition, the FORUT staff member responsible for its global advocacy work is able to devote 50% of his time to GAPA business. Together GAPA and FORUT support the view that alcohol and drugs are public health and development issues rather than medical problems. They have worked hard to get a place for this view within the Sustainable Development Goals (SDGs). They also strive to draw attention to this issue (ADD) away from its focus on the West, to the alcohol problems faced by middle-income countries in Africa and Asia. At the GAPA conference in Melbourne (October 4-6, 2017), FORUT co-hosted a symposium prior to the event to bring partner voices to the table.
- FORUT's partners have also been active on the global level – for example, CWC in relation to Child Rights. CWC opposed the inclusion of the traditional understanding of Child Labour as enshrined in ILO (ILO 138) in connection with the UN General Comment on Adolescents. The UN Committee did give a hearing to this view in Geneva. Also, the CWC as a member of the UN Expert Group took part in the drafting UN General Comment on adolescence; UN General Comment on Children in Street situations; and UN General Comment on Children's Right to Participation.

Regional

- FORUT's presence at the regional level is mainly through their continued support to regional advocacy networks that have sprung up through a loose relationship with GAPA. The South African Regional Alcohol Alliance (SAAPA) for example, which gets some support, but no direct funding from GAPA, has FORUT support in the form of a salary for a part-time regional coordinator (based in South Africa) and for regional meetings and advocacy.³⁴
- One recent SAAPA intervention resulted in their success in stopping a Corporate Social Responsibility (CSR) project initiated by the world's largest alcohol company SAB. SAB was promoting a scheme whereby the purchase of each 8-pack of a new beer would release a little funding to help feed poor African students. This initiative was ostensibly aimed at ending hunger amongst students, but in practice the purpose was to increase sales. SAB eventually had to pull the campaign.

National

FORUT has played an important role in support to partner countries' struggles to develop a national alcohol policy. The organization makes a point of keeping up to date on technicalities about alcohol and drug abuse and is able to supply partners with this information through a flow of publications: Their most recent notable support has been in Malawi (which passed their National Alcohol Policy in August 2017), and Nepal, as well as their current work in Zambia.

³⁴ FORUT also pays a small allowance to SAAPA members to travel to SAAPA meetings and covers lunch.

- It was **Drug Fight Malawi (DFM)** that led the campaign to start developing the national alcohol policy (NAP) in Malawi. Over 10 years ago, DFM contacted FORUT and sent them a draft policy document for Malawi. FORUT reviewed the document, and finding it suspicious, did some forensic research (see below), only to prove that the South African Brewery industry had hired an Australian consultant to pen the report. Because of the research, DFM and FORUT joined in partnership to block the alcohol industry initiative and develop Malawi's alcohol policy in line with the international evidence base, the WHO recommendations and public health objectives. FORUT offered training on alcohol issues, introduced DFM to FORUT partners in other countries, and hired the Norwegian research institute SINTEF to do a nation-wide survey on alcohol and its effects on Malawi. DFM, in turn, spearheaded the work at the national policy level, working closely with the Ministry of Home Affairs and the Ministry of Health. FORUT also developed partnerships with other civil society organizations and, according to Norwegian Church Aid (NCA), has been a knowledge and resource base of best practices from other countries that have developed their own alcohol policies. The organization has also been involved in reviewing Malawi's liquor related acts and regulations, and have advocated for the regulation and enactment of age limitations, access times and location of bars. They successfully advocated against inappropriate alcohol packaging that were designed to make alcohol easy to access (e.g. in sachets and plastic bottles). DFM has become the 'mouth piece' for talking to government about the effects of alcohol and drug abuse, and has been the guiding institution in terms of advocacy and best practices. Their role as secretariat of the Malawi Alcohol Policy Alliance (MAPA) has brought this role to the fore.
- The NGO « Serenity Harm Reduction Programme Zambia » (**SHARPZ**) continues to lead the Zambian effort at developing a national alcohol policy, through the national alcohol policy network SAAPA Zambia. SHARPZ had been involved in the first attempts to draft a new national alcohol policy, but backed out because of undue industry influence. When FORUT and the Norwegian Church Aid initiated a new national alcohol umbrella organization, SHARPZ immediately became a key player because of its commitment and special competence. Since then FORUT has supported SHARPZ and the alcohol policy alliance.
- FORUT support to the Zambian policy effort has been critical, according to one interviewee. FORUT and SHARPZ work closely with both NCA and the Pioneer Movement of the Catholic Church in Zambia. NCA (with FORUT support), works with issues of masculinity, alcohol and HIV/AIDS. The national alcohol policy network has worked closely with the responsible ministries and have presented what they hope is the final draft (with FORUT support), recently in 2017. Optimists believe the draft may be passed by the end of the year, while others believe that it will continue to do the rounds – since it will restrict the freedom of politicians to “do what they please”.
- Similarly, **CWIN/RDTA** in Nepal has influenced policy in many ministries (all related ministries on Child Rights) – it is an established organization renowned for its child rights advocacy and understanding of the complex issues related to gender violence and children's rights. CWIN is the founder member of the Alliance Against Trafficking of Children and Women in Nepal (AATWIN), and was able to introduce the anti-trafficking law and get the government to allocate funds for it. CWIN has provided inputs to replace the outdated 1992 Children's Act. For children who have been rescued, CWIN has worked for policy

changes and has been steadfast in its policy work, especially related to the protection of girls, often facing death threats and political pressure to drop legal cases. In 2012, with the initiative of the CWIN/RDTA-led Nepal Alcohol Policy Alliance (NAPA), a task force was formed coordinated by of the Ministry of Health and Population for the formation of an alcohol policy. In 2017, CWIN and the other organizations in the alliance celebrated the successful adoption of a new national alcohol policy for Nepal, along with new alcohol legislation. It is CWIN who spearheaded the NAPA for Nepal and it was their understanding of child rights and gender that ensured their place within the alcohol policy and law. There are other concrete examples outside of NAPA where CWIN/RDTA has been able to advocate for policy changes – e.g., regarding the minimum period for filing cases (extended to 180 days from 35), since children need time to heal and be willing to talk to take legal action. CWIN is regarded as a valued knowledge partner to government, and sits on many government and NGO committees (the latest being the issue of how to protect girls from online harassment).

- **Healthy Lanka** advocated for Sri Lanka's National Alcohol Policy that was approved by Cabinet in June 2016. Earlier, it has spearhead the process to establish the Sri Lanka Alcohol Policy Alliance (SLAPA), and through SLAPA, advocated for the National Policy where they had the opportunity to give their views to the President of Sri Lanka. It is one of the few organizations in Sri Lanka that is recognized by the Ministry of Education to work with schools.

Local

Advocacy is a natural offshoot of partner work at the local level. Partners champion issues of child rights, gender empowerment and alcohol control as an intrinsic part of their work.

- **MAGGA**, in Malawi took part in the work to develop the new Alcohol Policy for Malawi and contributed to the work to develop the Marriage Age Act, Gender Equality Act and the School Re-Admission Policy. MAGGA continues to fight to limit the sale of alcohol to those over 18 and has developed community by-laws against harmful cultural practices. These laws and by-laws have been adopted by the government. MAGGA also worked with girls in their communities to contribute ideas to the Malawi National Alcohol Policy, and organized dialogues for increasing awareness and influencing stakeholders on pertinent alcohol issues, especially with its implications for girls. In addition to the Happy Family initiative, they set up what they call Village Bar Committees, where bar managers agree to police alcohol consumption within their premises.
- **APSA's** work in India, on Child Rights, is similarly conversant with advocacy. It has lobbied for policy changes at both the state and central level for Child Rights, girls, children/ adolescents and ADD. Its collective advocacy initiated before or during the project period



Village Bar Committee, Malawi

(2014 – 2018) has yielded results in bringing changes in policies related to child rights. A few examples from the State of Karnataka are listed below:

- Karnataka Child Rights Commission: The collective work of NGOs, including APSA led to the amendments in Child Labour and Juvenile Justice Act leading to more regulatory measures;
- Karnataka Child Rights Observatory was established and as a result of lobbying the legislators, a Legislative CR forum was created. Based upon annual research and information about the status of children in the state, a collective lobby of NGOs led to the creation of this Forum. The legislators now dedicate 3 days exclusively to debate in the Assembly;
- Girl Child Policy in Karnataka: APSA worked collectively with others to prepare a draft policy and training models which is waiting to be approved by the departments. Also, they played a role in developing Training Modules for the Education Department to help in the implementation of the policy.
- **CWC** has followed a strategy of critiquing the existing policies from the point of children and at the same time provided alternatives. It has helped to maximise the outcome. A few examples are listed below:
 - Provided critiques to the Juvenile Justice Act
 - Critiqued the Panchayat Raj Act and brought about changes in democratic decentralisation in the entire state of Karnataka including a State mandate for child participation in local governance
 - Participated in *the Drafting Committees* for amending the existing laws or bringing new policies such as the Karnataka Child Protection Policy (CPP) 2016; Karnataka Girl Child Policy; Karnataka State Plan of Action on Survey, Identification, *Repatriation, Rehabilitation and Mainstream* of Child Labour 2016.
- **Healthy Lanka** and **FISD** worked to bring about effective implementation of the NATA act at the community level (as well as the national level). Here they made an issue against alcohol and tobacco sales to minors and helped the duty bearers (government, police, etc.) gain new insight into reducing alcohol related misbehaviour by men.

Methodologies and products

FORUT and partners use a multitude of methodologies to advocate for their cause. These strategies ranged from FORUT's attendance at Global meetings hosted by WHO, UNDP or UNODC to building on the ingenuity of local partners to figure out methods for children's voice to be heard.

- **CWC**, for example, has been able to change the narrative of discourse on children's issues, and challenged the criminalization of working children (all work is not bad, and all school is not good) and has been a pioneer in highlighting this narrative and impacted significantly in this direction. CWC's research and manuals are widely used by NGOs and government. They use public campaigns, work with Parliamentarians and use various media platforms (radio, TV) to sensitize the public and advocate for change.

- **FISD** uses posters and stickers while **MAGGA** uses brochures on GE and CR and helps develop community by-laws and, as noted, brings in local bar managers to collaborate in their advocacy work.
- **Healthy Lanka** developed manuals and curriculum for government structures as a way of bringing them on board to work at the community level.
- **DFM** set up and facilitated dialogues for processing and developing the national alcohol policy and were at the forefront of presenting the policy to cabinet; reviewed liquor related acts, and regulations, advocated for the regulation of age limitations, access times and location of bars and advocated against inappropriate alcohol packaging that made it more accessible (plastic bags); and works with the Ministries of Home Affairs and Health to build capacity and educate people on the effects of alcohol abuse. DFM is consistent and persistent in its mission to reduce alcohol harm – is well informed on alcohol issues and provides technical expertise and knowledge about other countries that have gone through the alcohol policy process.

ANALYSIS

USE: FORUT partners to design projects with more integration among thematic areas for the next planning period

KEQ: How have **global & national level advocacy and networking** [emphasis on ADD] been linked to maximise local impact [emphasis on children's and women's lives]?

FORUT has been engaged in the many ramifications of advocacy from its earliest roots in IOGT Norway as a collective of people wishing to raise attention and control of the ill effects of alcohol consumption. Advocacy is something that underlies the entire ethos of the organization and is, to paraphrase the words of a FORUT interviewee, in their DNA so they don't even think about it or name it since it is so related to everything they do.

Advocacy is indeed within the DNA of the organization, but one potential fall-out from this is that it does not always get named or written up in project documents. Indeed, while FORUT staff do an impressive amount of advocacy work, there is no written advocacy strategy that captures the history of successful methodologies and initiatives, and can be adapted as times change. In short, FORUT lacks a written record of its advocacy design.

FORUT's advocacy work at the **Global** level got underway more than 20 years ago but began to get traction with the arrival of a staff member who took the FORUT point of view to the UN. This move, from the local and national to Global, was partly motivated by an overall understanding that it is important to have alcohol policies in place at every level if there is any hope to put any form of regulation in place. For FORUT, this meant lobbying to have alcohol seen as a public health issue also with a wider social impact, rather than a strictly medical one. This approach falls well in line with WHO's Global Strategy to reduce the Harmful Use of Alcohol.

The advocacy field is complicated by the strong presence of the alcohol industry, who, like the pharmaceutical drug industry, heavily involves itself where it can, at every level of policy development – Global, Regional and National. In fact, in the words of the Global Alcohol Alliance (GAPA) chair, instead of health officials talking about social determinants of health, people are now talking about commercial determinants of health. GAPA, which stands for the promotion of effective alcohol policies without the influence of transnational alcohol business interests, sides with FORUT in its quest to get alcohol seen as a public health/development issue, both within UNDP and WHO. According to the GAPA chair, FORUT operates really well from the ground up through to the global arena – their communication skills and networking are strong.

FORUT's presence at the local and national level and its involvement in support of policy development in almost all its partner countries has given the organization traction at the global level. In some ways, the public health unit at WHO sees FORUT as a close colleague and partner with the ability to bring ground level knowledge to bear on the discussion. There is an appreciation for their role in bringing this wider ring of voices to the policy discussions, even if not formalized and it also sees FORUT as a vehicle for testing policy level discussion at the national level.

The development of policy and its attendant laws and regulations requires knowledge, data and considerable research. FORUT's great strength lies in its vast repertoire of facts and figures and experiences about the alcohol debate, and it has gained considerable traction through its contribution to research around this issue.

FORUT's policy work at the local/national levels, always with support from civil society actors, has helped FORUT fully realize that these policies must link up with thematic areas such as child rights and gender. At the community level, they note that there is no need to present the scientific fact about alcohol harm – every second woman has a story to tell about losing someone through alcohol – so strong is this reality that it is very easy to help people see the importance of controlling alcohol. However, there are no NGOs focusing on alcohol exclusively, but there are many focusing on child rights and gender – it is natural that they would become FORUT's partners.

It is an effective advocacy strategy to work with people where they are at and while it is strange, it is easier to speak to people about HIV than alcohol. As a result, UNDP has chosen the HIV approach as a model and has instituted a program on HIV, Gender and Alcohol. They use this window to talk about alcohol, but have found that while there are a growing number of policies on HIV, Gender and Child Rights, there are fewer on alcohol in this context because the links between these issues and alcohol are less understood.

4.5 SUSTAINABILITY

The reference to **sustainability** was made by partners in some evaluation USES and KEQs, with emphasis on continuation of funding.

USE (Nepal & Sri Lanka) 3: Understand the effectiveness & sustainability for next phase of funding.

USE (DFM, Malawi) 3: To secure funding for future work.

KEQ 3.2: How can we learn from how we have secured funds?

While the focus of the uses and KEQs is financial, the evidence the evaluation team found provides a broader set of sustainability dimensions. They begin with an example from Sri Lanka that underscores the profound nature of the challenges at hand and how a 'sustainable' solution represents a massive challenge.

RAHAMA's efforts relate to building organizations that can be self-managed. Since the focus is on women, the aim is to build strong women led and women managed organizations. Problems in the area include – safety, security and mines along with various economic problems as the area lacks major economic investment and has poor livelihood opportunities. Children missed their education during the war years. Women who head their households do not know about their spouses – if they are dead or missing – and suffer from both psychological trauma and economic stress. RAHAMA also works with youth to enable them to be economically independent. In order to work in the area, RAHAMA has to have close, cooperative ties with the military government in the area.

(Source: Partner Summary Report, RAHAMA, Sri Lanka)

The following are examples of the many dimensions associated with sustainability.

Partners establishing/encouraging grassroots groups as a means of extending and sustaining change.

- An example of **sustaining girls' empowerment**, Nepal: The CWIN Balika Peace home has a dedicated staff member who looks after the reintegration of girls. **Economic independency is still a problem.** Rehabilitation plans are made according the context and ability of the girls. Although both HelpLine and Balika are meant to be short stay homes, some children stay on until safe viable options are found. It became apparent through the focus group discussions that the longer the girls stayed with Balika, the stronger was their empowerment.
- FRIENDS in Sri Lanka found that sustaining income generation activities with women at the **Livelihood Facilitation Centres** (a model based on the SEWA approach in India) requires ongoing support, as not all are financially viable.
- Healthy Lanka experience shows how in some communities there are social groups – more informal than the CSOs. The social groups have included alcohol and drug prevention into their agendas. However, the social groups should be developed into CSOs – strengthening their knowledge base on ADD, gender, and child rights so that they can give training to

others, be more purposeful and sustainable. In this case supporting the **evolution of informal groups** as they mature is a sustainability issue.

- APSA: The **outreach intervention, especially the strategy of working with CBOs**, has been a complementary factor. The text box below provides a glimpse of the different **livelihood benefits** that these organizations extend to their members, some more sustainable than others.

- At CWC, the federations and partnerships, such as Bhima Sanghas (Working children's unions), Federations of Makkala Mitra's and Mahila Mitras (Adults who provide crisis care and support), Grama Panchayat Hakkottaya Andolana (State Campaign) the main player in the drafting of the New State Legislation on local governance and the State Level Advocacy Collaborations contribute to the sustainability of the systematic change. The participation of children in grass roots self-governance has been an effective platform for children's participation and it was observed that their collectives (at the "taluk" and district levels) should have a collaborative tie-up with networks within and outside the Child Welfare Committee fold to provide continuity to their work.



Healthy Lanka: Children discussing changes in themselves, their friends, family and community using a "Before-After Change Matrix"

- **Construction Workers Welfare Union:** The workers were able to get hospital support, death compensations, marriage support (Rs. 50,000) for their children and various education scholarship from 5th standard. The Union was able to take up issues of non-payment of wages to the workers.
- **Domestic Workers Collectives:** They were helpful in protecting the workers from harassment by employers; false accusations and complaints of theft.
- **SHGs and its Federations:** Each SHG is an independent unit having its own saving and lending among its members. They also extend support to their members when they are faced with problems like domestic violence or alcoholic husbands. The federations organize wider support for affirming the rights of women through the celebration of International Women's Day.
- **Child Friendly Ward Collectives:** These collectives support getting facilities like water, anganwadi/day care centre teachers, etc. in their areas/ slums, and take these issues to the area leaders and Ward Corporator. They solicit the support from local police, government officials and government school teachers. They took up the issue of tobacco selling, smoking marijuana/kancha, etc.
- **Slum Dwellers Association focus their work on 1 constituency – KR Puram:** land title issue for the housing land, efforts to legalize the housing land. Some are members of construction workers union or SHG members.
- The SHG members also get into the government LIC (Life Insurance Corporation) scheme with an annual premium payment of Rs.100. The members have benefitted from education support for their children and death (natural and accidental) compensation.

(Source: Partner Summary Report, APSA, India)

Partners are conveners of national alliances, partners as advocates with grassroots experience, partners breaking silos locally while government cannot.

- One example of the need to **sustain advocacy on policy changes** with government is: that CWIN/RDTA is part of wider civil society networks which could work together to influence the National Alcohol Policy. There are problems in integrating women and child issues with the Alcohol Policy, which sits in the Ministry of Health as the government works in silos. CWIN is active across multiple types of collaboration at the state and national levels.³⁵
- Healthy Lanka in Sri Lanka is also linked with governmental institutions, for instance as a resource organization for the Presidential Task Force on Drug Prevention. The need for advocacy for prevention is ongoing, especially for national action plans to become established at the district level.

Complementing vs supplementing government

- Healthy Lanka and FSD: At the implementation level, government officials at the divisional and community level look for expertise, guidance and training from HLAD – HLAD villages are considered as 'model' villages. The problem is whether the government will take over and expand to other villages – officials mention resource and expertise limitations which may affect expansion.
- CWIN/RDTA in Nepal is invited to participate in many planning and monitoring committees at the district government level, and is reportedly in a unique position to contribute to and shape local policy, which it does.

Financial sustainability of the partner NGOs themselves

- Only a few of the partners (CWIN/RDTA for example), have diversified funding sources. For most of them, FORUT included, the proportion of funds from other donors is very limited, and they are generally dependent on a single funder.
- NORAD is supportive of FORUT's core business focussed on alcohol and drugs, but understands less the needs to devote as many resources to women's and child rights and gender, except as entry points. It is here where the issue of spreading resources too thinly becomes an issue given that NORAD supports other organizations with greater technical capacity in those key areas and FORUT is a small organization with specialized expertise and limited resources.
- NORAD reported having requested that FORUT produce a sustainability plan for its Sri Lankan partners given that NORAD is planning to scale down its program in that country. It is looking to FORUT to propose a strategy and recognizes that it is difficult to scale back.

ANALYSIS

This evaluation gathered evidence that confirms that the issues at hand are complex, engrained in cultural and institutional practices and difficult, if not impossible, to solve in the short-term. The evidence above provides examples of service provision, capacity development, and advocacy actions that seek to create organizations to sustain the effort. While the evidence underscores the justification for a longer term, sustainable process, the partners are faced with

³⁵ Partner Summary Report CWC (Volume 2)

uncertainty of funding and a high level of dependency. This situation means that the overall partnership is vulnerable, and its current achievements can be reversed without continued engagement.

It is worth adding that the achievements to date reflect years of work. While handing over responsibility is not the same as walking away, a sustainability plan for Sri Lankan partners may need to confirm who and under what conditions, is able to take on some of the tasks performed by the partners and by FORUT. It will also need to identify what options exist for collaboration with other partners (specialized in some of the needed capacity development topics areas) as well as a more diversified set of financial supporters.

4.6 CAPACITY DEVELOPMENT

FORUT	FORUT
USE – capacity building	KEQ
FORUT & partners to improve and systematize joint efforts for capacity-building and mutual learning	How have FORUT's partners' capacity and competence been strengthened through their co-operation with FORUT and other FORUT partners?

As indicated at the start of the Findings Section, FORUT's 2016 Policy Document situates capacity development as one of its four strategies with the others being advocacy, empowerment and service delivery. It integrates its strategies with its three thematic areas (CR, ADD and GE) in working with stakeholders which include policy makers, public institutions, rights-holders, civil society entities as well as traditional media and thought leaders. Its strategies are intended to contribute to individual, cultural, relationship and institutional change.³⁶

FORUT's uniqueness in this regard is that it seeks to undertake this work in six countries through meaningful and equitable partnerships. In the case of its approach to capacity building, its intention is not simply to strengthen the work of others, but in the process to build its own capacity – through a multi-directional learning process. Thus, it shares the capacity-building responsibilities with its partners. The Policy Document speaks of FORUT's primary value-added being its expertise in ADD and in supporting its partners as they attempt to bend the strictures of RBM to serve their reporting and accountability requirements.

In describing its capacity-building strategy, FORUT sees itself as the hub of a network. It acts as a catalyst and facilitator of a mutual learning process in which its partners – national organizations – share their national, regional and local knowledge, both content related especially in the CR and GE fields, as well as strategic. FORUT's agenda in ADD is then added onto the ongoing rights-based work of its partners. As emphasized earlier, this integration is done when and if it is a natural fit where partners are engaged in a holistic approach to development; one which is driven by an organic understanding of the breadth of the social determinants of health.

³⁶ FORUT Policy Document, March 2016, page 19

The evaluation uses and Key Evaluation Questions about capacity building are focused on looking for ways that FORUT and its partners could improve and systematize their joint efforts for capacity-building and mutual learning, as well as on determining its impact to date.

Strengths

The following examples provide evidence of a bottom-up, inclusive, and comprehensive capacity development approach:

- FORUT staff confirmed how they have become involved with its partners “starting from where they are at.” This entry is a bottom-up approach which, in most cases, did not initially incorporate alcohol and drug issues explicitly.
- Their partner Child Welfare Committee, in India, is an example. It was established in 1975 (well before FORUT’s arrival), had three major program strategies: children’s citizenship, education for empowerment focused on children and governance. Only lately has the Child Welfare Committee added on an alcohol and drug dimension as its community work brought these issues forward as important parts of a comprehensive development approach that seeks systemic change.³⁷
- APSA staff in India see alcohol and drug abuse as a causative factor³⁸ in their work focused on gender and children’s rights, and they became interested in the preventative possibilities which aligned with its integrated approach to development.
- Like them, CWIN in Nepal has provided delivery of services as a strategy to address the issues of children at the grass-roots. This approach has enabled several of FORUT’s partners, in general, to establish credibility in communities. In turn, this strategy has enabled them to provide capacity to government and local awareness of issues including ADD ones. CWIN introduced ADD within its CR and GE agendas and attributes its success³⁹ to the avoidance of the top-down imposition of training of a moralistic nature – an approach which FORUT’s capacity-building strategy supported as consistent with its commitment to comprehensive development.
- FRIENDS, in Sri Lanka, also saw the advantages of concentrating on its core mandate of gender economic empowerment (GEE) within communities, and then subsequently adding on other priorities to do with child rights and ADD – a piggyback strategy.⁴⁰
- In Malawi, MAGGA reported that FORUT’s funding of their ADD activities has been seen to give evidence of the strong relationship between alcohol and drug problems and its effects on CR and GBV.⁴¹ They have seen the need to add additional staff and community volunteers to service an expanding geographic area and to this end, they have needed to stress learning opportunities, including sharing forums.
- After FORUT began partnering with SHARPZ in Zambia, they provided training in how to develop evidence based health policies, and started looking at thematic areas. This research role was described by one interviewee as follows: “FORUT supplies technical

³⁷ CWC Partner Summary Report (Volume 2)

³⁸ APSA Partner Summary Report (Volume 2)

³⁹ CWIN Partner Summary Report (Volume 2)

⁴⁰ FRIENDS, IBID (Volume 2)

⁴¹ MAGGA, Malawi, IBID (Volume 2)

support in terms of their excellent publications. They have a happy knack of presenting good, up to date research in a manner that is clear and popular. They bring printed material on their visits and encourage us to go on their website where all their materials are available in soft copy.” Another Zambian contact stated: “FORUT is perpetually pushing us (and this is a good thing) and being very helpful about trying to get us to learn from Malawi,) they try for cross-learning and they don’t give up.”

The following are examples of evidence of capacity development that builds on national experiences and takes them to regional and international levels:

- FORUT has been able to inform the ADD debate at multiple levels on upwards into the international fora. It has supported GAPA,⁴² and together they have lobbied to get alcohol included in the SDGs.
- FORUT has contributed by inviting its partners to meet at annual and bi-annual international/global conferences.

FORUT has also organized south-to-south partner exchanges for the purposes of sharing learning and building organizational capacity. The latter opportunities have been seen as useful, but have been also described as somewhat sporadic and ad hoc in nature and planning.

Partner’s Challenges

FORUT’s Policy Document emphasized its RBM training priority as one, which was intended to enable its partners to plan and report on their work in response to the NORAD insistence on that reporting format.

- The training effort expanded by FORUT to aid partners to use RBM effectively was seen as a considerable challenge. For instance, CWIN/RDTA found it difficult to shift from the reporting on outputs, which had been engendered by the RBM template, and to move to an outcomes focus.⁴³
- CWIN spearheaded the National Alcohol Policy campaign in Nepal, and advocated for the ADD agenda. It was then faced with problems supporting its operationalization. As with other partners, at the field level CR and GE are not seen to be within the mandate of the Ministry of Health. This means that CWIN needs to have additional skills to create more awareness and capacity building across Ministerial silos, and supporting more cross-government protocols.⁴⁴
- In Malawi, the partners are faced with a new stage in the alcohol policy exercise – its implementation. The upcoming need for educational and informational campaigns to shape the strategies for the roll out of the National policy will call for additional skills and expertise. Related to implementation is the need for advice on enforcement of new policies

⁴² GAPA stands for the promotion of effective alcohol policies without influence of transnational alcohol business interests (the large companies try hard to influence individual country policies).

⁴³ CWIN TUKI Partner Summary Report (Volume 2)

⁴⁴ CWIN, IBID (Volume 2)

and regulations while finding ways to manage governance issues such as corruption (given that significant revenues will be generated).

- MAGGA is interested in developing communications capabilities to raise their visibility and to obtain resources, as well as planning ways to document the Happy Family initiative for promotion purposes.⁴⁵ Other areas identified for additional training include advocacy, monitoring and evaluation, partnership roles and financial management.
- The other partner in Malawi, DFM, has been working primarily at the national level on the passing of the National Alcohol Policy, but now is concerned with sorting out its role with its stakeholders and the likely need for review and alignment.
- Additional technical capacities and knowledge will reportedly be needed, including research partnerships, to encourage the governments to implement the new policies effectively where they are being put in place.
- The promotion of evidence-based strategies and policies has been a pillar of the FORUT approach and it is a skill set that partners have needed to grow with respect to ADD issues. FRIENDS in Sri Lanka used such skills to map the prevalence of alcohol, drug and tobacco addiction in its Moneragala region to help create awareness of the issues. Partners vary in their depth of expertise and need for support, especially where they move into advocating ADD policies and regulations at the national level and in some places where implementation of relatively recent policies is a crucial issue in terms of longer term impact.

Challenges within FORUT

Within FORUT, its limited internal resources are seen by both its partners and its funder as a challenge to its ability to establish an explicit strategic training plan aimed at enabling systematic, rather than ad hoc cross-learning opportunities amongst partners. FSD, in Sri Lanka, works on ADD, CR and GE, but with different lead issues, so CR is a leading theme in some communities while GE or ADD leads in others. In line with FORUT's emphasis on the thematic integration of ADD, CR and GE/GBV, a number of partners including MAGGA have expressed an interest in inter-thematic issues training. It was also recognized by various stakeholders that while FORUT has three thematic areas, its expertise is in the area of ADD and this is where its capacity building strength lies.

MAGGA and DFM in Malawi are faced with similar challenges regarding the effective promotion of policy awareness and its implementation. The recent passage of new alcohol legislation has raised the stakes beyond advocacy for a policy into the areas of the development of regulations and their enforcement. New technical knowledge and skills are needed and FORUT's capacity to respond to these recent capacity development needs is not evident. However, partners such as Healthy Lanka have worked on implementation of laws (e.g. NATA in Sri Lanka) and have for instance insured that no tobacco or alcohol is provided to those below 21 years of age.⁴⁶

⁴⁵ MAGGA, Malawi (Volume 2)

⁴⁶ Healthy Lanka, Sri Lanka, IBID (Volume 2)

Strategies to build support within governmental institutions and amongst officials at both the national and local levels were also highlighted by FIRD, MAGGA and other partners as essential to build better lines of communication. Awareness-raising program development and other communications skills are areas where capacity varies amongst the partners and more capacity could be built.

HLAD also noted the importance of government and influencing government structures to ensure the sustainability of ADD, CR and GBV initiatives.⁴⁷ FORUT has partners such as HL and FIRD who have strong track records with regards to sensitizing government officials within multiple departments (Education, NGO Secretariat, Social Services, National Authority on Tobacco and Alcohol) and programs (e.g. Samurdhi, national poverty alleviation).⁴⁸ FORUT could draw on their expertise to help other partners build their knowledge of how to work on policy implementation.

Increasingly partners have demonstrated their unique expertise in one or more of FORUT's three themes and yet they have noted the absence of specific training in their integration. Sustaining the work of FORUT and its partners at each level – locally, nationally and globally – is an increasing concern amongst its partners, especially in Sri Lanka where NORAD is winding down its aid program, and elsewhere when/if NORADs level of resourcing decreases. Partners are asking for support to maintain their operations or in some case to increase their levels of activity (especially in responding to growing opportunities in countries with recent legislation). It is not evident that partners have been coached in ways to approach other sources of funding or to raise revenues to enable them to become more sustainable. Capacity will need to be built by the partners in these areas and FORUT's planning may need to respond to this need.

ANALYSIS

Capacity Building

As one of FORUT's four strategies, capacity-building is the centre piece of its relationship with its NGO partners in six countries through which it shares its world-class research and core ADD expertise. Uniquely, it is not seen as a one-way street, but is explained as a multi-directional process whereby partners share their knowledge with FORUT and amongst each other. The areas of expertise of the partners vary considerably and thus their training needs differ. FORUT sees itself as the hub of a diverse network linked by a shared view of development as being holistic and grass-roots driven.

Strengths

It is clear from the research and the interviews that FORUT is considered by NORAD and WHO to be top in the ADD field. It is this ADD value-added above all that it brings to its partners and to national and international organizations in this field. Its bottom-up participatory and inclusive approach to development is also valued by its partners and FORUT has grown its

⁴⁷ Healthy Lanka, IBID (Volume 2)

⁴⁸ Healthy Lanka, IBID (Volume 2)

credibility based upon its links to the communities served by its partners in six Asian and African countries. FORUT understands and has built on the fact that its partners have their own area specific expertise on a variety of rights-based approaches and strategies.

FORUT has supported capacity development within its partners as they incorporated ADD into their development agendas at the appropriate time and place. It understands that ADD cannot be addressed as a stand-alone issue and evidence from its partners indicates that when ADD is addressed as a development issue and integrated with other related issues (CR and GE), it is more likely to be accepted and dealt with by the community.

The need to respond to the reporting requirements of the funder NORAD has been recognized by FORUT. It has made strenuous efforts, most recently at its Bangalore partners meeting to equip its partners with the capacity to use an RBM reporting format. Although the RBM approach to reporting is seen by FORUT and its partners as inflexible and inadequate to tell the full story associated with their work, the capacity to use it is being built and is a work in progress. Recently FORUT has begun to explore the use of outcome mapping and UFE as complementary reporting approaches to RBM in order to tell the full story of its work.

The evaluation process has also confirmed that FORUT's practice of partnership is seen to be equitable and meaningful and consequently is a positive platform for knowledge-sharing and capacity-building. FORUT as a funder of its partners, nevertheless encourages them to stay focused on their rights-based priorities, while inserting the ADD agenda into their work in an appropriate and complementary way. The key stakeholders, FORUT's partners, share a commitment to a comprehensive development approach aimed at systemic change through an empowering process.

Its role which is appreciated by its partners as a hub of a network of rights-driven organizations has meant that FORUT has played a dual role of supportive ally and funder, as well as a catalyst and facilitator of an ADD agenda within a comprehensive development approach.

It has also built a well-developed capacity to use its ADD research and network of partners to advocate within national and international fora to create new agreements, protocols, laws and regulations. It has effectively introduced its partners into these discussions at the international level within organizations such as WHO, and has equipped them to deliver their messages effectively and with the credibility they have brought with them from their practice in the field.

Partners Challenges

The challenges of using an RBM approach to reporting are noted elsewhere in this report, but it is clear from the discussions with partners that the relevance and utility of this work was difficult to accept and tough to incorporate into their organizations. Even with FORUT's support to build their capacities to use RBM, many partners have struggled with the narrowness of its indicators and its outputs fixation.

Recently the passage of new ADD related legislation such as in Malawi has accentuated the importance of having the capacity to support governments and their officials as they enter a new development phase – implementation. This challenge extends to the need to expand the technical knowledge about ADD by government officials, many of whom are charged with the responsibilities of adopting new policies and creating appropriate regulations and enforcement. Partners will also need some form of capacity to deal with the relentless pressure from the commercial lobby groups; as a WHO representative mentioned, the ‘commercial determinants of health’ are a reality. Partners are being called upon to support governments and institutions in operationalizing the new laws and regulations to avoid stagnation of efforts. While it is early days for FORUT and its partners to respond, it is clear that this is already an area needing more capacity development.

The evidence indicated a lack of a country level platform, with Sri Lanka being a case in point. There were no examples of partners interacting to share achievements, methods or exchange skill-sets. This means that they are dependent on FORUT to initiate such exchanges, which in turns limits the capacity development potential among partners within a country and a region.

Alongside the implementation issue, partners have pointed out that there is a further challenge associated with governance and the need for enforcement of new policies and regulations while dealing with issues such as corruption (as revenues are generated). Partners have taken steps to respond within the communities they serve by setting up local alcohol (control) committees and by promoting policy awareness of the new laws and regulations amongst officials. However, more capacity is needed to respond to these new challenges and new opportunities are needed for partners to share their experiences with each other and with FORUT.

Challenges within FORUT

FORUT's human and financial resources are limited. The Program Department has a small core staff team of six to design, plan, implement and account for a complex program in six distant developing countries with eleven diverse partners. Its team also undertakes ADD advocacy and reaches numerous national and international organizations. It calls for building on competent evidence-based policy and community-based research credibility. FORUT is also faced with increased demands from its partners for capacity building in a range of areas (e.g. training, communications, implementation, governance and sustainability). However, its main funding source NORAD has been indicating closure of its assistance in Sri Lanka, as well as an overall reduction of aid funds and for FORUT a narrower focus on ADD where its expertise is greatest.

The capacity-building role of FORUT has been stressed in its 2016 Policy Paper and by its partners as being a cornerstone of its relationships and value-added. To date, it has placed emphasis upon ADD research and expertise, as well as its RBM training initiatives, all of which inputs have been appreciated by its partners and stakeholders. However, new challenges and new times mean new demands and call for additional capacity-building responses, as well as explicit strategies.

The challenge for FORUT is to maximize the use of its current resources to respond to its partners demand for new areas of training. Without an explicit training plan, its partner meetings, exchange visits and knowledge-sharing events will remain ad hoc and repetitive. Its partners are accumulating experiences related to policy implementation and policy governance that will become a resource if that knowledge is shared strategically.

FORUT has ADD and advocacy expertise on staff, but lacks staff focal points for CR and GE that are two of their three identified thematic areas. Its partners in the field possess this knowledge and its transmission to other partners could form part of an identifiable training plan. Capacity building as one of FORUT's four strategies would become more explicit and clear for its partners and funders.

It has become evident that FORUT has found communicating the complexity of its mandate and its contributions to its partners and from its partners very difficult. It has been impeded by the imposition of an RBM format, as well as a cautious approach by FORUT to telling their full story. Its current Theory of Change does not make that task any easier and it appears that Norwegian representatives within the countries which FORUT works, as well as other officials also have difficulty understanding the country-specific program strategies and implementation.

In the evaluation team's experience, organizations tend to have a de facto communication way of doing things, and oftentimes it is not expressed explicitly in a Communication Strategy. FORUT is very much in this situation, and there may be scope for some capacity development for it and its partners, one that integrates evaluation and communication planning.

5 CONCLUSIONS

The evaluation of FORUT's work on alcohol, drugs and development, child rights and gender equality came at the mid-point in its current 2014-2018 program period. It was shaped by FORUT's choice to use a Utilization-focused Evaluation (UFE) framework. This approach invites a participatory process with FORUT staff and partners as evaluation USERS, or owners of the evaluation design. The evaluation has been framed by the USES that its USERS jointly defined for its findings.

FORUT defined its intended USES of the report which are summarized as follows:

1. **Strategically**, as a means of revisiting and potentially revising its overall Theory of Change;
2. **Conceptually**, as an assist to future project planning with a view to promoting greater integration of the three thematic areas to obtain greater results;
3. **Practically**, whereby FORUT and its partners could improve and systematize their efforts to build capacity and maximize learning for results;
4. **Concretely**, as a way of identifying future priorities and directions for the next framework programme and consequent discussions to obtain NORAD support.

It is noteworthy that both FORUT and its partners produced evaluation USES that were well aligned, along with Key Evaluation Questions (KEQ) that allowed for further attention to some issues at the partner level (e.g. confirming outcomes). This is evidence of a significant mutual understanding and meaningful partnership.

The ultimate success of the UFE process will, however, be measured in terms of the level of actual use of its findings and conclusions, and of the process whereby an evaluation way of thinking becomes internalized and capacity is built. The UFE process, fully applied, often necessitates considerable mentoring and support to the USERS, especially those at the grassroots. This can be a time-consuming process. There were limits to the availability of resources and as a result, even though the majority of FORUT's partners were visited, the time spent in the field, in communities and in mentoring the USERS was quite limited. Time constraints notwithstanding, the process was hugely valuable and informative. The bulk of the data that was collected was qualitative, so without time for further research, secondary data was used to triangulate the findings. A succinct Partner Summary Report has been prepared for each of the ten partners (of 12) visited (see Volume 2).

Right at the outset, it is important to state that the evaluation team was uniformly impressed by the breadth and depth of the work underway, as well as the innovations exhibited by FORUT's partners on the ground. It is within this overall assessment of the multi-level initiatives taken by FORUT and its diverse partners that the findings are presented. The goal of this Report's conclusions is to strengthen the capacity of the key stakeholders and to enable them to undertake future planning within a funding environment that is increasingly challenging. The Evaluation Report and its accompanying Partner Summary Profiles are also meant to assist FORUT and its partners to tell the full story of their contributions to the

communities in Africa and Asia within which they work – a largely untold one. It is meant to support FORUT in charting its way forward and to sustaining its commitment and innovation.

5.1 THEORY OF CHANGE

USE – Strategically, as a means of revisiting and potentially revising its overall Theory of Change (TOC) (to obtain improved outcomes).

FORUT's current Theory of Change depicts a linear trajectory with themes and strategies that are linked with stakeholder groups and flow into four areas of change. The components are connected by arrows that do not explain its **story clearly**. More noticeable, is that it does not profile the important **part that its partners play** in their strategy to promote ADD – their core mandate. It is a statement of their **vision and values** that do not appear central to explaining what and how FORUT actually delivers.

The evaluation findings are clear that the full story of FORUT's work and its unique equitable and meaningful partnerships are not captured in the ToC. For instance, the **diversity of its approaches on the ground**, as well as its **flexibility to adapt** to a range of contexts, cultures and circumstances are not featured. The same can be said about how each **partner has own its unique 'take' on integration** of the various themes; one that is contextualized and, also, relates to their own interests, skills and capacity. **FORUT and its partners are a Team** that understands it is vital to "**start where people are at**" as a key strategy. Thus, it has also been difficult to recognize, value and convey the innovation emerging from the work of its partners. This is a process that is supported and encouraged by FORUT's comprehension that promoting ADD must be a strategy which is piggy-backed upon other development priorities and service delivery, especially that of CR and GE.

Results-based management favours a view where programs are seen as discrete units with associated indicators. It is particularly weak at capturing theme integration or complex and emerging processes. The ToC may reflect the influence of its requirement to report to its funder using an RBM approach which the evaluation found has severely handicapped FORUT's ability to communicate the breadth and value of its work, as well as the full range of its significant outcomes and innovations.

RBM has its place as a reporting mechanism, but in the case of FORUT is far too narrow and superficial and 'output'-oriented to be sufficient. It needs to be supplemented and there are indications that FORUT is moving towards Outcome Mapping and Most Significant Change as two reporting and assessment approaches that will go a long way to helping it report its full story. This evaluation has also shown the power of participatory methods that give voice to youth, women and men, so their views on change are recognized.

Several gradients of outcomes have been roughly identified in this evaluation. Facts are not enough here, and stories are important, especially where there are important unintended outcomes to report that go well beyond the minimum deliverables – FORUT's commitments –

and consequently make the investment of time and resources by FORUT and its supporters more cost-effective and valuable.

It should be noted, as the section on integration below indicates, that the challenges faced by FORUT supported projects go **far beyond simple changes of behaviour**, they extend into the area of **changing cultural norms** such as those affecting the role of women in society and its economy. As such, **they need to be viewed from the perspective of modelling and sustaining changes in societal values and well-established practices**. Thus, strategically, they **cannot be seen as short-term commitments** for as the evaluation findings indicate, lacking a longer-term involvement, the needed changes will not continue – **the winding down of its funding in Sri Lanka will jeopardize years of work** and will set back the desired changes which will impact women and children in particular. With a clearer story, FORUT and its partners will be able to assert more effectively **the need for continued resource commitments** both to NORAD and potentially other international partners and funders.

There is a further dimension to the implications of limitations of the ToC and those have to do with the important role that FORUT and its partners play in **policy advocacy** – locally, regionally, nationally and internationally. FORUT's *raison d'être* is to promote change in society whereby alcohol and drugs "*do not jeopardize people's safety and human potential*" (2016 Policy Document, page 3). Its credibility to promote such changes rests upon **two important pillars** – its **world class research and knowledge**, as well as its **understanding of the practical realities** and challenges faced by its partners at the grass-roots within the six African and Asian countries where it works. **Its partnerships in these countries are essential and its willingness to work with their priorities first and to add on ADD when and where appropriate, must be sustained if its advocacy effectiveness is to be maintained**. This continuing engagement is all the more important as **multi-national alcohol companies and lobbyists** fight to extend their influence into the developing world which they see as a promising new market irrespective of the damages that alcohol has been shown to inflict on poorer populations. Now more than ever, FORUT's capacity to work on the ground while challenging the alcohol industry is needed.

5.2 INTEGRATION

USE – Conceptually, as an assist to future project planning with a view to promoting greater integration of the three thematic areas to obtain greater results.

Understanding FORUT's use of the concept of integration is a significant challenge, one that this evaluation has begun to unpack. In its 2016 Policy Document, the term refers to integration of many dimensions including the four FORUT strategies and its three thematic areas (ADD, CR and GE). This depiction of integration suggests that all three thematic areas and four strategies receive simultaneous attention and use within its projects and by its partners. Such is not the case and it misses the careful strategic use of a specific theme used by a partner as its entry point into a community. So, for instance, CWIN in Nepal uses an empowerment model with girls as its lead program, while in Sri Lanka RAHAMA uses GE/GEE. Importantly, each partner

has chosen the most appropriate entry point to fit the context and FORUT has supported this adaptation due to its proven developmental value.

Integration thus means different things to different partners and results in different strategies on the ground. To a certain extent, the term has been diluted by its multiple variations, which are –oddly enough- a significant but hard-to-convey plus. However, there is another aspect of the interpretation of integration that refers to the organic interconnection between the three themes. As one interviewee put it succinctly: *“The integrated approach is only when FORUT and others look at alcohol as a development issue.”*⁴⁹ While each partner is usually defined by its strongest area of expertise, (in CR for instance) FORUT supports partner initiatives to link the themes and to introduce them organically into the partners work, be it service delivery, advocacy or grass roots empowerment. Thus, in many projects, FORUT's mandate to introduce ADD is piggybacked onto the ongoing work of its partners who do the heavy lifting. FORUT does however, directly support its partners with ADD policy and advocacy work in Malawi, Zambia and Sierra Leone, especially when they are visiting these countries and can meet with Ministers and officials, as well as when holding seminars and workshops.

Each project is therefore unique in its thematic focus and inter-thematic linkages – and is pragmatic in introducing how they are integrated, to what degree and when it happens. FORUT's flexibility in this regard has enabled its partners to integrate the three themes and the various strategies appropriately, and not uniformly, and has avoided imposing its ADD mandate. It is clear from the findings that ADD cannot be addressed as a stand-alone and that it needs to be combined with other themes to be accepted by a community.

There is a further different dimension to integration that refers to local, regional, national and international scales; a form of vertical integration. FORUT works at one or all of these levels with its partners, especially when connecting grass-roots knowledge to create effective advocacy of ADD policies. The evaluation also found that integration of partners' efforts within each of FORUT's targeted countries was occasional and not explicitly strategic. While partners were brought together by FORUT at international meetings, there was no explicit strategy evident to link efforts within each country, although some partners did so informally (though in Zambia and Malawi there was evidence of this happening). The apparent absence of country-specific strategies as part of an overall FORUT plan meant that it was difficult to explain to in-country stakeholders and potential allies how the various initiatives were co-ordinated and complementary.

Once again, this gap made the FORUT story hard to tell and made it appear lacking strategically. The importance of having a full understanding of the opportunities and pitfalls presented by this approach to integration became clear during the evaluation. As part of the reworking of future ToCs, there are opportunities to clarify the concept and its ramifications within FORUT and with its partners, especially if it is to be fully understood by key stakeholders and funders alike. It was suggested by some of its partners that FORUT should focus specifically on training

⁴⁹ Interview with Zambian, Phillip Chimponda

in 'integration' if its implications for innovation are to be fully explored and communicated in future. The Partner Summary Reports illustrate some of the pieces of the story grounded in the fieldwork and they are available as background to this report.

5.3 CAPACITY-BUILDING

USE – Practically, whereby FORUT and its partners could improve and systematize their efforts to build capacity and maximize learning for results.

Capacity-building is an essential ingredient which FORUT consciously provides and which is emphasized in its 2016 Policy Document as one of its four key strategies. It has multiple aspects and levels of involvement. Uniquely, it stresses the two-way nature of the capacity-building process – from FORUT to its partners and importantly, from its partners to FORUT. The first focuses primarily on the provision of technical assistance (TA) and knowledge sharing on ADD research and expertise, as well as training on reporting and RBM methods. Its partners share evidence of their fieldwork and innovations that equips FORUT with enormous credibility, especially in international fora.

The evaluation found that there are additional areas that needed capacity-building attention from FORUT to strengthen future results. Firstly, given the importance of integration as a focus of FORUT's work, many partners identified their interest in having training session on what it means in practice, how to tackle its various dimensions, and finally how to communicate its value to other in-country stakeholders. There is also a need to assist the partners to establish consent protocols to ensure the safety and anonymity of the children and youth involved in data collection. Where these were not available, evaluators provided a standard protocol for obtaining consent. This is an important procedural gap amongst many of the partners – they do not have a standardized protocol to work with children. With CR as an important priority, there is an opportunity to develop one as soon as possible.

A further capacity-building need identified, pertains to additional ways to support and grow the role of government in ADD. There were calls for training on developing greater awareness amongst officials of the issues so that they can go beyond just developing policies to strengthen their capacities and commitment to deliver effective ongoing services to their needy populations. Supporting governments to implement new policies was a way of complementing versus just supporting government actions.

Planned capacity-building at the country level as a strategy which could create more effective and more formal country platforms to enable greater inter-partner co-ordination and co-operation, was also identified as a need. It may help communicate the work of the partners within their respective countries with the potential to better inform NORAD through the Norwegian embassies, as well as to attract additional funders and technical partners. There is an opportunity to explore the development of a strategic platform in each country as part of a sustainability strategy by promoting FORUT's work and its base of supporters. Naturally, it is not up to FORUT alone to build this capacity. A national FORUT/partners platform will

encourage mutual partnership arrangements such as sharing of their expertise in CR or GE. FORUT describes itself as the hub of a network and as a facilitator of the ongoing process – one that has the potential of being made more explicit and strategic to encourage its partners to improve and systematize their joint efforts for capacity-building and mutual learning, as well as on determining its impact to date.

5.4 FUTURE DIRECTIONS & PRIORITIES

USE – Concretely, as a way of identifying future priorities and directions for the next framework programme and consequent discussions to obtain NORAD support.

The fourth evaluation USE was forward-looking, and it is the focus of this summation. The use of the adverb 'concretely' conveys a central conclusion: this collective work is a gem in the rough whose value has not been captured or shared adequately; yet there are concrete opportunities to build on the achievements. It is clear from the evaluation findings that the work FORUT and its partners is doing is highly valuable, so the focus of this part of the Report is on strengthening and sustaining the work for the longer term. The preceding paragraphs have pointed out many of the future directions and areas requiring priority attention.

- 1. Theory of Change:** There is enormous potential for variations of FORUT's **theory of change** that could better reflect the actual work underway with its partners and the strategies being utilized as well as its place on a continuum of change. This evaluation has pointed at the features that are central, and merit inclusions in future versions. There is room to capture the underlying assumptions and the context-dependent factors that enhance or limit the work of FORUT and the partners. As part of the reworking of future ToCs, there are opportunities to clarify the **concept of integration** and its ramifications within FORUT and with its partners. Moreover, a ToC should be seen as a living document, a reflection of how change happens – as conditions shift – that adds a significant communication value.
- 2. Communication Strategy:** FORUT exhibits a *de facto* **communication strategy** that does not exist on paper. There is value in explaining the mechanism (communication purposes, audiences, methods and media preferences, opportunistic response to windows of opportunity, etc.). FORUT's communication 'way of being' is evident in its respectful approach to partners, in its advocacy efforts at various levels, not to mention the parallel work by partners in their context. Making clear what works and the role of its partners can be part and parcel of telling this complex story.
- 3. Country Platforms:** FORUT has facilitated interactions among partners in countries and regions. There is scope for explicit development of **country specific program platforms** to support the coordination, planning and cooperation amongst its country partners, as well as for sharing of resources and skills to open up the opportunity for new partnerships, so as to interest new funders.
- 4. Capacity Building:** FORUT is being approached for additional **capacity building** to help its partners build greater technical capacity in its three theme areas, their integration, as well as on ways to assess and report on their outcomes. With limited resources

available to FORUT, there are opportunities to facilitate greater inter-project sharing of expertise on a planned basis, and also by approaching new partners willing to share their knowledge.

5. **Evaluation:** FORUT is already exposing its partners to **additional approaches to evaluation** alongside its RBM. The exploration into Outcome Mapping is timely, especially since this evaluation has documented 'gradients of outcomes' that are compatible with the approach. There is an opportunity to combine capacity development in evaluation with communication and future theory of change variations.
6. **Sustainability:** FORUT and its partners are dependent on NORAD for its ADD work and there is scope to broaden the variety of partners and new sources of funds. With demand for FORUT's help increasing, its limited supply of human and monetary resources is a significant problem. It already operates with a skeleton staff in Norway, thus the work of FORUT and its partners is extremely vulnerable. Telling the story better is a sustainability issue for vulnerable people that FORUT and the partners seek to assist: the investment of the last 20 years has yielded significant outcomes, but discontinued support means the loss of a momentum that can change lives.

ANNEXES

ANNEX 1: SUMMARY OF EVALUATION USES AND KEY EVALUATION QUESTIONS

Annex 2: SUMMARY OF DATA COLLECTION METHODS

Annex 1: Summary of Evaluation Uses and Key Evaluation Questions

FORUT established four USES and several interrelated key evaluation questions (KEQs). The partners formulated some USES that were similar, though not always, and there was wider variation across their KEQs. Figure 1 summarizes the FORUT uses. In layman's language they aim to revise the Theory of Change, develop projects with more integration, identifying priorities and focus areas for future, and improving capacity development.

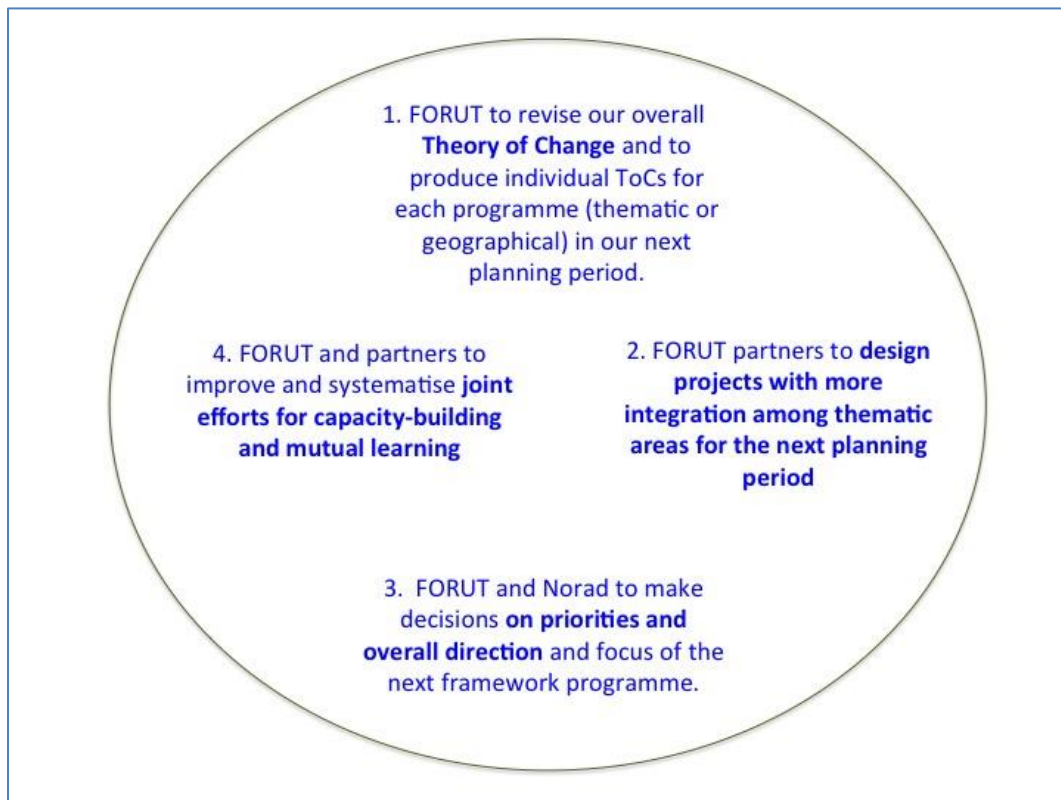


Figure 1: USES formulated by FORUT

In Figure 2 the evaluation team includes the six KEQs that were associated with the four USES. They place emphasis on **service delivery**, on the extent that partners have address **inter-thematic integration**, on the **challenges and advantages** of integration, and on the extent to which integration **contributed to impact**. They also focus on **advocacy** at different levels, and on **capacity and competence outcomes**.

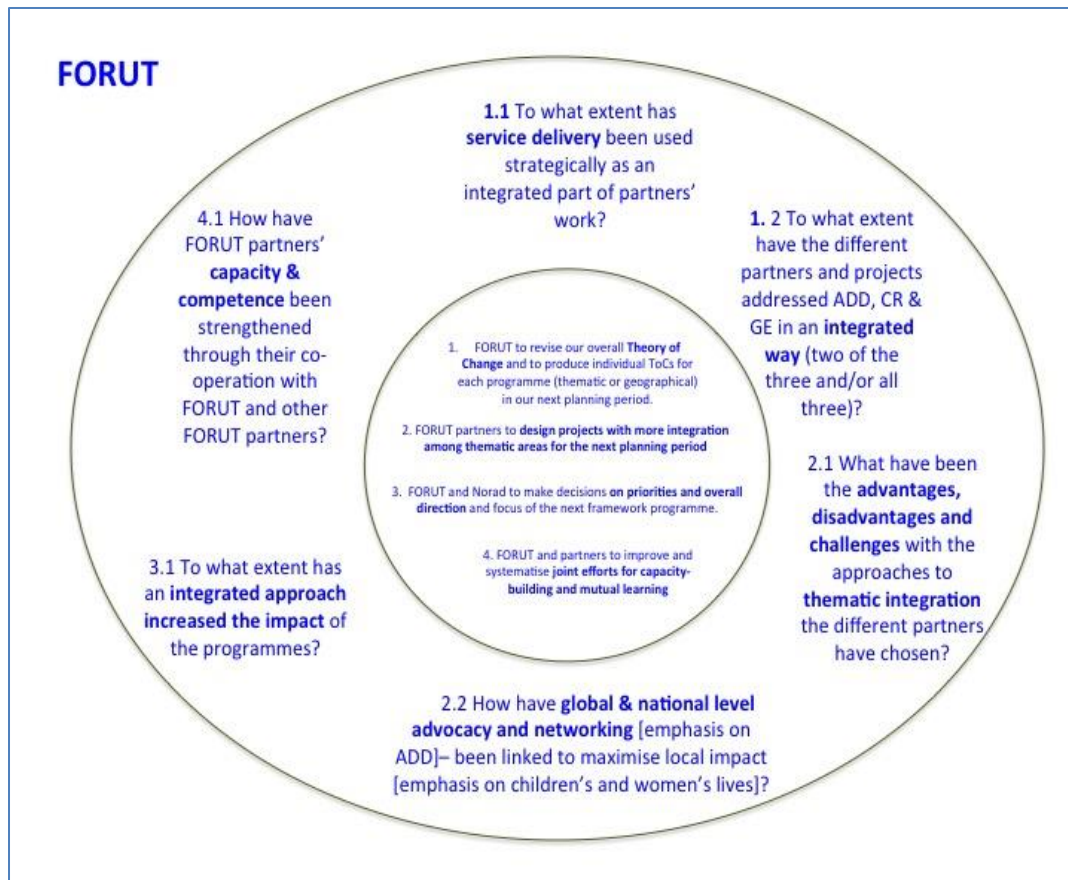


Figure 2: KEQs formulated by FORUT

Figure 3 provides a summary of the uses proposed for Nepal (CWIN, TUKI) and Sri Lanka (FRIENDS, FIRD, HLAD, RAHAMA) together. The key words (highlighted in bold) are: program design and planning, verifying outputs and outcomes, understanding effectiveness and sustainability, and the value of integration.

The overlap with FORUT's USES is mainly on integration, outputs and outcomes that are components of a Theory of Change, and design and planning. The use related to effectiveness and sustainability is less clearly connected to FORUT's though it can be associated with a Theory of Change.



Figure 3: USES for Nepal and Sri Lanka (combined)

In Figure 4 the team presents the KEQs for Nepal. They note an interest in integration, in effectiveness, in changes in perception and behaviour, and in advocacy outcomes,

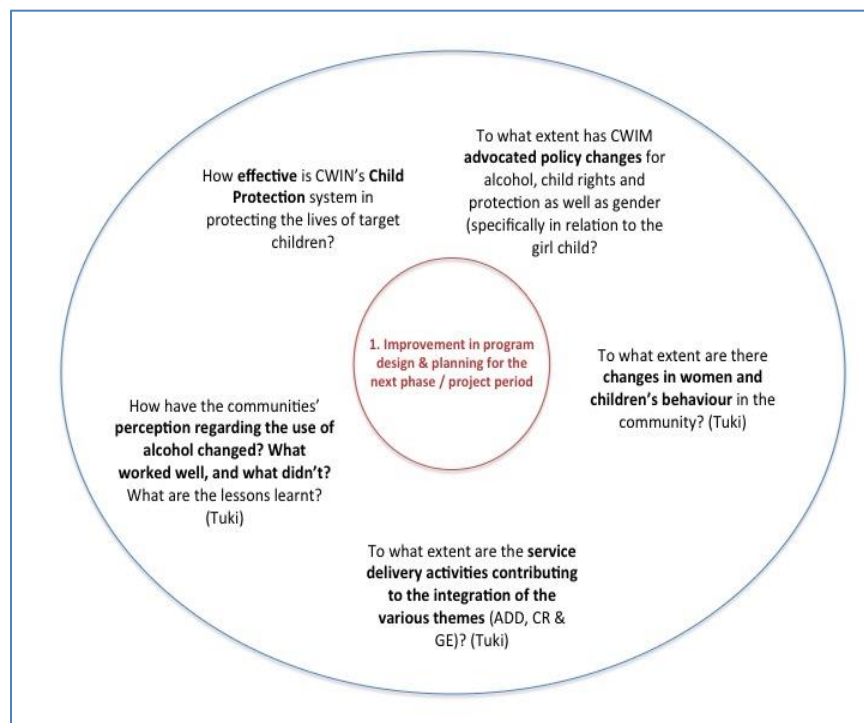


Figure 4: KEQs for Nepal

Figure 5 provides the KEQs for Sri Lanka. The 15 KEQs are also a reflection of the larger number of partners. The evaluation team notes attention to integration, to advocacy outcomes, to the outcomes of the 'community empowerment model' and the 'facilitation centre model'; and to verifying changes in livelihoods, behaviour, and women's lives.

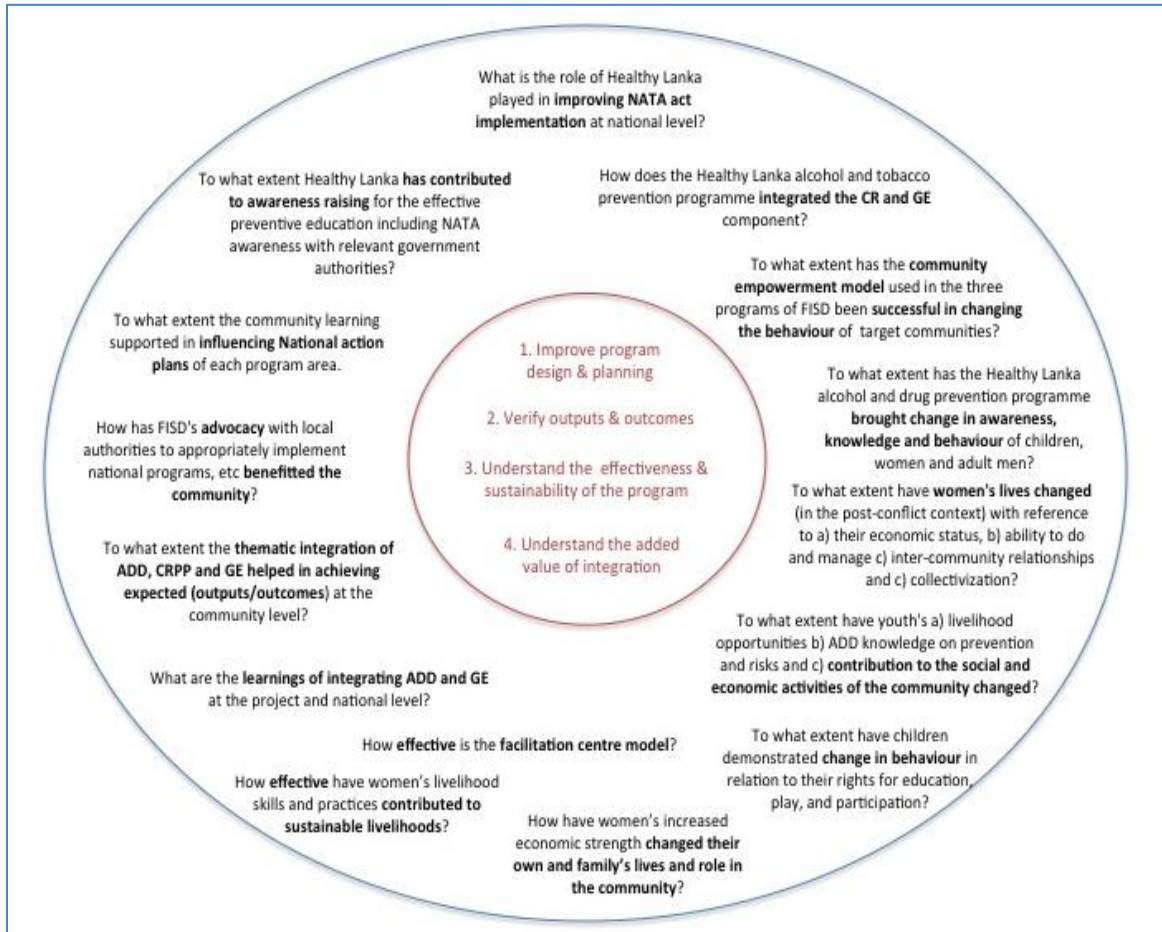


Figure 5: KEQs for Sri Lanka

As is described in the section on Methodology, the Nepal and Sri Lanka partners developed their uses and KEQs first and were then shown the FORUT ones. While they chose to stay with their original ones, there is a confirmed overlap with the FORUT uses, with many of the KEQs narrowing down towards partner-specific interests, especially around confirming a variety of outcomes. In the case of India and Malawi, the partners were first shown the FORUT drafts and they then developed their own.

Both partners in India decided to work with the FORUTs uses (in one case with minor changes), yet they developed a different set of KEQs. Figure 6 provides the KEQs developed by APSA. The team notes emphasis on different aspects of integration and its contribution to impact, attention to service delivery as the vehicle for integration, several questions on the level of contribution of the FORUT partnership to the outcomes, and an interest in both enabling conditions/factors, and barriers/limitations in the context of work. A KEQ that was not raised

by others pertains to the alignment between the program and government and donor priorities.

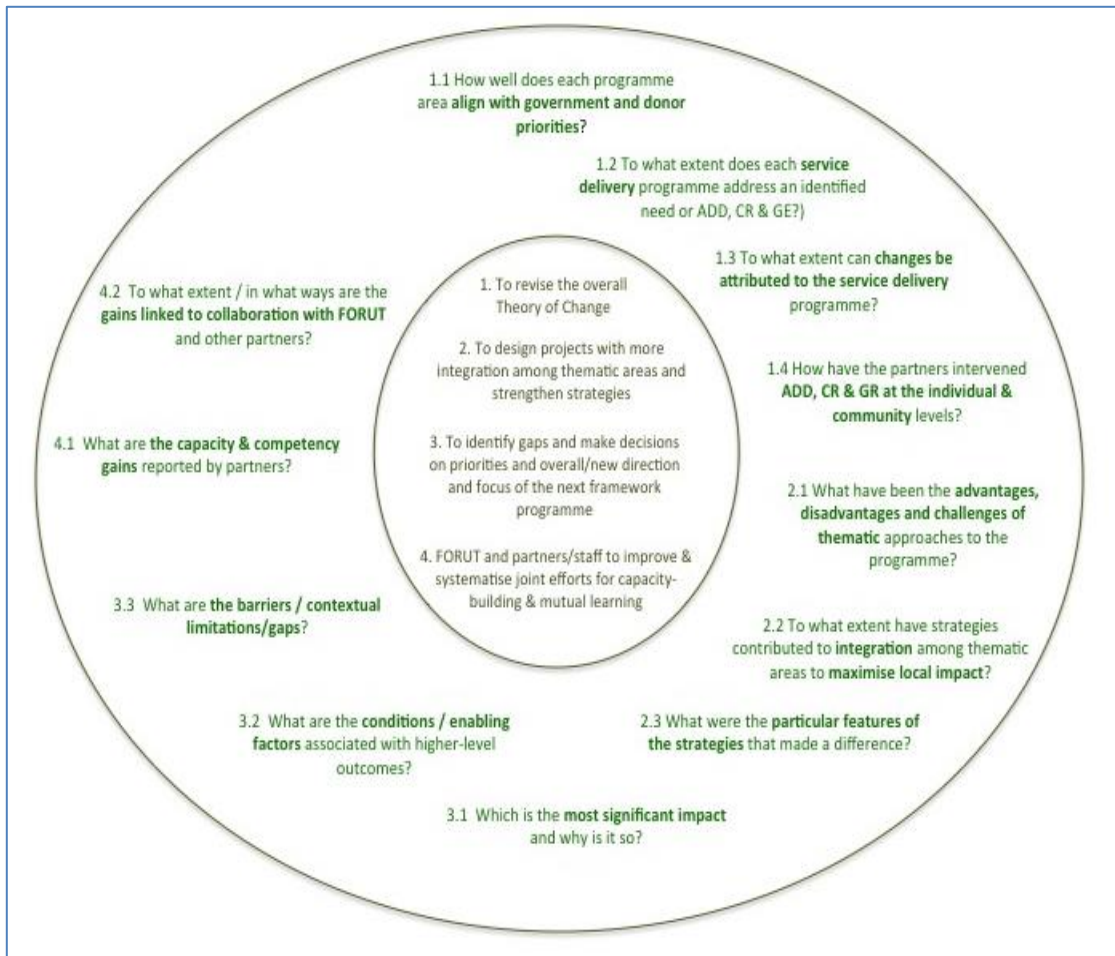


Figure 6: KEQs for APSA, India

Figure 7 provides the KEQs for CWC, India. The team notes emphasis on a rights-based approach, and on its participatory, integrated and comprehensive dimensions. They also note attention to partnerships, to advocacy outcomes, and to capacities and competencies.



Figure 7: KEQs for CWC, India

Figure 8 provides the USES developed by DFM in Malawi. The team notes two uses related to financial sustainability, one on impact, and one on bringing together policy, research, communication and advocacy.



Figure 8: USES for DFM, Malawi

Figure 9 provides the KEQs for DFM. The team notes emphasis on outcomes and impact, much attention on policy outcomes and follow-up, an interest in capacity building outcomes, and particular interest into financial sustainability. In this instance, reference was added to FORUT-inspired questions on the impact of integration, and to the extent to which they interacted with MAGGA (the other Malawi partner).

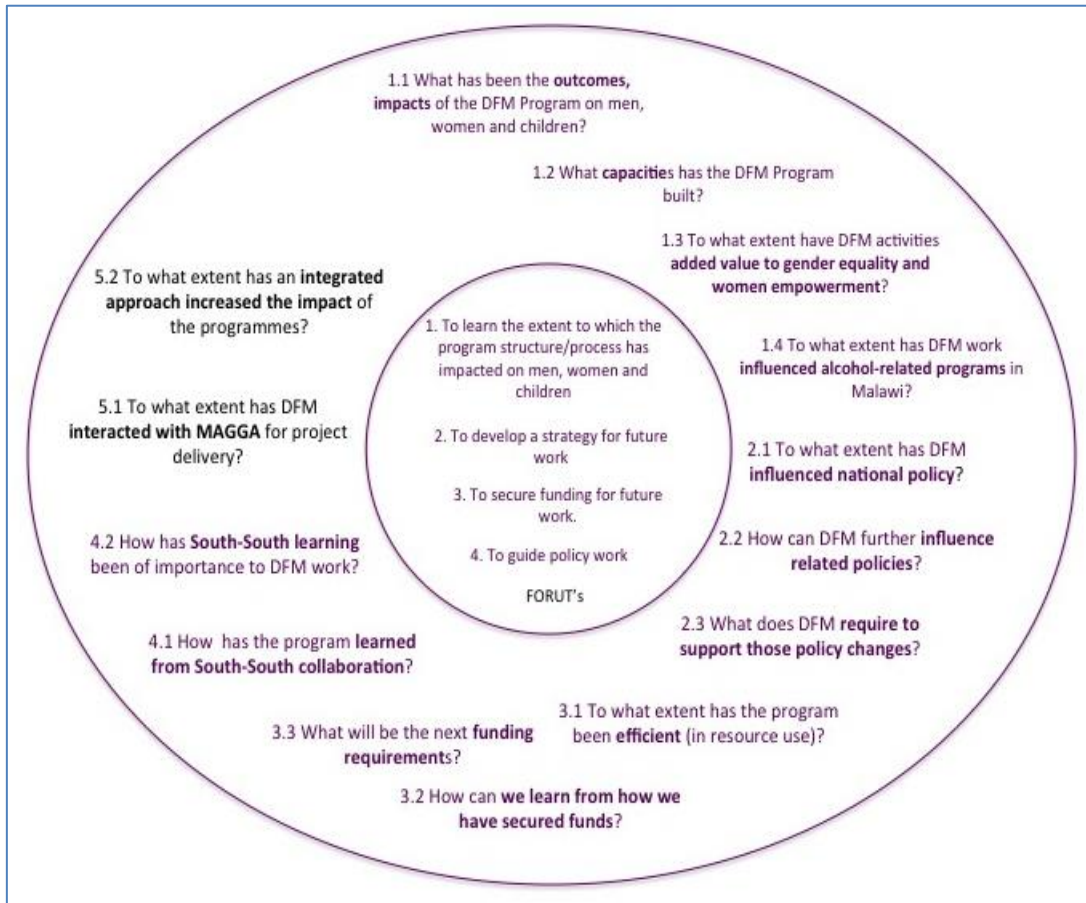


Figure 9: KEQs for DFM, Malawi

Finally, Figure 10 provides the USES and KEQs for MAGGA, Malawi. The uses focused on institutional capacity and impact of ADD on the program. The first use led to KEQs on capacity gains through the program, gaps and weaknesses, and benefit of working with local partners. Integration focused on ADD addressing GBV and CR, and on impacts. In this case there was interest in verifying how stakeholders had been engaged. As with DFM, a question on the extent of the interaction between the two was included.

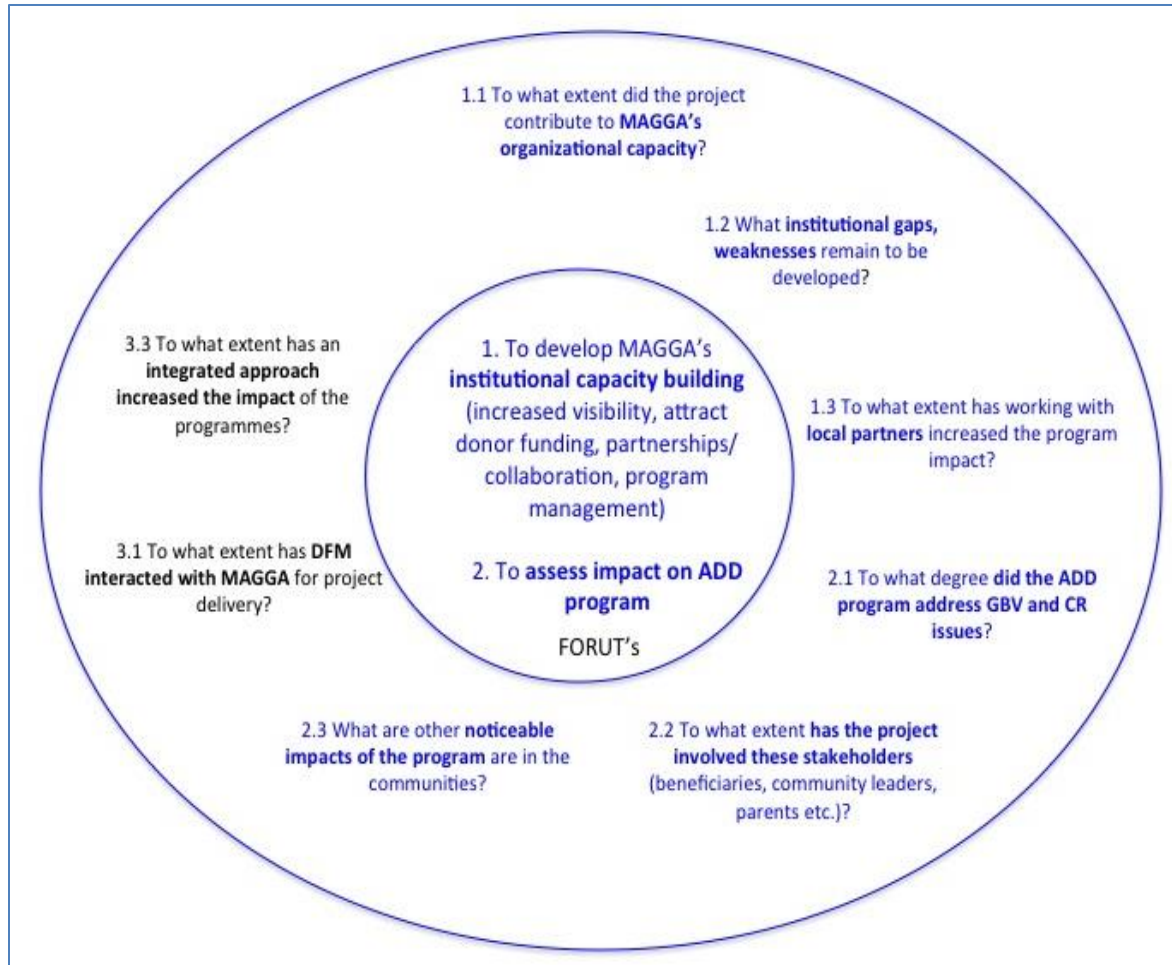


Figure 10: Uses and KEQs for MAGGA, Malawi

Annex 2: Summary of Data Collection Methods

Country - Partner	In-Depth Interviews (staff & clients)		Focus Group - staff		Focus Group - clients or stakeholders		Participatory tools		Participant observation	Remarks
	# of events	type of participant	# of events	# of participants	# of events	# of participants	# of events	# of participants	# of events	
NEPAL - CWIN	3	2 govt officials, 1 board member	1	12			3	42	2	participatory tools with children
NEPAL - TUKI			1	4						
SRI LANKA - Rahama	1	govt official	1	13	3	58	1	13	1	FG combined participatory activities
SRI LANKA - Friends	1	agric officer	1	20	4	42			1	
SRI LANKA - FISD	2	2 govt officials, 1 network	3	20	4	42	3	42	1	
SRI LANKA - FISD			1	4						FG with govt officials
SRI LANKA - Healthy Lanka	1	2 govt officials	1	25	2	24	2	41		
SRI LANKA - Healthy Lanka			1	18						FG with govt officials
INDIA - APSA	10	24 various	3	13	3	17	3		4	3 life stories
INDIA - CWC	3	various stakeholders	3	14	6	15	3			presentations
MALAWI - MAGGA	3	2 staff, 1 district officer	1	5	1	11			3	FG with stakeholders included local headmen & bar & brewery owners

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Country - Partner	In-Depth Interviews (staff & clients)		Focus Group - staff		Focus Group - clients or stakeholders		Participatory tools		Participant observation	Remarks
	# of events	type of participant	# of events	# of participants	# of events	# of participants	# of events	# of participants	# of events	
MALAWI - DFM	3	2 staff, 1 Min of Health	4	17	1	29	1 SWOT			2 FGs with staff, 1 Knoma Synod, and 1 NCA
GLOBAL - FORUT	3	4 staff, 1 NORAD								Staff in Norway
GLOBAL - partners	2	GAPA, WHO								
Advocacy - Zambia	2	partners								
TOTALS	34		21	165	24	238	15	138	12	