

End-Term Evaluation

**INTEGRATED COMMUNITY LIVELIHOOD
DEVELOPMENT PROGRAM
2013-2016**

**MYANMAR
10739**

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1. EXECUTIVE SUMMARY

1.1. BACKGROUND

The Salvation Army (TSA) was implementing the Integrated Community Livelihood Development Programme (ICLDP) in the time frame of 2013-16 using external funding of US\$ 0.8 Million from NORAD, TSA Norway, Iceland and the Faroe Islands Territory, TSA Switzerland, Austria and Hungary Territory and TSA Australia Eastern Territory in TSA Myanmar's five districts; Tamu, Kalay, Matupi, Central and Southern. The overall development goal of the program was to increase the resilience of communities by strengthening livelihoods systems of families, and to strengthen management and leadership capacities in the targeted communities and in TSA in Myanmar.

It aimed to improve the quality of life through community capacity building, income generation, clean water, home care for 2700 families in 90 targeted communities. The project included HIV, capacity building and gender as crosscutting components. The project worked through Village Development Committees and Self-Help-Groups. The project used the holistic approach of the sustainable livelihood framework and the integrated mission concept of TSA, where TSA played the vital role of strengthening capacity of its brigades, multiply and replicate these skills to communities secondarily targeted

1.2. SCOPE OF PROJECT REVIEW AND EVALUATION

As this was the last year of the project period (2013-2016) it was important for The Salvation Army to carry out an evaluation of the project that was implemented to assess the efficiency, effectiveness, outcomes and impact based on the intended objectives, and also to learn from this experience for future programming. This evaluation was highly important for learning and developing the next phase of the project, and it was not an end in itself, but should be viewed as a learning experience. At the same time, Salvation Army representatives held the responsibility towards the individuals and communities which TSA served, and Digni and NORAD of ensuring the fulfilment of TSA aims.

The evaluation was to consider all aspects of the project; concept, design, relevance of the project and implementation modality. It assessed how the strategies were gender balanced and appropriated for both men and women. The evaluation was to make recommendations in the light of strengths and weaknesses identified.

The evaluation had the following principal tasks:

- Assess the project design in terms of relevance to the overall development situation at the national level, relevance to national strategies, and to beneficiaries
- Assess project management structure, reporting and monitoring systems, and the extent to which these have been effective
- Assess implementation and performance of the project in terms of producing the expected outcomes
- Assess the sustainability of the project activities and outcomes
- Provide recommendations for improvement based on lessons learned.

The evaluation assessed the following questions:

- Project Relevance
 - To what extent are the objectives of the project relevant to the context?
 - To what extent are the objectives of the project relevant to national priorities?
 - Are the activities and outputs of the program consistent with the overall goal and the attainment of its objectives?
 - Are the activities and outputs of the program consistent with the intended impacts?
 - Was gender equity integrated within and promoted by the project?
- Project Efficiency
 - Were activities cost-efficient?
 - Have the actual resources used (all inputs such as activities, material inputs, community inputs, staff time etc.) been appropriate in quantity and quality to achieve the objectives?

- Were objectives achieved on time?
- Was management consistent and appropriate in quantity and quality to achieve sound implementation of the project?
- Project Effectiveness and Impact
 - Has the project achieved its objectives?
 - What were the major factors influencing the achievement or non-achievement of the objectives?
 - What impact has the project made on the lives of the beneficiaries?
- Project Sustainability
 - To what degree can project components continue after donor support ends?
- Recommendations and lessons
 - What can be improved in terms of management and implementation (at all levels and departments involved) to increase impact and efficiency, and better demonstrate evidence of results?
 - Where should the suggested focus be in the coming four years in order to build upon the impact, relevance and sustainability achieved through this project?
 - In what way could the project activities continue when external funding ceases?

The evaluator(s) used qualitative methods to answer the research questions. The key elements used by the evaluator consisted of the following:

- Desk studies of relevant project key documents; including the application (Project Proposal), financial and narrative six monthly progress & annual reports, mid-term evaluation report, etc.
- Field visits and interview with beneficiaries (focus group discussions, transact walk, visiting SHG institutions, local markets, factories and transporting materials linked with project portfolio)
- Interview with staff, both group interviews, discussions were used: 6 questions directed to project staff and volunteers (SWOT, most significant changes, TOR and actual performances covered, number of beneficiaries reached, future programming and advices) that answers were obtained few days after the meeting
- The baseline and internal evaluation reports were analysed and included as comparative impact of the project while drafting the report. Revisions were made by the program coordinator; afterward the final report was designed and completed

1.3. SUMMARY OF FINDINGS

The project was found relevant in health promotion of hygiene and sanitation, awareness of general health, reduction of stigma and discrimination of HIV towards migrant most vulnerable population there, facing the realistic income to foster children education and strengthen infrastructure of business, backed up by cross cutting GAD (Gender and Development) gender disaster management skills.

Project activities were seen as effective to reach its objective 1 and 2, whereas objective 3, 4 and overall goal of community resilience were regarded as more related to ongoing mission approach making it too early to measure during this project term. However, much behaviour intentions and community commitments were seen in the field.

Costing budgeting of project activities and assets were seen efficient, while community labour and materials inputs should be put into the 20 per cent community contribution in self-help groups (SHG) and community project initiative (CPI). At the activity level, HIV continuum of care was seen as highly synergized in strong support of Wesley hospital with significant reduction of stigma, where staff recommended nutrition to again supporting the most needed families. Community SHGs were most applicable mechanism under the overall control of village development committees (VDC); its microloan recipients were evident of starting new ventures, generating champion business choices, run regular meetings, repayments and saving for expansion, share kitchen and child schooling expenditures. CPI could successfully establish bridges, ponds, wells, roads, graveyard fencing lanes, reinforced walls, oxygen tanks, school furniture and teacher houses, play grounds, water container tanks, tube surface wells, hand and machine pumps, saw mills, craft and furniture workshops while only few initiatives destroyed by last year flooding. Few assets were seen destroyed such as thatch

covering latrines and old water resources in Dala (from other projects). Commitment, ownership and sense of belonging was clearly seen while meeting the communities showing impact, with precise set up of guidelines, Standard Operating Procedures, Terms of Reference with careful monitoring reporting illustrates sustainability when funding stops. Conflict of ethnic groups was not directly seen though Chin National Front and Tamil Nehru insurgent presence nearby, as sparks influenced by ongoing tension and fighting in other areas of country in Shan, Kachin and Rakhine States.

Lessons were seen at late start of physical activities in second year, focusing objective four only at fourth year, bulldozing training, construction and livelihood support activities depending the leftover budget late in project. Complexity of resilience infested by cross cutting themes, lack of Maternal, Newborn and Child Health (MNCH) planning and drug prevention over the HIV continuum, staff role confusions amongst paid project staff, mission soldiers and volunteer communities when skills come the other way round.

1.4. RECOMMENDATIONS

The recommendations were made to outsource an additional funding from locally existing external funding pool, to raise visibility and collaboration with partner agencies, to understand and involve more with district level administration and development plans, to prepare back up plans pursuing the potential staff exit and compensation mechanism over paid project staff working full time for mission work.

The main recommendations for this project are:

- Continued focus on project assets such as water and sanitation, health awareness, learning from disaster and preparation is important.
- Vendors need to convert into more stable business line by forecasting the marketing trend and consumer behaviour than expanding on popularities.
- Youth mobilization to be incorporated into hospitality, resort, eco tour, income generating factory. Youth are in need to involve at camping, training, outside job hunting and enterprising stages as income generating job will lead them into careers. Project will work to link trained youth volunteers with local job hunts and opportunities.
- In regards to gender it will be important for the project to think male led livelihoods in some areas: Trishaw, motorcycle, taxi services, male nurse, Security securing role and new business ventures. To assign two female and one male, for female dominant activities (training, nursing, community health work, activities with Wesley) when staff touring into remote areas.
- Improve computer, English, Dialect, Communication, and other technical skills over existing skills.
- Creating Watsan in Matupi is more complex, and project should consult with Township development council engineer if necessary. Planning for water resources is important as to get baseline water levels seasonally.
- SME, First Aid, Food security and nutrition, Art and Craft are important both for project services and microcredit activities
- Clinical understanding to Oxygen supplier SHG is important as they should be able to explain how to use and things to be careful
- Grocery supplies not to overlap livelihoods as two vendors to loan program choose selling chicken in the same small market
- Yeni township should be advocacy and good practice site.
- SHG Kalay village founded solar run photo copy and desktop services as idea champions, thus enterprising is choice - piloting hand craft livelihoods might be possible
- Seeding of sesame, peanuts for Kalay farms or from Shan State should also be considered
- TSA to participate more at township district state meetings, see more of rural development department, GAD, other faith based donation and activities, at least other Christian derivatives
- It was recommended to further plan primary prevention of stimulants and drugs, and just include few on overview of conflict in Rakhine, Kachin and how impact on neighbours

2. ACKNOWLEDGEMENT

The evaluation team, which composed of principal consultant and two TSA core staff accompanying all the field visits, would like to thank all TSA RHQ staff including the Salvation Army Myanmar's Regional Officer, Major Bo Jeppsson and Regional Director of Women's Ministries ,Major Christina Jeppsson, Project Officer, 5 Project Coordinators, RHQ Programme officer and program support staff for kind sharing and contribution to complex program, project and mission works. The gratitude also goes to all field communities; CHWs, auditors, accountants and bookkeepers, nurses, drivers, cleaners, volunteers, counsellors, midwives, members of SHG, VDC, village administrators, elders, municipal engineers, leaders, youth coordinators, women heads, 10 and 100 HH heads, PHIV communities, their family members, children, teachers, school boys and girls, teenagers, ethnic ladies who posted for opening ceremonies and WADS, girls danced at performances, chairs and panels during the session, paediatricians physicians nurses GAD Wesley hospital staff, rural development officials from NPT, AHRN for their kind contribution to make this report collection and compilation.

3. LIST OF ACRONYMS

ADB	Asia Development Bank
AHRN	Asian Harm Reduction Network
AMI	Aide Medicale Internationale
BI	Burnet Institute
CO	Country Officer
CPI	Community Project Initiative
CMP	Cutting Making Packing
DA	Daily Allowance
DDWM	District Deputy Women Minister
EU	European Union
GAD	Gender and Development
GEN	Gender Equality Network
IDEA	International Democracy Empowerment Agency
IDRC	International Development Research Centre
ICLDP	Integrated Community Livelihood Development Project
JICA	Japan International Cooperation Agency
LIFT	Livelihoods & Food Security Trust Fund
LM	Lower Myanmar
MINA	Myanmar Interfaith Network on HIV/AIDS
MCC	Myanmar Council of Churches
MNCH	Maternal Newborn and Child Health
MoU	Memorandum of Understanding
MRCS	Myanmar Red Cross Society
MSF	Medicines Sans Frontier
NAP	National AIDS Program
OD	Organization Development
OI	Opportunistic Infections
OSF	Open Society Foundation
PSI	Population Services International
RHQ	Regional Headquarter
RPO	Regional Project Officer
RYCO	Regional Youth Coordination Officer
SHG	Self Help Group
SMT	Senior Management Team
ToR	Terms of Reference
TSA	The Salvation Army
UM	Upper Myanmar
UNDP	United Nations Development Program
VDC	Village Development Committee
WADS	World AIDS Day Session
WBG	World Bank Group

4. INTRODUCTION

4.1. BACKGROUND TO THE PROJECT

The Salvation Army presence goes back to colonial time when Myanmar was under British Ruling and its administration annexed into India. TSA seemed occupied in the eastern and northern area of India and expanded its mission starting into Western Districts of Myanmar hence settled in Tamu and Kalay Districts and northern Chin Hilly areas. It opened its churches, dormitories, orphanage, women home, libraries or mission offices down into lower Myanmar as appropriate. Tachilek and Taungyi are its presence in Shan State. It has been one of the effective missions such as Baptist, Methodist and RC.

Late in the eighties, it planned specific projects in close linkage with mission approach and implemented four years projects scoped at poverty reduction, promotion of livelihood and health while its youth related activities equipping the intellect, faith and education status of children too. Its services teach people towards compassion, loving kindness and faith to God and welcome members to commit services in line. The Salvation Army is structured like military, its regional officers are responsible for country and wife being the minister for women affairs. It focuses at empowering both the couple and hence affects the whole family.

TSA Norway had with Norad funding previously supported community development work in Myanmar with a focus on HIV/AIDS, most recently through Digni project 10409: "Myanmar Community and Home-Based HIV/AIDS Programme" from 2008-2012. TSA Switzerland and TSA Australia Eastern have likewise supported community development work in Myanmar over a period of many years, most recently through PD2973 – "Integrated Community Development and Livelihood Improvement Program", from 2010-2012. The current project had evolved out of this previous partnership between TSAM and the supporting territories. An internal mid-term evaluation was conducted at the end of 2014.

The project used the holistic approach of the sustainable livelihood framework and the integrated mission concept of TSA. It aimed to improve the quality of life through community capacity building, income generation, clean water, home care for 2700 families in 90 targeted communities. The project included HIV, capacity building and gender as crosscutting components. The project worked through Village Development Committees and Self-Help-Groups. The Salvation Army Corps played a vital facilitation role in building relationship, capacities and support-framework to provide quality implementation. The expected outcome of the project was a sustainable and less vulnerable livelihood system for the targeted families. It would also strengthen TSA to become active partners in strategic alliances and networks.

The project focus on both tangible effect of establishing grass root community groups, income generating slots, increasing safe water sources, improving the quality of demand and supply side of health annexed by dialoguing with community to identify needs and in particular focusing the PLHIV continuum of services. Its gender sensitive projects effectively structure on the diversity, equality and equity, and invest at capacity building of communities (known as resilience) in access of its mission services and its staff. It will continue investing another long term projects gaining on the practices, success and lessons by 2017 forwards.

4.2. PROJECT REVIEW METHOD

The evaluator used qualitative methods to answer the research questions. The key elements used by the evaluator consisted of the following:

- Desk studies of relevant project key documents; including the application (Project Proposal), financial and narrative six monthly progress & annual reports, mid-term evaluation report, etc.
- Field visits and interview with beneficiaries (focus group discussions, transact walk, visiting SHG institutions, local markets, factories and transporting materials linked with project portfolio)
- Interview with staff, both group interviews, discussions were used: 6 questions directed to project staff and volunteers (SWOT, most significant changes, TOR and actual

- performances covered, number of beneficiaries reached, future programming and advices) that answers were obtained few days after the meeting
- The baseline and internal evaluation reports were analysed and included as comparative impact of the project while drafting the report. The program coordinator made revisions; afterward the final report was designed and completed.

The evaluation team consisted of external consultant, to ensure independence so as to be able to take a fresh and objective view of the project, as well as secure good evaluation skills, and in addition, two key in-country personnel who accompanied the consultant on each project evaluation visit. This ensured that the evaluation was participatory, that relevant local information was not overlooked and that the evaluation visit was culturally sensitive to the particular local population. Translation from Chin to Myanmar language was made as required by RPO and accompanied staff on site.

The evaluation consultant undertook field visits and interviews on its own and gave its independent recommendations, but worked in close collaboration with the Project Officer Major Lalroengi and the Project Coordinator in the relevant districts. The team reported to The Salvation Army Myanmar's Regional Officer, Major Bo Jeppsson. On the introductory meeting day and debriefing day, the Regional Officer was not able to participate facing heavy duty of operation, preparation for WADS activities and forthcoming Christmas break. The presentation powerpoint was emailed instead.

5. GOAL, OUTCOMES, AND TARGETS

5.1. GOAL

The overall development goal of the program was to increase the resilience of communities by strengthening livelihoods systems of families, and to strengthen management and leadership capacities in the targeted communities and in TSA in Myanmar.

5.2. OUTCOMES AND TARGET OUTCOMES

<p>1. Strengthen existing livelihood coping strategies of 2,700 families within four years through:</p> <ol style="list-style-type: none"> a. a micro-credit scheme b. HIV care and prevention c. improved access to drinking water d. community project initiatives 	<ul style="list-style-type: none"> • The programme has supported community organisation and has strengthened community cohesion and resilience for future disasters. • The already existing livelihood activities have been strengthened and quality of life has enhanced in the communities. • A significant positive impact on the livelihood for at least 75% of 50 sample families.
<p>2. Empower communities through the establishment and coaching of VDCs and SHGs, and continual monitoring through leadership trainings, networking and partnership capacity building.</p>	<ul style="list-style-type: none"> • 40 new VDCs and 100 new SHGs established by 2015 (50% are women members of SHGs); Mentored existing 30 VDCs and 112 SHGs by 2015
<p>3. Increase awareness and encourage positive and culturally sensitive values related to gender equity, HIV prevention, and health promotion among young men, young women, girls and boys in all target communities throughout the duration of the project.</p>	<ul style="list-style-type: none"> • Increased awareness in communities of HIV/AIDS and other health issues; greater gender equity; youth are empowered and confident
<p>4. Build leadership and management capacity of TSA and communities through the strengthening of organizational management systems, upholding accountability within TSA-Myanmar, systematic and consistent use of project management tools throughout the project's lifetime, networking & partnership.</p>	<ul style="list-style-type: none"> • Capacity of TSA Myanmar to contribute to community development is strengthened; greater accountability and improved governance in TSA Myanmar; staff members and volunteers have greater capacity to contribute to community development activities when external support ends.

6. FINDINGS

6.1. GENERAL FINDINGS

TSA was identified as an international faith based organization having the clear mission statements. It has registered in Myanmar as faith based organization to Ministry of Home Affairs, organization registry section. It has long history of presence since 1915 and possess an extensive process, program and involvement

Its integrated community livelihood project was development program and built from experience of local ownership. Digni 10409 continued when funding reduced and leadership changed. Its volunteers were important, participatory role. Its activities tailored to local context Upper Central and Lower.

Internal Evaluation of this ICLDP project in 2014 summarized that its quality and quantity as satisfactory, it processed an extensive staff and SHG youth community trainings. IT improvement was recommended for data integrity updating and consistency. Its senior staff highly involved at both management and capacity building. The yearly reports displayed activity completion and success. It was evident that blood donation, HIV care support, fellowships helped out vulnerable communities

This evaluation found the program resources were sufficient; in particular its budget was well enough. Staffing and volunteerism was found good enough. Project term of four years was regarded as enough for integrated mission approach. The community ownership and accountability was well seen and male volunteerism was recommended to be seen in hardship and emergency areas

Community institutions were back bone of successful program, as led by community volunteers. It was found that SHG surely more active than VDCs. The communities there mainstreamed their commitment and interest to the project activities they committed. Establishment, strengthening of VDCs and further establishment and capacity building of SHGs to commit community projects was seen as good example of community partnership and good practice role model. The contribution they made towards their own developed community project initiatives as 20% amount decides quality of end product. People affordability to cash contributions decided the quality and longevity of the assets whether latrine of house owners and rented. There arises the question of whether their labor, local raw materials to be amounted at 20% contribution as people involve collection of raw materials, input of physical labor and fixing whereas discarded old water hand pumps in Dala township identified the example of choice and sustainability.

The Kalay district visit and meetings expressed as most active and organized and its back up and infrastructure strong e.g. Wesley. It was brainstormed on whether TSA activities should more partner with Key Area Players. One big village visited and met with VDCs was village of 2,000 HH which had 60 churches left the thought of whether there were commonalities to synergize, unite or partner so that the benefit could emerge from differences. Some issues were identified as need such as reporting and networking requirements.

HIV continuum of care was found as satisfactory, SHGs and both mission/project staff actively participated. One thought was considered on whether project to support funeral services as there was no activity line. Church based outreach, psychosocial support, pre posttest counseling, follow up, home and hospital visit, referral for HIV testing was regarded as one best counseling and testing model. It was argued that this program to sell out, should map and link with HIV mainstream players (NAP, MSF, PSI, AMI) and equip staff involvement towards strengthening and expansion geographically and programmatically.

Literature studies reflected that youth from one district identified fund raising and awareness raising as long run strategies to community development. In one FGD, the participants denoted constituent difference, male and female dominance 19:1. The general overview of the project was that objective 3, 4 not measurable on SMART (specific, measureable, attainable, realistic and timely). The presented case stories strongly highlight success of the community small projects and rise in living status of the recipients of loans. There were some cases of non-repayment on loans and it was found as associated with prior understanding of contract and fundamental principles. The project population size was different by location and location, that HH size different at villages and townships. Communication gap on different TORs of SHGs, CPI, VDC, microcredit schemes was found as

members of these initiatives were rather silent ethnic groups who run simple way of life, less used to work in the team spirit, majority of them in upper Myanmar and southern Chin are Christians who share much of their lives with God and by nature, they stay away from government departments and services and in particular, national HIV services and hospitals.

Tamu was township of multiple factors in addition to border trading. The project was found as suitable to increase strong and committing volunteers. It should focus more on talent, art, business skills, and language proficiency than other districts. It could be advised that future projects should cover both areas (Tamu and Kalay). The report pointed out the complex situation of these areas, enhanced community mobilization the project paved yet thus multiplier effects will be continued than the other players.

Dala was township of migrants long time ago as well as recently. It was an area of heavy HIV infestation and water accessibility differs from ward to ward within the same township. According to the discussion with SHG members, it was decided that more microcredit coverage to residents. It should also sponsor more children to schooling. The TSA was in endeavor to open project office and mission and it was advised as the yard the sooner the better, because of the escalating land prices (It was advised so that the river crossing bridge project was coming soon and TSA was in the situation to open the mission, thus advise from market point of view, it is true that not strictly related to the evaluation). In the light that Digni not allowing sponsorship of children, the TSA should source funding from locally existing international funding and integrate this activity into the program, visiting orphanage home, dormitories in Yangon and many other regions supporting this idea.

Matupi was found through the reports as site necessary for nutrition fortification and vitamin supplement. The land is higher thus in terms of water access, gravity piping may effect. The site is poorest of the poor thus the logo of TSA should be modified, "Hope is an additional word, than care, community, change". Its SHG should work for corn, rice, food security and TSA should link with services by WFP, WBG, JICA. The program there should invest more on children. Training and capacity building of staff and local resident SHG members was highly relevant. The mission concepts of Christianity, compassion and loving kindness were appropriate. It was particularly noticed at SHG home visits, follow up and pretest counseling experiences, both witnessing and KIs, assorted in the interpersonal communications, reassurance and home care.

The staff, soldiers and junior soldiers' temptation to pioneering to new job postings, promotion and moving to new geographical post, overseas careers was highly possible. Talented staff, volunteers and even communities were seen as well as noticed in the evaluation, and it was simple advice to whether and how to retain them with the mission and the projects. It is relevant to staffing, system, synergy components of project, thus relevant to the evaluation. The local staff and communities were necessary to promote local understanding of government services, administration and private ventures e.g. eco tour in some part of Chin State such as Tedim, trading (of beans and Chinese goods to India), resort and hospitality services.

6.2. STRENGTH AND WEAKNESSES OF THE PROJECT

6.2.1. STRENGTH OF THE PROGRAM

- SHG led proposal were reviewed by Upper and Lower Myanmar project council as third party
- Mission approach best suit for software development (of community participation, leadership and planning).
- Decision making was seen as more precise at SHG level.
- Female dominance at SHG clearly illustrate gender equality.
- There was extensive community involvement at every step of activities HIV SHG livelihood water furniture microcredit and youth.
- Staff capacity building expanding cross cutting issues, communication skills equipped, thus ready to network than usual.

6.2.2. WEAKNESS OF THE PROGRAM

- Staff salary, privileges as deserved need further attention.
- RHQ was in the position to decide whether staff eligible for microloans. Questions were seen that staff would like to be recipients of the loans, if possible.
- TSA was found as less prepared and responding to the natural disasters and conflicts. There was extensive flooding in both Tamu and Kalay townships that over 2,000 household were relocated by the social welfare department into the temporary camps and low cost housing and new villages were offered to the victims. Mission members were also included in the flooded areas, and RHQ readiness for emergencies as it plans resilience was under question.
- Many discussions and considerations were made such as whether to recruit MRCS brigades for First Aid & Disaster Risk Reduction.
- Underreporting or low profile impacting staff involvement, networking, updating and participation at state regions.
- Audit findings on quality of vouchers, forward planning scores. This is not because of weakness of field staff, rural scenario that even in big grocery stores and fuel stations, the consultant team also received hand written pieces as they do not use and have voucher books already printed, unavoidable at transactions in the field. And forward planning scores are simply M&E indicators they set and delayed to action.
- Role and instrumentality of M&E in the mission.
- Clarity between project staff and volunteers, number against activity workload of project, current Scenario is quality of staff than the quantity.
- Role of microcredit officer to monitor the loans and continuing contract than technical assistance to initiatives.
- Need laboratory equipment to diagnose e.g. malaria, HIV testing.
- Since sponsor activities impacted vulnerable children and HIVs, want this back.
- Half the staff – mission TOR vs JD, TA does not include food cost.
- Risk of drug combination, FA kit and village groceries (Steroids, pills looks same and having adverse effects).
- Youth groups somehow illustrated an interest and emphasis on welfare of village, though they had less role on MNCH, disable, children, elderly, four main social welfare targets.
- Its advocacy to General Administration was seen in few areas such as Yeni township.

6.3. MOST SIGNIFICANT CHANGES

The staff as well as VDC, SHGs discussed Most Significant Changes;

- Significant reduction of stigma and opt out HIV testing
- Increased health awareness and status (sale of commonly used drugs significantly reduced after 2014)
- Behavior intentions and sharp eye on village need
- Benefit of (collective) saving
- SHG model good to mobilize and about size to manage, tackle, meet thus impact
- Mission absolutely suitable for care and supporting HIV and other risk groups
- Schools being good floor to child development (argue TSA not investing properly on children)
- Outreach and participatory community development (though the project is small) give rise gradual promotion of living status and coping (life) skills
- Buddhist fear of being indoctrinated suddenly abolished (experience of southern district)
- Housewives significantly becoming secondary bread winners, with business skills

7. PROJECT RELEVANCE

7.1. CONTEXT

Initial 5 years was necessary to influence and enhance behaviour change of communities in the development context. Four years term seemed a bit less than the required period in general. TSA program met the requirements of the communities, knew what was real situation of the communities in districts, its public sessions could definitely identify these and made proper and consistent plans beforehand. However working development issue in the choreography was possible as mission presence goes back to 1915, its exposure with the communities served as relevant soil for the development integration.

Objective wise views the findings are as follows;

1. Strengthen existing livelihood coping strategies of 2,700 families within four years through:

In the light of TSA program and its US\$ 0.8 million over 4 years, strengthening 2,700 families the project was relevant. While LIFT (Livelihoods & Food Security Trust Fund) financial inclusion program is injecting US\$ 80 million, TSA was extremely relevant already since that big funding pool focused only one issue. TSA program was working on;

- micro-credit scheme
- HIV care and prevention
- improved access to drinking water
- community project initiatives

LIFT is the multi-donor funding program on livelihood where its 4 years investment of US\$ 250M is reaching 3.6 million people, its microcredit services reaching 1 million, 154,000 families are increasing their income and 43,000 HH are getting market information and linkages.

2. Empower communities through the establishment and coaching of VDCs and SHGs, and continual monitoring through leadership trainings, networking and partnership capacity building

Village and wards were basic community structures where Myanmar is unique in terms of having division of 10 household in-charge under the general administration hands. Working with village clans and ward chairman was like working with the most basic channels. Village development committees in many areas are taking responsibilities for health as well. Empowering communities through SHGs was exactly an entry point to activities where specific needs could be achieved following the commitment and interest of the likeminded small group within diverse ward and village residents.

3. Increase awareness and encourage positive and culturally sensitive values related to gender equity, HIV prevention, and health promotion among young men, young women, girls and boys in all target communities throughout the duration of the project

Youth is common target for many development organizations as youth will be future leaders. Action Aid program in Myanmar identify youth leaders in the communities, its fellowship program as core approach to development. Its programs equip youth with knowledge, skills and confidence, facilitate participating community led development processes in villages, and tailor activities to ensure access to rights of people. Ceiling age of TSA youth program was 18 to 25 years, which was in line with National Comprehensive Development Strategy Framework.

4. Build leadership and management capacity of TSA and communities through the strengthening of organizational management systems, upholding accountability within TSA-Myanmar, systematic and consistent use of project management tools throughout the project's lifetime, networking & partnership

Now many local NGOs are investing at organization development and project management skills. MRCS has been investing at community based health, Water and sanitation, first aid, income generation and livelihood areas in 7 townships/districts areas of Myanmar aiming at building

community resilience which will increase stamina over natural disasters, conflict, and inflation. It programs to cover 2,000 HH in an average, to achieve community resilience by integration of crosscutting issues encompassing on health, education, family skills, coping skills, social rights, and gender equity, from the second project implementing year (of total 3 years). Its budget was about US\$ 0.5 million average.

Indicators from project activity plan: spread of numbers in objective 1 and 2 were clear and realistic. In objective 3, networking, consultations, awareness raising and organizing new teams were positive steps along the logic of the program, however its efficiency was difficult to measure, likewise in objective 4, building management and leadership capacity was relevant for TSA as its coverage been quite widespread, measuring its efficiency was an important issue. When things like policies, guidelines, TOR, M&E, reporting, integrating crosscutting issues, code of conduct were installed on the ground of less existence; its efficiency would be measured in terms of mission instead rather than the project

7.2. NATIONAL PRIORITIES

The project is in line with MDG goal 1 and 3. The Constitution of the Union of Myanmar recognises 'right to health' under the health policy as laid down by the government. The Constitution addresses health specifically in several of its sections such as education and religion. Most significantly, it embeds health and care for its citizens in chapter 1, article 17 on improving health of people and including people to participate in making their health care decisions. Other articles that have broadly addressed right to health are 28, 32, 35, 351 and 367. Other documents that support bringing health closer to communities through a primary health care approach and legally upholding public health service are the Governments Health policy 1993 and the Public Health Law of 1972. Small businesses are one of the priorities of national planning and surely part of National Development Strategic Framework by the Ministry of Planning and Finance. Its components were also in line with focus of the Department of Rural Development of Ministry of Livestock at water, lighting, roads and bridges.

7.3. GOAL AND ATTAINMENT OF OBJECTIVES

Water access against availability was big issue in terms of safe drinking water and cropping. Getting financial resources for income generation and livelihood at the small interest rate is blessing in the communities, as they have to pay maximum of 20 per cent to short term emergency monies and initial starts from 5 per cent, sometimes regarded as advance selling of crops beforehand. In rare cases, the vendors were able to reconstruct and repair infrastructure such as building, containers, dwellings, water pipe supply and it was there. HIV was hidden demon in many project areas as migrant resident number was high. Co-infection with tuberculosis is another burden. Stigma used to exist in these communities, at first household members in Myanmar were proud of one working e.g. in Thailand transferring monies back, built new houses, bought motor cycles etc. Then when she came back with illness, they kind of quarantine her in fowls hut, and just use the stick to hand the food and stay away until she died. Communities thus were not bold to go to government services such as National AIDS Program, found no one to consult etc. Community facilities such as lane way into graveyard, bridge retaining wall embankment etc were always community responsibility (of course government takes action, but do not know when and responses were not what they expect) Schools churches and markets were only points they enjoy.

Targeting 2,700 families was wise within TSA coverage districts, as it was feasible, attainable to benefit at least 75 per cent, clearly illustrated in the field visits. Working with VDC was less relevant for some villages where mixed ethnic groups were resided, thus working with diverse culture and dialects simply a challenge. Strengthening capacity of VDC was more appropriate than establishment. It was not a challenge, forming a new entity in the rural setting is changing heading and topics thrown over to already existing administration or social welfare group, traditionally managed by clans. Now clans were converted through the election process to village administrators paid by General Administration Department.

90 microcredit groups (65 in the 2016-18 TSA mission strategy) was good target, though geographical spread was not easy, whether project prioritized how many should exist in which district, or wait community bottom up proposals which probably undermined equity of the whole program. Because TSA 5 districts were extremely widespread thus not proportionate proposals could come from district of Matupi.

Focusing at least 200 women led families enhanced and ensured gender equity and logic of targeting 10 Matupi, 5 Falam, 50 Kalay & Tamu, 25 Central and Southern was not explained in log frame, it pretty much looked like basing on experiences and Corps relative strength across 5 districts.

Planned 17,760 hospital and home visits (370 hospital or home visits per month, 19 per day) were an important element in the frequency of 28,800 psychosocial support (600 psychosocial support per month, 30 per day) many NGOs evident of covering psychosocial supports, pretty much less emphasize at more burdensome and cost intensive support activities (project should plan support activities) Welfare group was more appropriate naming to blood donor groups where blood donors also serving social needs in reality, not donating blood alone. Please realize that support activities such as nutrition was more costly than visiting home and oral reassurance, in reality home visits frequencies were more realistic, and evaluation is concerned that staff including TSA nurses just try to meet numerical targets than the actual effect, hospital visits were also relevant and effective in reality.

Total of 6,000 pre and post-test counselling individuals should clearly indicate whether repeating head counts or different individuals. Risk individual was wise target as there existed a lot of migrant workers. Linking with service providing hospitals was relevant very much. Linking with clinics and medical doctors deserved attention on whether these small institutions were serving risk population or creating further stigma.

Performing at least 1,000 blood testing per year (3.5 testing per day) was ambitious target (it would be easier in the second and third year term and relatively difficult in first and last year).

Targeting 420 follow up depended on data and communication between Corp volunteers and risk communities also influenced by nature of migrating population. Running ToT, replication, conducting home visits and psychosocial support was usual project activities. Upper Myanmar was the starting point of TSA since its entry from India in the olden days, expanding into LM and Central was sound judgment and planning in the project. Nurturing blood donors by vitamin and food was good while there was no blood bank in the government facilities.

As 40 safe drinking water sources provided to 1,000 families was worked out, it was calculated that project earmarked the point to create safe water production and supply for 100 people around (as it said covering 25 families).

250 community driven small initiatives were planned, first project year was only for capacity building trainings and proposal writing attractions, less the last quarter of the project where there was scarcely any activity, only three years less three months resulting at 33 months allowed for community initiatives. 250 small projects against 11 quarters gave rise to 2.3 projects per quarter, less possible to the eyes of the planner. Of course it depended on extent and scope of the projects, yet 1 project per month was ambitious target. It should use strengthening of SHGs instead than establishment, and should focus on SHGs as VDC of village of 2,000 HH and 100 HH would be different in capacity and management span. It had to admit that VDC was first stage connecting point and then the project would work with SHG further down in the grass root. Choosing 320 participants was not impossible.

Measuring an outcome of reduction of incidence in project area was less easy, establishment of HIV SHG and youth based networks was not easy to measure at end 4 years term, as it was early phase organization development. There was no baseline on number and instrumentality, strength of these organization, these were started in first project year hence might have been matured enough, but questioning on how these developed, step by step activities such as advocacy, establishment, capacity building, human resource management etc were not properly memorized by interviewees

Completion report of 6 youth campaign was interesting in terms of forward planning. Extent of established 55 youth team was not easy to measure as youth were back bone and complement of Mission approach where mission is more visible, youth were both program and project activity. Evaluation was only to measure the project outcome, likewise there was no baseline and youth program coordinator was managing country wide youth program all along. It was hard to ascertain which activity belonged to project and program.

It was still too early to measure leadership and management integrity of youth group at end project and should focus after five years (though it was on-going mission approach). Reviewing monitoring

check list, guidelines would only be possible after a while. HR and M&E systems took time to develop and impact rather after ten years timeframe (Consultant had to have prior wisdom on OD and HR system beforehand). Existence of TAG guidelines was good and would further benefit the organization. Where 55 youth teams overlapped with VDC, should it synergize the OD and capacity building of VDC was to be sought, usual that only more powerful CBO in one area would strive.

Documentation and processing of guidelines, partnership, and protocols over community initiatives, blood donors, microcredit, Wat san, SHG, VDC was relevant for structuring and creating TAG, would not ensure their commitment and sustainability when external support stopped. They did not see most of the activities as project, but part of continued support from mission, thus watching whether these software would continue if funding stopped will be hard.

Staff capacity building of project staff was relevant and bonding with staff relevant from human resource aspect.

Facilitation skills workshops of youth volunteers to use community development tools was highly relevant for this program, modules being standardized and tailored to the need also relevant. Developing policies and guidelines for TAG, staff quarterly meetings were relevant; setting up emergency visits on unethical conduct on whether feasible was question in areas like Matupi.

7.4. IMPACT

Objective 3 and 4 are more of the community and organization development software and difficult to measure. It should be shown in the light of the holistic mission approach and achievements, whether activities would consistently linked with outcome was still question as there was no clear mechanism of constructing community development, facilitation skills with other crosscutting areas, another reason was that it took longer than the said planned period to construct community resilience in hardship areas.

The outputs were much relevant to the daily wagers, migrant workers, women led income generating initiatives, community self-help groups where more commitment and contribution was seen (than usual management committees viz village development committees). Organization development stuff was seen and its objectives planned on youth, migrants, risk individuals, women of the most vulnerable groups crosscut with gender and rights, stigma and discrimination, leadership and TAG. Combination of successful establishment of livelihoods combined with crosscutting skills led to resilience of communities, hence consistent with project goals.

7.5. GENDER

50 per cent presence leadership and participation of women vividly planned, gender equity was highly reflected in the project planning. Livelihood support went to housewives (in the majority of fund support) that raised the status of them as contributors to family income, paved their position to shared responsibility of decision making promoted from mere child care, cooking and cleaning. Decision such as shop building repairs and storing rice and groceries came from mothers.

8. PROJECT EFFICIENCY

8.1. COST-EFFICIENT

General budget spread: contingencies set around 10 grand per year could be thought as preparing for natural disasters, other investments 20 grand in first year should spell out, in the operating expenses, salary of SMT senior management team was around US\$250 and basic health staff was around US\$100, very much look like government staff and local NGO salaries, even in local NGOs when projects are installed project staff salaries were higher than this spread sheet. Activities incurred as post disaster support following the government construction and resettlement of affected families in terms of livelihood support and some direct travel cost. The salaries were not in line with NGO rates, and it was discussed.

M&E: no budget for base line data collection, if indicators had been met throughout the project first two years, midterm evaluation should be internal, and end project evaluation should be both quantitative and qualitative. Administration cost only 5 per cent of, flexible enough.

Operation cost, investment for microcredit, community initiative, Wat san were bigger figures and relatively small projects as indicated and share 25 per cent roughly, routinely less than other INGO budgets. Bigger budget was seen in TAG, policy, guidelines, capacity building, awareness activities (though qualitative measures over staff software and OD was difficult to measure), should this measurement exist, one example blood donor group nutrition support activity line was relatively small chunk under operational budget, learning and sharing visit was wise activity to disseminate good practices and deserve well budgeted.

8.2. RESOURCE

Community input was not considered in the project planning, so it should more comprehend. Person time, choosing the range of skills, integrating the HIV continuum of care along with primary prevention, linked with established community based clinical and hospital services, relying on youth, SHG and promoting role of VDC and women, OD focusing at technical, management, financial capacity of rural initiatives were wise planning though role of youth was less reflected in the log frame. 20 per cent of all community project initiatives were taken care by self-help group members, in some cases village development committees and materials such as collection of sand, bamboo, hard wood (in villages adjacent to forest) physical labour, communication and interpersonal skills of member of self-help groups and VDCs was not properly addressed in the reports and group discussions. In fact, community inputs were more than expected.

8.3. TIMELINESS

This program should be five year project in case the planner set four to both soft and hardware investments, as first year of every project be used for start-up, advocacy, recruitment, baseline data collection, orientation trainings etc., thus less involved in actual operation span, four activity years was far more enough. If the planner thought three years to roll out the project activities and investments, bigger proportions in Kalay than other areas, be explained as quite enough. Those who provided services such as home visits, reassurance, counselling, psychosocial support were only concerned that nutrition and some medical support were not continued from third year project, they said it should had.

8.4. MANAGEMENT

According to the responses over the 6 questions in the field and meeting with SMT senior management team, it was visible that RHQ was successful at making activities happen, mobilizing communities as much the logic of the plan, sacrificed its overtime to communicate with UM and Matupi districts, liaised all program staff to tolerate with different pace of districts quite spread out the whole country and mainstream mission agenda. Management was seen as backstopping the mission both as a program and ICLDP as a project at the same time. It sounded SMT monthly meetings served as floor to brainstorm factors, identify issues, raise hardships, and decide actual assignments and delegations on workloads as both routine and ad hoc burdens.

Youth domination was seen at senior staff layer and TSA was a perfect rare organization of only one expatriate involved at both mission and project operational. Female dominance was seen in RHQ and male more seen in the districts. Changing Myinchan and Taunggyi into Matupi and Central area was an interesting action and be regarded that evaluation could only be possible when range of activities plan and operate in these areas (at time of evaluation, there were not pretty many activities related to project), on whether decision was taken right.

Staff highlighted that interactions (in person or phone) and instruction frequencies were high and things to do piled up day by day (once they talked to RHQ and things to do popped up) though it was difficult to judge on whether micromanagement between most senior staff existed or not. Yearly reports seemed superficial, activity based, process driven and other things to report space had not been filled, no mention about management issues. It was discussed from personnel on the meetings that staff turnover as very low [staff capacity was not under doubt that TSA possess good staff, the only need of the project was to balance the different areas; area such as Matupi was hardship (it takes three days to drive down to Yangon and connecting roads itself in Chin was difficult itself), and areas were too spread out, further geographical planning was necessary.

9. PROJECT EFFECTIVENESS AND IMPACT

9.1. OBJECTIVES

Project objective 1 and 2 were achieved. Objective 3 and 4 looked like program objective. Organization development and human resource development targets should be set and monitored on its achievement, but the consultant agree that visibility of leadership skills, number of national functions TSA participate in, advisory role of TSA youth at Myanmar Council of Churches and Baptist Convention, HIV Strategic Theme Groups, role of TSA at national MSE and entrepreneurs association, number of scholars sent to theological society, number of masters and PhDs delivered etc., were hard to achieve. Otherwise, output level achievements would only be seen, and thus program officers such as youth, human resource, M&E, education should be able to set their own targets and measure, further plans on achievements. It was not easy to separate which was project and which was ministry based ongoing program activities in the field.

Number of SHGs formed, number of livelihood and Community Project Initiatives, number of counselling and blood testing etc were planned depending also on existing network and human resource rather than number of affected population and geographical population. Since these two objectives were more qualitative, time limited evaluation of less intensive group based FGDs generated qualitative information which was less possible to be triangulated, personal KIs would be more instrumental to dissect information, reflect the processes out. Comparative evaluation by setting up control organization with this project organization would be more possible, there was a need to define control in evaluation research. One would guarantee that this project in general has been successful.

Community commitment and mobilization was clearly see in the setting up of microcredit, youth, community initiative, HIV awareness and Continuum of Care, Wat san. Capacity and communication skills of staff was found pleasing, and the presence of quality staff in particular areas, such as Dala, covering advocacy, context, technical and planning, was unique strength of TSA as they possessed these niche staff. The staff is a mix of volunteers and paid staff, both committed to roll the ball all seen evident of the whole mechanism being operational on the ground.

Yearly plans shared in general similar quota, geographical spread in ascending order was:

VDCs & SHGs

- Kalay **8&3**
- Tamu **5&2**
- Southern **3&1**
- Central **4&2**
- Matupi **2&1**
- Taungyi **2&1**

Yearly reports, SHG VDC lists certified that these numbers been achieved as established and or strengthened.

Some indicators only denoted different evolution;

- 2013 **420** HIV follow up visits
- 2014 **540** follow ups
- 2015 **360** follow ups

It was understood that these HIV outreach and care activities existed over time since late 90s. That explained higher level of activities could be achieved in the first project year.

- 2013 **30** Community Project Initiatives
- 2014 **60**
- 2015 **60**

Likewise communities needs over toilets, roads, infrastructure on graveyards, Oxygen tanks, small factories could erupt in the first project year, as reports and field meetings mentioned and could double each in next project years. Yearly reports expressed less achieved in 2014.

- 2013 **61** new SHG and **14** new VDCs established
- 2014 **44** SHG and **24** new VDCs established
- 2015 **56** new SHGs and **49** new VDCs established

It was not clear on how higher number of SHGs established. It would be possible if yet established SHGs strengthened in term of training etc. The consultant thought that equal number of SHGs being established would be more logical. It does not matter on how many VDCs would be established as not many VDCs played an important role in the commitment for livelihood

Activities for objective 4 planned only in Year 2, 3, 4:

Guidelines to be produced; it was clear that the planners were sensitive to have guidelines, SOPs and regulations.

- Year 2
 - **HR review;** It was wise for the planner to explain and judge on why staff volunteers and ex government staff as staff assigned for different catchment areas and different burden of duties so that future judgment on how future staff would be selected and employed would be possible
 - **Orientation of guidelines;** evaluation could not find on how existing guidelines were oriented but TOR Classification and Definition all seemed clear and understandable to the field staff and community organizations
 - **Development of systematic M&E;** M&E format was seen but evaluation could not discuss in depth on how emerging M&E impact project operation
 - **Staff capacity building;** staff were allowed to participate ToT from international consultant as well as Yangon based staff to participate partner agency training meeting invitations, shown as effective and enhancing networking and connections
 - **TAG training;** clearly shown as matched with era and staff discussions shown in line with enabled environment instruments.
- Year 3 (in addition to Year 2 indicators):
 - **Simplified staff appraisal;** the evaluation could not find its use as staff layoffs not reported in last three years
 - **SHG trainings;** SHG groups discussed technical management and financial skill building workshops highly relevant and some income generation ideas such as fries soap shampoo making sweets were useful
 - **Psychosocial support training to staff;** Continuum of care was highly relevant – counselling, home based care, treatment of OIs, basic nutritional facts, MNCH were high priorities for communities groups.
- Year 4
 - **TAG continued and guidelines produced;** it was continued education and refresher on existing documents, and streamlining communities groups to engagement decision making and participation
 - **Staff joining courses at Asian Social Institute Philippines;** its outcome was not discussed
 - **Involve network activities and trainings UNAIDS MINA BI MCC;** as mentioned before, it enhanced capacity building, organization development and networking with partner agencies

In year 4, new indicators for end project evaluation innovated amongst targeted 2,700 HH (about the size of 20 villages as the number of household in one village widely varied, 2,000 HH highest was only one model village visited in Kalay district, 100 HH was average village visited in many areas, 40 HH was 3 new relocated village post flooding in Kalay district, 140 HH counted in the ward visited in Dala township in Southern District).

Objective 1 - workplan revised in line with leftover budget (just in last year):

- o **All** microcredit members could save money, **half** the members became shop owners than the paddlers and rented the shops, **fourth** the members getting main income from microcredit (it was

time of completing the targeted activities and all the meetings in Upper Myanmar, Central and Lower Myanmar found that microcredit could promote women's role, participation in sale and marketing of goods they selected and contribute to family expenditure. In many observations in markets, villages member of SHGs became owner of shops in small markets and could explain how they invested construction of physical building, secured security. They explained that since they sold kitchen goods and groceries, no longer need to buy from outside, just cook them. They explained though they also work for seasonal opportunities, the income from shops served as biggest chunk for kitchen, stationery and pocket money for their child schooling)

- **75%** community health members getting safe drinking water and toilets with less incidence of water borne diseases, the interviews with midwives and village medicine shops denoted that there were less orders and buying for seasonal break outs of diarrhoea and fever. Trained nurses from two clinics (Tamu and Kalay) discussed that less malaria cases and loose motions following the CPI drinking water and toilets.
- HIV free **three** blood donor groups available for emergency blood, In Kalay and Tamu, blood donors were stand by for any need of hospitalized and accident cases that they could donate type wise. In Yeni, less donation in the last year since there is another blood donor group coming out (TSA activities only happen when there was a need, thus not compete its role, and thus prepared for another area in the township to focus its resource of pooling blood) thus they prepared to donate when new 25 bedded hospital under construction starts operation.
- **Decrease** discrimination PLHIV and orphans who members into SHGs, through mission network and health education, many interviewees including nurses from Kalay Military hospital and paediatricians, discussed stigma was no longer an issue.
- **New** PLHIV SHG formed in Upper Myanmar and involved psychosocial support, PLHIV SHGs emerged especially in the third and fourth project years, they worked with TSA staff, and encouraged TSA to continue providing nutrition for affected families.
- Income from livelihood enable supporting **75%** of child education, every microcredit member discussed that it was no longer difficult to meet schooling stationery and child pocket money. Over half the members admitted that half the revenue came into infrastructure, it was not clarified that what percentage of children were supported.
- Constructed toilets encouraged community of **improving** life status, the toilets in Southern District were almost damaged as contribution from most poor migrant (residents) was only able to construct thatch and bamboo wall, and many toilets were constructed within TSA mission compound hence seen more as functional use. Apart from that in many villages inspected, it was found quite the work of use.
- Establish **two** day care centers in Matupi, It was discussed that one day care centre was completed there. Establishment of **25** new MC groups in 5 districts: **15 (Kalay, Tamu) > 7(Central, Southern)**. This target was fulfilled according to the list provided from districts.
- Pre post counselling of targeted **280** clients, counselling target was over achieved and testing of **1,680** clients was also achieved
- 3 new blood donor groups happen to donate **100** times, as mentioned before, the donation in Central District did not meet the target as there was new group emerged and took responsibility for demand from Taungu.
- **100%** decrease discrimination of PLHIV amongst those tested, this was hard to say that stigma disappeared, it was wise to say that PLHIV victims were not discriminated from TSA SHG VDC and level of discrimination from communities in general decreased, as TSA project areas were locations of migrants settled in and migrating population.

Objective 2 - outcome CBOs strengthened and community empowered

Indicators – **40 new** VDCs **100** SHGs by 2015 and coaching of total of **70** VDCs and **212** SHGs, at least **200** less literate women strengthened, case studies documented: through the literature review, stories were read in English and diverse group of women were interviewed in all district, they also discussed their experience of setting up groups and falling into trainings. It was pretty evident that **100** rural women equipped with project knowledge and founding the income generating business. Whether 5 VDCs established within last project year was not sought.

Objective 3 - outcome increase HIV and health awareness, greater gender equity, empowerment and confidence amongst youth

Indicators – **25** youth groups supported, more involved, **75%** conducting awareness activities: Youth were seen pretty much as part of SHG activities in ward, (affiliated) primary schools, small workplaces, villages, even operators at erect saw wood cutting cottage. Many active youth blood donor groups comprised of male youth leaders, teachers, graduates where female members lined up during the meetings. The consultant could not find why SHG members of 2 oxygen tank suppliers were adult and elders. The conductors, dancers, master of ceremony, and majority of audience were found all youth in Khampat township WADS. All CHWs interviewed in Kalay township were younger than usual. Many Karen, Chin and Shan ladies posted in ethnic dress for opening of water piping ceremony, WADS and even in white blue TSA uniform were found less than 18 years age. The evaluation could not ascertain that whether 25 youth groups took part in country wide activities. The youth coordinator based in Yangon remarked that youth selects had been active in preaching, educating in both mission and development (such as health and education) and active in sports such as football and track & field. They also involved at outreaching HIV risk groups and many of them coming out of alcohol and drugs despite the escalating spread. The evaluation could not ascertain about 75 per cent involvement.

Activities – **5** leadership trainings to **120** participants, it was achieved, see training completion reports; **2** gender trainings in UM LM was covered. **5** ToT to 5 districts were attended by Corp members totalling 47 participants. Quarterly networking meetings were done in Yangon and in districts.

9.2. FACTORS INFLUENCING ACHIEVEMENT OF THE OBJECTIVES

Late outcome and impact planning for objective 3 and 4 was evident in Year 4. The internal evaluation report recommended the need of in house soft wares, thus revising and planning emphasized at ToT training of trainers, M&E, SOP standard operating procedures, regulations, performance appraisal, TAG transparency accountability governance and Gender equality. Many of these cross cutting issues were attended together with HIV, RH reproductive health, MNCH maternal neonatal child health, human rights refresher sessions. The timing in late third and whole fourth year was worth pointed out at project sense, though it did not matter for mission objectives. It was realized that strategic mission plan of recruiting Corp brigades, volunteers, women ministry members, and further outreach is ongoing and meeting the target during 2016-18 year timeframe .

Last trainings in the project covered MNCH, M&E and other program issues. Reporting formats allowed any other relevant information session to include these. Area coordinators steadily plan monitoring trips opportunistically overlapped important functions to face present e.g. the coordinator based in Taungoo planned to go to Taungyi on WADS world AIDS day event took opportunity to monitor activities in southern Shan. Health themes were taught using communication materials available from district, township health offices.

M&E issues been identified to track progress of the project activities, deadline of activities and whether finance unit could transfer money on time, and whether program was synergy with project. When national program coordinator travelled to the project sites aware to see on indicators and coordinate as necessary. The same applied to area coordinators and included in the report. Reproductive health issues such as family planning and birth spacing were gradually inserted in the counselling and psychosocial support sessions between the project staff and affected married family members thus expand their management and coping skills ahead. Simply issues being discussed were increased, incorporated into how beneficiaries decide.

The project staff discussed TAG and rights issues while their talks tried to empower women participants from SHGs and VDCs. Ad hoc home visits and group meetings also touched on issues. Changes in the media, GAD general administration department positioning into decentralization, government transitioning as democratic institutions were discussed and let communities understand and enhanced their ability to judge. SHGs responsibilities and commitments were addressed, honoured against TOR and achievements thus making these issues more understandable. Involvement of youth at cropping, migration, preaching, celebrations, travel and labour migration into cities and overseas were discussed on its strength, weakness thus more illustrating themes.

Standard Operating Procedures, roles duties and responsibilities, dos and don'ts were also under the review. The vehicle operation hours, duty hours of staff to go to distant villages and night stop facilities if necessary, whether hub site be used (such as Mandalay rather than doing all meetings and functions in Yangon, whether using China made jeep is relevant in Matupi where spare parts

availability was worst, whether to do repair of that jeep in Yangon by driving down from mountains, whether to have mission own plot in Dala while TSA getting more attention and interaction with communities, whether one lady staff alone travel to spread out villages or whether to have accompany, what is next suitable time to draw blood from volunteers, responsibility of guarantors to livelihood programs, whether child protection and social policies appropriate in the rural project setting, how to address gender based violence and redress compensation mechanisms etc were discussed and actions to establish, tailor, renew, revise existing were in progress to avoid personal decisions all the time and what to do when responsible personnel were away. TOR, policy and functions of staff, community institutions, and advocacy and coordination strategies were set up or advised to the staff with ranging context culture and traditions. It should never forget that TSA area coverage stretch out to many States and Regions in Myanmar. Community engagement to enhance participation, planning prioritization and decision making was in its launch only.

Capacity building of communities was successful to meet livelihood needs, disease prevention, generating healthy life styles, number of children to breed under planning, enhanced breast feeding and decrease nutrition deficiencies [regarded that nutritional status of project villages in Kalay were much higher than northern Chin hill villages, and two paediatricians in Kalay confessed that urgent child cases less coming from rural villages during last three years) less malaria endemic villages (some sites in Tamu and Kalay were hard wood and coal producing, Wesley hospital denoted that less forest wooders coming for malaria like chills, blood films with less malaria parasite frequencies)]. Villagers cum members of SHGs were seen less stressed out and happier. The question of building resilience towards disaster, snake bite, burns, skin infections, injuries and accidents, flooding, conflict was another landscape that hint of support and skip was only seen in post flooding resettled new villages, where adjustment to environment (they were relocated to beside the river, thus two families whole bought all the fish from neighbour, marinate and stove sun dried for livelihood, widely found in early morning market in Kalay and Khambut. How project villagers enterprise in border market in Tamu was not successfully observed, as consultant team arrived there late. The consultant only noticed grocers communicated in Indian, Chin, Shan and could speak Myanmar in common.

Youth and CBO activities documented later in the project thus less reflected and less visible: Youth targeted to network and partner with other group in region, to exchange with other civil society groups. Since activity reports did not cautiously disaggregate youth with usual project activities, youth were sometimes not differing with VDCs (Of course it was difficult to put aside youth from village and ward structures) It was worthy an interview with youth coordinator in Yangon to reflect youth wise achievements.

Staff capacity building also enhanced organization networking with players in relevant activities field happening late in the project years: the question of whether TSA would like to exist low profile in the eyes of counterpart was to explore. The participation of TSA mission (rather than community and village administrator) in the government's township district monthly and quarterly meetings was not seen as well as being reported. The opportunity of TSA to understand the ceiling of village tract, sub township, township and district development plans in the hand of rural development department backed up by World Bank Group and ADB deserved attention not to overlap and to exploit opportunities of synergy (evident at Pyar Sakhan Camp visit of Than Daung township). It was strange to the eyes of consultant whose project working years largely involved with health offices, hospitals, National AIDS program, district and township administration departments. Both good and bad were complications of being in connection with government departments. It was OK not to send the project progress reports from administration aspect since TSA did not do any MoU with any counterpart, such as health, general administration, education. Compounds where TSA SHGs built houses for teachers, donated furniture in class room, and some future proposals will demand new deep well water sources, play grounds and water storage tanks in newly located grounds. TSA bitter experience of confiscation to its school camps, buildings in Yangon explained the reason, at the same time, the policy maker cum decision makers should consider TSA staff visibility, exchange and contribution to National Working Groups and NGO networks for better collaboration and mutual benefits.

Lack of baseline around KAPB and three skills (financial, management and technical) of CBOs communities thus changes difficult to measure: Just now, the baseline data of TSA districts came out for interesting parties to further planning. Lack of baseline in the 2013 when project started, and lack of control sites made end evaluation to measure the impact of objective three and four. As TSA districts and communities were quite spread out, and needs of the communities were quite diverse

(needing more financial resources if considered and if afforded) Baseline of sample sites would be more contextual for further planning. It had to highlight the beauty of TSA for empowering not only Christian also Buddhist and other religions should take an account in this concept.

Activities for outcome and impact newly planned in the year 4 after budget underspend, activities were relevant but late in span that outcome and impact over communities not easy to visualize: It was not uncommon in the longer term projects to throw all expandable equipment, materials, number of trainings, meetings, exchange tours into reality in the last minute. Serious injuries to project could start as this project was ambitious enough to equip communities' resilience over governance, accountability, engagement, decision making and priority setting unless project staff wisely attend to the deadlines (there was no do harm activities observed in the project planning and implementation yet. Throwing much in information in the last quarter could only raise confusion, but participants were staff, not beneficiaries) HIV continuum of care was planned and achieved in the light of epidemic, not on the ground of maternal neonatal and child health (that ground was more suitable as HIV epidemic being feminized nature; spread more from mothers to its regular and occasional partners) thus leveraging with national strategies (and tapping funding under MNCH pool) was less possible.

Youth activities were hard to see as separate component, visible as part of community mobilizations and participation: budget for youth activities were seen separate in the spread sheet, however, it is better if the mission plan separate project and tap the funding for one project theme, e.g. sports, SME, IT, computer, libraries (this case, source literature from IDEA, OSF, IDRC, UNDP, Pyoebin, Oxfam, EU, GEN, LIFT, Metta Foundation, and even supplying regular good journals in Burmese would be more beneficial and meet more borrowing/demand) High School education, ARSH education for students and teens in villages, Young Women Groups and income generation trainings (hospitality, resort, beauty parlor, talent and models, sports should be focus) Supporting school in-transitions primary to middles, Supporting few middle/high school teachers in village tracts, linking TSA youth with MRCS, scouts would be some project integrations.

5 districts and UM LM commands in human resource sense seem creating role overlaps: While Ayeyarwady Region is for sure, suitable ground for TSA area expansion, olden nomenclature of upper lower and now five districts looked like creating further diversities. It was not clearly understood how overlaps exist, but it worth remembering the staff complaint, when project came in, TSA staff became project staff and paid under the project. None is receiving the double pay, though in the context that TSA staff received 15 per cent of what others having at the same workload and staff level (please see the salary survey and adjustment of UN and international NGOs, that World Vision staff salary scales be more interesting and matched in the context) When field supervisory staff plan the usual project activity on monthly and quarterly basis, they tried to overlap with usual mission function days such as Sunday church days, prayers session, education and youth functions. It is fine that project pays when project activities are overlapped with mission functions (such as for refreshment, night stop and transports of villagers coming to sessions) though project is charged twice when activities not overlapped. There are some in-efficiencies at districts such as Matupi, while one day trip is a must to reach to villages down the steep and change of mode on walk, motorcycle and car depending on the seasonal and ad hoc access. Overshooting travel cost and unforeseen night stops relative in Matupi also deserved attention. The RHQ should revisit and decide whether to uniform DA TA or tailor in the local context (and whether staff travelled to the village, but could not meet with intended beneficiaries by simply they were out to firms and not available at the village, will this be marked as meeting not done at the cost) It should be realized that TSA have been geographically active in Shan south, Chin south, Sagaing north with southern Myanmar (Yangon and Bago) as these districts were distant to each other despite road and infrastructure in last two years been improving [Summary: Project Coordinators (project post) are District Officer/Corp officer/Pasteur (mission post) at the same time, recently TSA Myanmar proposed to assign 50 mission: 50 project staff and 100% project staff (Please see Project Staff Post 2017.doc). This is TOR oriented, that no one is requesting double salary, project to remain paying the 100 per cent of the staff salary]

Numbering different community SHGs on wide geography was question, on whether it was based on level of intended community mobilization, community participation or local needs driven versus extent of district: In the next phase, it was advised that Yangon planners should be more careful with innovated livelihoods (like Tamalan furniture, saw cottage, seed banks, resort and motels in Tedim for group income and capacity growth, cycle repair, photo copy in distant villages, craft and art on CMP,

advanced procurement and storage on local crops such as beans, peanuts, sesame, fortified rice, winter and seasonal clothes (Bay Htote), Marlal, noodle and grilled fish.

How good practices in the exposed communities spilled over to neighbourhood, mechanism: It should be remembered that many other neighbourhood were on eyeing project operations, the force of dissemination of knowledge, skills to create income, source to access health, education, water, sanitation, furniture, microloan, livelihood, training, youth empowerment, TAG and gender empowerment all embedded in the good soil of project, those who were serious careful and put efforts to benefit should also be thought. This was the space for the SHG and youth leaders and monitoring RHQ experts to seed appropriately in the good soil.

9.3. IMPACT ON LIVES OF BENEFICIARIES

- Sense of belonging and ownership evident at SHGs even at post flooded HH relocated
- Mobilizing and securing blood availability where cold storage is impossible
- Stigma no longer an issue, as interviewed at Wesley hospital and other group and key informant interviews
- Income increase and portion injecting into school fees at microcredit recipients, and income from businesses draining into infrastructure, over half reaching into third loan, not because they not doing well, but they expanded the varieties to meet the demand
- Youth involvement was more possible at post flooding support construction of villages in new location, recruiting new blood donors, funeral support in addition to its integration into mission functions and village welfare
- Resources were seen well maintained: Bridges, post flooding roads within villages, surface wells and hand pumps, tube wells in operation
- Poverty, drug use, migration and overseas job hunt, impact from conflict, weather changes were seen as root causes of vulnerability thus conflict, drug misuse and migration factors should be taken into account for planning despite primary project target groups were clean.
- CPI and microcredit schemes been successful thus continuation if not expansion
- Networking partnership and staff exposure led to concrete staff and community capacity building into yet powerful and rigorous staffing

10. PROJECT SUSTAINABILITY

Following operating procedures and definitions complete the M&E and found as existing and operational throughout;

Mission approach was found as key to continued community participation, **youth community work** was linked to this; Policy/Belief said young people were created by God and had the potential capacity for leadership, they could be good role models for other people in the communities, and guideline plans leadership training UM LM with Matupi Taungyi participation, 3 district gender equal representatives 17-25 years to build positive values in gender, HIV, family planning and health, they replicated and led youth at corps and corps plants, including other Churches and community campaigns guided by CO and RYCO, DYO and DDWM, reports to be submitted, campaign activities through music and sports, ideas to be developed by Youth Think Tank teams. In many areas youth, community and mission could not be divided as many activities came from synergy of these. It will continue over time on faith with embedded community mobilization, participation and engagement.

Village development committees were exiting or newly established bodies participated by community recognized leaders and motivators (7-10, 25% female) to identify and respond to community needs (CPI community project initiatives), with varied presence of school teacher, health persons, religious elders, clan, and CO being automatic member of VDC. Its policy was to have trustful and good character members who understand community problems, and able to find solutions, and strengthen management (president secretary), technical (members) and financial (treasurer) capabilities, met once a month, assisted TSA staff monitoring SHG activities and participate at project evaluations. In many areas visited, VDCs decided on needs, collect resources regularly or on chances, they are effective buffers and medium between local residents and government structures, VDCs will continue like village welfare groups survive in the olden days.

SHG was group of most vulnerable people to address and be responsible for any community project initiative, micro-credit, drinking water etc. Its structure and function were similar to VDC. It was back bone of all activities. It functioned as regular meeting and regular saving, network and link with other players and agencies, TSA strengthened literacy. Its policy was "the very poor have God given potential and mainstream them with the rest of the community". SHGs were found the most successful bodies and about half of them found stopping the loan funding as they can run the livelihood without any external support.

Microcredit offered some loans to poor people so that they would be able to run some type of huge burden. They were encouraged to build upon what they already knew and how to gear their enterprise to the local market. Its guidelines said group to have 5-10 members as SHG, composed of president, secretary, and treasurer, every member to understand and sign the contract, to undergo training for five full weeks and save 500 Kyat per week to get the first loan, initial loan capped at 50,000 Kyat per person, interest being 4 per cent for 6 months, to pay back within 6 months covering both interest and capital, weekly monthly payments and savings were mandatory that each person to set the amount, which shall be banked in microcredit account. The amount of loan was increased for subsequent loans (2nd 3rd 4th) and varied according to the nature of business and capacity for repayments. Interest was for 4 per cent for 6 months or 8 per cent for 10 months. Each member must complete the loan application, prepare business plan, including budget. They were to attend the regular weekly or monthly meetings and monthly development trainings or pay the fine. The member to bring the record book so the update was possible, the loans weekly or monthly instalments were paid back in full. If the MC SHG chose they could save and start a CPI.

CPI was a project ideally initiated by SHG or VDC, jointly funded by community and TSA Myanmar. The aim of the project was to improve the specific sector of community. Its objectives were to improve the health, sanitation, hygiene, infrastructure, awareness, education, to promote cooperation and encourage good working relationship of community leaders and members, to enable SHGs and VDCs to save money as counterpart for the CPI, and to encourage community involvement in maintaining the project (water, toilet etc). Its policies were that CPI as joint community TSA project, its idea to come from community as request in the framework of needs assessment and recommendations, its funding to be ascertained by RHQ, 20 per cent of the cost would be community contribution and 80 per cent from TSA. Its guidelines were SHG to write the proposal, supported by CO, to get three

quotations if construction involved, MoU to be signed and members to attend maintenance training as required after formal turn over, corps to join the community in implementation of CPI.

Safe Drinking water sources was one community project initiative with 20 per cent community and 80 per cent project funds, to qualify drinking water by development of surface well, tube well, hand pumps and gravity piping. SHG was to commit instalment and maintenance, after water quality tested and hand over to the residents.

All these community structures are in line with self-sustainability rules and well observed during the field trips. They could maintain the assets, run regular operation and meetings, the team was well organized and their communication with village administration existing with various degree. For sure, they could sustain the resources and assets in the long run.

11. LESSONS LEARNED

11.1. MICROCREDIT

Deserve good planning on 70 cent interest. It was one of the best community based schemes while NGOs such as BRAC, PACT, GRET taking 2-3 per cent interest on loan and condition that lessee did not receive full amount of money straight after signing, thus now harming the communities. TSA loans were benefiting both the income and infrastructure of the shops, workshops, machines and partly paying the schooling fees of the children.

11.2. SHG

SHGs were seen more instrumental than some other VDCs, factors play – less number of people who are focused at helping out other smaller group of people, or keen at finding income (most of female) secondary to breadwinner. VDCs used to be more of cover page organization and its so called members sometimes care to member, reluctant to function and serve only after ascertaining which is whose job, which is not seen in SHGs.

11.3. YOUTH

Youth were seen as falling under most forward planning targets and project could grasp many youth into action. In terms of leadership, community talks, participation at talent and at other Christianity groups, output was seen and it was not possible to measure outcome. Migration, drug misuse, entrepreneurship, enterprising were seen very much related to youth and many youth participation level were seen as ranging, not as cohesive pattern.

11.4. OTHER

Project beneficiaries were ranging as well. Those in Dala township were many and pure migrants and many of them were out to jobs while trip was made. Some at the meetings were noted as unstable and of interpersonal disputes.

The project should exist as part of integrated approach. Raising the awareness, personal hygiene and prevention skills over communicable diseases should come after getting some outlet from deep seated poverty. Water and sanitation works only after increasing reasonable access to drinking and home use water, one should carefully remember.

Otherwise well renown as lending agency: if TSA mainstream this activity only to a number of communities, they will realize TSA staff, as those who lend. (TSA not renown as lending agency yet, but will if it mainstream loans only)

More going into infrastructure, than expansion of goods on demand: As stated before, capability of long term investment also rely on ability to replenish goods, ensure security against theft and damages, and networking with other partners thus marketing, segmentation would be possible

Role of local idea champions: Some communities are leaders of local markets, thus SMEs should consult to get the best mix of goods and trading channels. Example of sending betel nut to India, cross trading of Chinese electronics into India, founding ecotour facilities in Tedim and Kalay were smart ideas, but betel nut was out of question on mission approach.

Clinics should more involve and active. They should have increased interaction with community livelihoods (remember one should be multifaceted in rural). The extent of home based education not known. Clinics should cover more villages as in some areas one clinic covered 2 villages. The link between the clinics and hospitals were not always clear. They could focus more on accident and emergencies, and MNCH. HIV work should expand on the theme of MNCH rather than solely on Continuum of Care, thus it will automatically work on RH, MNCH at the same time, without increasing the usual budget, please remember that there is PMCT work prevention of mother to child transmission in the counselling and psychosocial work in the continuum of care, while reducing the stigma and discrimination. There was less touring to pregnant cases out of village. They should develop TOR to cover village tract and improve preparation for emergency.

12. SUMMARY OF RECOMMENDATIONS

12.1. RECOMMENDATIONS

To improve in terms of management and implementation: RPO to have replica (Monitoring Assistant so that the program could know the updates of who is where and what is going on)
Current RPO have 5 zones to monitor of which Matupi and Kalay needs 3 days extra to travel. RPO is meeting demand from both Project and Mission works, as well as ad hoc verbal instructions from HQ. There is one mission support project which she is writing regular progress reports in addition. Somebody is to assist her like 10 days in a month. HQ is to consider whether to take 10 days time of existing staff (that staff could work rest 12 days for another job description) or to recruit program assistant (new).

Local Field Officers to understand the government area plans especially Department of Rural Development to avoid overlaps, to enhance understanding and participation of respective communities and promote decision making skills Rural development department under Ministry of Agriculture, Livestock and Irrigation is doing (using loan from World Bank and Asia Development Bank) lighting, bridge, water and lane at the village level. There are 65,000 villages in country. The project is to aware of its project site village plans (such as lane, water, lighting) so that no overlap will happen and integration/synergy between government and TSA properties will exist 2017-20

Project assets such as Wat san, health awareness, learning from disaster and preparation (To construct soft resilience and program to establish think tank e.g. gravity piping of water resources in highland infrastructure involve high level understanding and technology)
HQ Wat san engineer and other program officers are to take part regular monitoring trips and to consult village level activities such as gravity piping, maintenance issues so that there is building of wisdom at the village (like think tank)

Vendors need to convert into more stable business line (by forecasting the marketing trend and consumer behaviour than expanding on popularities)
Project is to understand markets and to link these opportunities to SHG initiatives so that they would be able to found marketable businesses e.g. food processing, pickle, salads etc to share local demand of usual foods

Youth mobilization to be incorporated into hospitality, resort, eco tour, income generating factory. Youth are in need to involve at camping, training, outside job hunting and enterprising stages as income generating job will lead them into careers. Project will work to link trained youth volunteers with local job hunts and opportunities.

To generate ideas and to actualize e.g. to think whether drinking water jar transport is possible and income generating in Kalay to be undertaken by youth, sales at early morning market in Kalay where village grown groceries which are really suitable to send to Monywa (about 130 miles distance, whether youth could enterprise on it)

Front line staff to be equipped with an additional skill (more staff to go networking and attending the locally available trainings, mentoring, conferences and will replicate at RHQ)
The project to give vocational training and link youth with possible local company jobs
The youth to attend area workshops, meetings in Taungyi, Naypyitaw and Kalay youth to Chin meetings in Hakha (like staff in Yangon attending meetings and workshops ran by other international NGOs and Development Partners)

AHRN officer discussed on rampant drug use scene in Kalay and where bordering India. Tunzan township in northern Chin is nowadays opium growing area thus drug trafficking starts in the neighbourhood. Danger of local spirit, stimulants, heroin and raw opium is on threat thus next project should put drug primary prevention and continuum of care into existing HIV Continuum of Care. To start drug abuse education on primary prevention (youth not to start soft drugs use or experimental use of betel nut and soft alcohol like beer which could adjunct to alcohol and opiate narcotics)
TSA to partner with NGOs and take part applying LIFT funding process as recipient to geographically integrate microcredit and livelihood activities with an additional funding (to tap the locally existing external funding source)

TSA to act as grant manager or member of management team where local community based organizations CBOs do the rest of the running project where TSA just sit as steering body, apply local existing project monies and subcontracting to SHGs in 5 zones (and partner CBOs facilitate SHG implementations) This area is not really relevant for TSA in terms of its existence, policy and scope of services

To think male led livelihoods in some areas: Trishaw, motorcycle, taxi services, male nurse, Security securing role and new business ventures. Most of SHGs were ran by females, thus the evaluation brainstorm that whether new grants in 2017-20 also include male led ventures such as above. Clinical and ICT trainings were yet covered by TSA nurses and staff thus relevant to continue. To assign 2Female, Male, Female dominant activities (when staff touring into remote areas): training, nursing, CHW, activities with Wesley

Improve computer, English, Dialect, Communication over existing skills, as well as other technical skills.

Creating Watsan in Matupi is more complex, and project should consult with Township development council engineer if necessary. Planning for water resources is basically important as to get baseline water levels seasonally. To meet government township engineer from township development council before doing WATSAN activities that he could advice in the local context as he is managing same work the whole township.

SME small and medium enterprises, First Aid, Food security and nutrition, Art and Craft are important both for project services and microcredit activities

Craft is yet extensive and well to do in Kalay as many weaving machines are seen, project to only replicate same IG income generating businesses in other areas such as Taungu and Dala

Clinical understanding to Oxygen supplier SHG is important as they should be able to explain how to use and things to be careful. E.g. Nurse from Kalay to educate local SHGs who keep and hire Oxygen tanks on basic laymen understanding and operating procedures so that villager who came to hire tanks to look after terminally ill or asthmatic patient knows do and don't.

Grocery supplies not to overlap livelihoods as two venders to loan program choose selling chicken in the same small market. To advice whether to add one more good, one selling chicken and egg, and other selling chicken and milk etc. Seeding of sesame, peanuts for Kalay farms or from Shan State should also be considered. Promoting beans cropping for India, because evaluation team noticed the huge demand from north eastern India bordering Tamu, the project township.

Yeni township should be advocacy and good practice site. SHG Kalay village founded solar run photo copy and desktop services as idea champions, thus enterprising is choice - piloting hand craft livelihoods might be possible. There is good SHGs running blood donation services, expanding summer English computer course, donating water when drought, run mobile libraries. Also expanded same services in Naypyitaw (40 miles away)

TSA in Status quo or to participate more at township district state meetings, see more of rural development department, GAD, other faith based donation and activities, at least other Christian derivatives.

12.2. INTEGRATING NEW CONCEPTS

Lack of do harm things, more look like natural process of community actions. Doing harm is for example, the project is paying the opportunistic cost of women coming to the education sessions, for one or half day income she missed out, consultant said project did not do such things. E.g. project paying per diems of beneficiaries who attend the project trainings, create harm for next player when it does the training and less attended by villagers, because this NGO could not pay per diems .

Could not ascertain on faith aspects (e.g. while generating income of the communities by supporting fund, would lead communities trading on betel nuts, which is strictly forbidden by the mission approach). The mission decides not to work in these areas so yet clear.

R&D on good practices and lessons learnt as project term less influences the small turnarounds of the community groups and household. Project should collect good practice cases etc. for showcasing to external readers audience and donors to increase visibility, it is good to compose cases stories of female led household businesses etc., personal inspiration given by project help

Space for sewing, art and craft, These should be trained as it create income while staying at home

To continue HIV continuum of care in the context of MNCH. As HIV epidemic is in feminized stage, transmission globally is to female, mothers and female sexual partners of male who is already HIV positive

12.3. OTHER ISSUES

VDCs do not function as they should, in many places they are irrelevant. Focus should be on strengthening them, not creating new ones. Evaluation found that SHGs are more committed and hardworking than the usual traditional VDCs. Many VDCs are just following the style of rudimentary village committees following the instruction and orders of township authorities, thus to change into community responsive mode and be active player to lead village functions and ceremonies

There is an overlap between mission work and project work for some officers. TSA staff became project staff and paid under the project. Mission duties were forever and covering both mission and project let them burst out as complaints when deadlines peaked. Verbal and ad hoc instructions should be reduced from regional and HQs. When field supervisory staff plan the usual project activity on monthly and quarterly basis, they tried to overlap with usual mission function days such as Sunday church days, prayers session, education and youth functions. This only refer to Project Coordinators in collaboration with staff at the quarterly work planning meeting, as yearly activity plan was inserted specific site, person and collaborator based activities. It is to be decided by the project planners in the future on the issue that project pays when project activities are overlapped with mission functions (such as for refreshment, night stop and transports of villagers coming to sessions) It seemed that project is charged twice when activities not overlapped and project sites conduct both project and mission based activities, sometimes at the expense of project. Payment for refreshment, night stop and other incidental cost also pertains to villagers living distance coming to the functions.

There arises the question of whether the communities labour, local raw materials to be amounted at 20% contribution to the community project initiatives as people involve collection of raw materials, input of physical labour and fixing. In the contracts made between TSA officer and village SHGs does not include labour and local materials cost, if so, the mere money collected from communities will be reduced.

Home visits frequencies were more realistic, and evaluation is concerned that staff including TSA nurses just try to meet numerical targets than the actual effect. Especially nurse assigned in village and responsible for only a village, not getting enough number as targeted in the log frame, thus program should reconsider whether to assign her more jobs or check physical activities meeting the intention e.g. vaccination, relieve of pain and fever, rehydration, care of elderly women, care of paralysed patient etc.

There are some in-efficiencies at districts such as Matupi, while one day trip is a must to reach to villages down the steep and change of mode on walk, motorcycle and car depending on the seasonal and ad hoc access. Overshooting travel cost and unforeseen night stops relative in Matupi also deserved attention. The RHQ should revisit and decide whether to uniform DA TA (Daily Allowance and Travel Allowance) or tailor in the local context. Staff travelled to the village, but could not meet with intended beneficiaries by simply they were out to firms and not available at the village, will this be marked as meeting not done at the cost while trips are taken to meet with beneficiaries and the meetings do not happen because the beneficiaries do not come because they are busy elsewhere. This sometimes happened in the extreme and unforeseen climate conditions so that project staff was getting used to these circumstances and further. It does not embark to the inefficient use of financial resources.

Project Coordinators (project post) are District Officer/Corp officer/Pasteur (mission post) at the same time, recently TSA Myanmar proposed to assign 50 mission: 50 project staff and 100% project staff" it is not yet active and most of the staff were under the 100 percent payment from the project.

13. ANNEXES

- 1.1. Terms of Reference
- 1.2 List of documents consulted
- 1.3 SHG CPI list in 5 districts
- 1.4 Sites observed and number of people interviewed

1.1 Terms of Reference



Terms of Reference for End-Term Evaluation

MYANMAR

INTEGRATED COMMUNITY LIVELIHOOD DEVELOPMENT PROGRAM

2013-2016

10739

BACKGROUND

The Salvation Army has been present in Myanmar since 1915. TSA currently has work based out of a total of 55 corps/ outposts in Myanmar, spread between the capital city of Yangon, Central and Upper Myanmar. The Regional Headquarters of TSAM is located in Yangon, and TSAM is a part of The Salvation Army Singapore, Malaysia and Myanmar Territory, administered through THQ in Singapore. TSA Norway has with Norad funding previously supported community development work in Myanmar with a focus on HIV/AIDS, most recently through Digni project 10409: “Myanmar Community and Home-Based HIV/AIDS Programme” from 2008-2012. TSA Switzerland and TSA Australia Eastern have likewise supported community development work in Myanmar over a period of many years, most recently through PD2973 – “Integrated Community Development and Livelihood Improvement Program”, from 2010-2012. The proposed program has evolved out of this previous partnership between TSAM and the supporting territories. An internal mid-term evaluation was conducted at the end of 2014.

The project uses the holistic approach of the sustainable livelihood framework and the integrated mission concept of TSA. It aims to improve the quality of life through community capacity building, income generation, clean water, home care for 2700 families in 90 the targeted communities. The project includes HIV, capacity building and gender as crosscutting components. The project works through Village Development Committees and Self-Help-Groups. The Salvation Army Corps plays a vital facilitation role in building relationship, capacities and support-framework to provide quality implementation. The expected outcome of the project is a sustainable and less vulnerable livelihood system for the targeted families. It will also strengthen TSA to become active partners in strategic alliances and networks.

Goal and Objectives

The overall development goal of the proposed program is to increase the resilience of communities by strengthening livelihoods systems of families, and to strengthen management and leadership capacities in the targeted communities and in TSA in Myanmar.

The objectives and their indicators are:

<p>5. Strengthen existing livelihood coping strategies of 2,700 families within four years through:</p> <ol style="list-style-type: none"> a micro-credit scheme HIV care and prevention improved access to drinking water community project initiatives 	<ul style="list-style-type: none"> The programme has supported community organisation and has strengthened community cohesion and resilience for future disasters. The already existing livelihood activities have been strengthened and quality of life has enhanced in the communities. There is a significant positive impact on the livelihood for at least 75% of 50 sample families.
<p>6. Empower communities through the establishment and coaching of VDCs and SHGs, and continual monitoring through leadership trainings, networking and partnership capacity building.</p>	<ul style="list-style-type: none"> 40 new VDCs and 100 new SHGs established by 2015 (50% are women members of SHGs); Mentored existing 30 VDCs and 112 SHGs by 2015
<p>7. Increase awareness and encourage positive and culturally sensitive values related to gender equity, HIV prevention, and health promotion among young men, young women, girls and boys in all target communities throughout the duration of the project.</p>	<ul style="list-style-type: none"> Increased awareness in communities of HIV/AIDS and other health issues; greater gender equity; youth are empowered and confident
<p>8. Build leadership and management capacity of TSA and communities through the strengthening of</p>	<ul style="list-style-type: none"> Capacity of TSA Myanmar to contribute to community development is

<p>organizational management systems, upholding accountability within TSA-Myanmar, systematic and consistent use of project management tools throughout the project's lifetime, networking & partnership.</p>	<p>strengthened; greater accountability and improved governance in TSA Myanmar; staff members and volunteers have greater capacity to contribute to community development activities when external support ends.</p>
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Target Groups

The project is implemented in the 5 Salvation Army districts of Kalay, Tamu, Central, Southern and in Matupi, and in Taunggyi Section. Work is based around 55 corps/ outposts of The Salvation Army in these districts and sections. The target group will be families and community members in these local areas, with a particular focus on the poorest community members and families affected by HIV/AIDS. The clean water component will select communities where water quality and availability is poor, benefitting all members of these communities.

A secondary target group is the officers and staff of TSAM, who will benefit from the capacity building component to increase the effectiveness of TSA integrated mission ministry.

PURPOSE AND SCOPE OF THE EVALUATION

Purpose

As this is the last year of the project period (2013-2016) it is important for The Salvation Army to carry out an evaluation of the project that has been implemented to assess the efficiency, effectiveness, outcomes and impact based on the intended objectives, and also to learn from this experience for future programming. This evaluation is highly important for learning and developing the next phase of the project. The evaluation is not an end in itself, but should be viewed as a learning experience. At the same time, as Salvation Army representatives, we have responsibility towards the individuals and communities which we serve, and Digni and NORAD of ensuring the fulfilment of our aims.

Scope

The evaluation will consider all aspects of the project; concept, design, relevance of the project and implementation modality. It will assess how the strategies are gender balanced and appropriated for both men and women. The evaluator will make recommendations in the light of strengths and weaknesses identified.

The evaluation has the following principal tasks:

- Assess the project design in terms of relevance to the overall development situation at the national level, relevance to national strategies, and to beneficiaries
- Assess project management structure, reporting and monitoring systems, and the extent to which these have been effective
- Assess implementation and performance of the project in terms of producing the expected outcomes
- Assess the sustainability of the project activities and outcomes
- Provide recommendations for improvement based on lessons learned.

EVALUATION QUESTIONS

The evaluation should assess the following:

- Project Relevance
 - To what extent are the objectives of the project relevant to the context?
 - To what extent are the objectives of the project relevant to national priorities?
 - Are the activities and outputs of the program consistent with the overall goal and the attainment of its objectives?
 - Are the activities and outputs of the program consistent with the intended impacts?
 - Was gender equity integrated within and promoted by the project?

- Project Efficiency
 - Were activities cost-efficient?
 - Have the actual resources used (all inputs such as activities, material inputs, community inputs, staff time, etc) been appropriate in quantity and quality to achieve the objectives?
 - Were objectives achieved on time?
 - Was management consistent and appropriate in quantity and quality to achieve sound implementation of the project?

- Project Effectiveness and Impact
 - Has the project achieved its objectives?
 - What were the major factors influencing the achievement or non-achievement of the objectives?
 - What impact has the project made on the lives of the beneficiaries?

- Project Sustainability
 - To what degree can project components continue after donor support ends?

- Recommendations and lessons
 - What can be improved in terms of management and implementation (at all levels and departments involved) to increase impact and efficiency, and better demonstrate evidence of results?
 - Where should the suggested focus be in the coming four years in order to build upon the impact, relevance and sustainability achieved through this project?
 - In what way could the project activities continue when external funding ceases?

METHODS

The evaluator(s) are expected to use both quantitative and qualitative methods to answer the research questions. The key elements to be used by the evaluator will consist of the following:

- Desk studies of relevant project key documents; including the application (Project Proposal), financial and narrative six monthly progress & annual reports, mid-term evaluation report, etc.

- Field visits and interview with beneficiaries (Individual interviews, focus group discussions, surveys)
- Interview with staff, both individual interviews and focus group discussions are encouraged (Individual interviews, focus group discussions, surveys)

The last activity will be to analyse data collected and to produce a draft of the final report. Revisions may be requested by the program coordinator; afterward the final report will be designed. All target groups and relevant parties should be involved in this assessment.

TIME SCHEDULE AND TIMETABLE

It is expected that a representative sample of sites and respondents would be drawn by the evaluation team with the Salvation Army team. The evaluation is expected to last for 28 days. Salvation Army shall provide the logistic requirement for the evaluation including transport and administrative support.

End-term Evaluation will be conducted from November 14th 2016, including visits to Kalay, Central and Southern Salvation Army District. There will be a debriefing at Yangon RHQ with the leadership of TSA, Projects Officer, and other relevant staff. The draft report will be submitted by email on December 15th to The Salvation Army Myanmar and forwarded to The Salvation Army Norway. Comments from TSA Myanmar, TSA Norway, TSA Switzerland and TSA Australia Eastern to draft report will be sent back to the consultant(s) by December 22nd at the latest. The consultant(s) will submit a final report to The Salvation Army Myanmar on December 30th. The final report will be forwarded to all partners and Digni/NORAD.

CP 0693: Myanmar Integrated Community Livelihood Development Programme End of term Evaluation

Schedule

Date	No. of Days	Activity	Location	Responsible Persons
23 Nov	½ days	Briefing	RHQ	Consultant, RO, RDWM, PO, RPO
30 Nov	1day	Travel	Kalay	Consultant, RPO
1 Dec	1 day	Workshop	Kalay+Tamu	Consultant, DO, DDWM, DPC, CW, CHW, Counselor, RPO, CHWs
2 Dec	1day	Data collection	Kalay	Consultant, DPC, CW, CHW, Counselor, RPO
3 Dec	1 day	Data collection	Kalay	Consultant, RPO,DDWM,DPC, CW, CHW, Counselor,
4 Dec		Travel back from Kalay		
6 Dec	1 day	Workshop	Central	Consultant, DO, DDWM, DPC, RPO
7 Dec	1 day	Data Collection	Central	Consultant, DO, DDWM, DPC, RPO
12 Dec	1 day	Workshop	Southern Tarmwe	Consultant, DO, DDWM, DPC, RPO & Community worker
13 Dec	1 day	Preparation Summary findings	RHQ,Yangon	Consultant, 5 district Project Coordinators, RPO, RO, RDWM, PO
14 Dec 16 Dec	2 days	Review of Relevant document	RHQ,Yangon	Consultant
21-22 Dec	2 days	Workshop and field visit Yeni and Pyar Sa Khan	Central District	RPO, consultant, DPC,CO Yeni, CO Pyar Sa Khan

	3 days	Draft report by consultant		Consultant
	(5 days ¹)	Peer review		AUS, NOR, SWI
30 Dec	5 days ²	Final report		Consultant
TOTAL	28 days including 4 days of local travel ¹ (5 days) not included in the computation of consultant's fees ² Includes data cleaning			

PROPOSED CONTENT OF THE EVALUATION REPORT

The Report should:

- Contain an executive summary (mandatory)
- Be analytical in nature (both quantitative and qualitative)
- Identify and analyze deviations where or if relevant
- Be structured around issues and related findings/lessons learnt
- Include conclusions
- Include lessons learned and recommendations

The following suggests a basic outline for the evaluation report. However, the consultant should be free to decide what is relevant to include.

Title Page

- Report title, project title, and contract number, Date of report, Authors and their affiliation

Executive Summary

- Principal findings and recommendations
- Summary of lessons learned

Acknowledgements

Table of Contents

List of Acronyms and Abbreviations

Body of the report

- Introduction
- Project Overview
- Evaluation Findings
- Recommendations
- Overall Lessons Learned
- Conclusions

Annexes

- Terms of Reference
- Evaluation methodology detail
- Itinerary with key informants
- List of documents consulted
- Logical framework/ list of primary goals and objectives
- Specific project and monitoring data, as appropriate
- Summary tables of progress towards outputs, objectives, and goals
- Recommendations summary table

EVALUATION TEAM

The evaluation team will consist of an external consultant(s). This will help ensure independence so as to be able to take a fresh and objective view of the project, as well as secure good evaluation skills. The evaluation team will also consist of at least two key in-country personnel who will accompany the team on each project evaluation visit. They will ensure that the evaluation is participatory, that relevant local information is not overlooked and that the evaluation visit and the project site is culturally sensitive to the particular local population.

The evaluation team will undertake field visits and interviews on their own and give their independent recommendations, but will work in close collaboration with the Project Officer Major Lalroengi and the Project Coordinator in the relevant districts. The team leader will report to The Salvation Army Myanmar's Regional Officer, Major Bo Jeppsson.

BUDGET

No	District	Item	Unit	Amount	Total In Kyats	USD Ks.1250=1USD
1.	Kalay District					
	Travel	Travel cost	2 from YGN	300 000	600 000	480,00
	workshop	Meal	8 persons	7 000	56 000	44,80
	Data collection	Lunch +Dinner	8 persons, 2 days	7 000	112 000	89,60
		Accommodation	4 days	55 000	240 000	192,00
		Diesel for Car/motorbike	2 days	40 000	80 000	64,00
		Diesel for Generator	1 day	4 000	20 000	16,00
		Refreshment	2 days	40 000	80 000	64,00
					1 188 000	950,40
2	Central District					
	Travel	Travel Cost	2 from RHQ	50 000	100 000	80,00
		DO Diesel	1		50 000	40,00
	workshop	Meal	5	7 000	35 000	28,00
	Datat Collection	Meal	5	7 000	35 000	28,00
		Refreshment	10	3 000	30 000	24,00
					250 000	200,00
3	Southern District					
		Taxi fare	2	12 000	24 000	19,20
		Trishaw	3	10 000	30 000	24,00
	workshop	Meal	5	7 000	35 000	28,00
	Data Collection	Meal	5	7 000	35 000	28,00
		Refreshment	20	3 000	60 000	48,00
					184 000	147,20
4	RHQ	Review of Relevant Document	3 lunch	7 000	21 000	16,80
		Preparation Summary findings	10 9(Lunch+	10 000	70 000	56,00

			Water, Coffee, Snack)			
		Dinner	10	12 000	120 000	96,00
		TA for DPCs	5	100 000	500 000	400,00
					711 000	568,80
				Total	2 333 000	1 866,40
5		Consultancy Fees	23 days	23x250		5 750,00
				Total		7 616,40

1.2 List of documents consulted

- Project Proposal
- Policies and guidelines for Micro-credit., VDC and SHG, water sources, community driven, project, Youth work support, Learning and Sharing visit,
- Internal Evaluation Report (2014)
- Mid- year report (2013,2014,2015, 2016)
- Annual report (2013,2014,2015)
- Donor trip report (2014)
- Finance Audit report (2013,2014,2015)

1.3 SHG's CPI List

Table 1.SHG and VDC list 2013-2016					
Year	SHG/VDC	No of Groups	Male	Female	Total No of members
2013	SHG	61	562	360	922
2014	SHG	44	460	200	660
2015	SHG	56	614	330	954
2016	SHG	48	445	289	734
2013	VDC	14	78	20	98
2014	VDC	24	128	40	168
2015	VDC	49	181	30	211
2016	VDC	14	88	9	97

Table 2.Micro-credit List 2016					
	1st Loans	No of Group	M	F	Total
Kalay		8	20	37	57
Tamu		4	2	26	28
Central		4	2	24	26
Southern		5	3	23	26
Matupi		3	9	9	18
Total		24	36	119	155
	2nd Loans	Group	M	F	
Kalay		18	15	94	109

Tamu			8	6	38	44
Central			1		5	5
Southern						
Matupi			4	5	23	28
Total			31	26	160	186
	3rd Loans	Group		M	F	
Kalay			4	12	12	24
Tamu			1		8	8
Central						
Southern			4	1	26	27
Matupi						
Total			9	13	46	59
	4 Loans	Group		M	F	
Kalay			2	6	5	11
Tamu			1		6	6
Central						
Southern						
Matupi						
Total			3	6	9	15
All Total			67	81	336	417

Table 3: No of Community projects and Beneficiaries						
Year	Community Projects	District	Corps	Villages	Total Project	Total Beneficiaries
2013	Tube well	Central, Taunggyi, Kalay, Tamu	Yeni, Hto war Chaung, Pyar Sa Khan, Tui Khin Zang, Pyin Taw Oo Bokkan	Yeni, Gwen Tone Pin, Pyar Sa Khan, Luai San Sit, Lui Khin zang, Pyin taw Oo, Bokkan	10 wells	6203
	Public Toilets	Central and Tamu	Yeni, Kyauk Lone Kyi, Htoe War Chaung, Myingyan, Bokkan	Yeni, Kyauk Lone Kyi, Htoe War Chaung, Myingyan, Bokkan	15 toilets	10213
Sub-Total						16,416
2014	Tube well	Central-3, Kalay-1, Matupi-1	Myingyan, Yeni, Hoe War Chaung, Taunggyi, Aung Ywa, Mindat	Myingyan, Yeni, Hoe War Chaung, Taunggyi, Aung Ywa, Mindat	5 wells	3430
	Toilets	Kalay, Southern, Tamu	Pyin Taw Oo, Dallah, Kanan	Pyin Taw Oo, Dallah, Kanan	186	22271
	Street paved	Southern	Dallah, Bago	Dallah, Bago	2	1852
	Material for study support	Central District	Myingyan, Pyar Sa Khan	Myingyan, Pyar Sa Khan	2	120

	Programme					
	School materials	Kalay	Aung Ywa, Myo Hla	Aung Ywa, Myo Hla	2	4200
	School fence	Kalay District	Myo Hla	Myo Hla	1	3000
	Study support building	Kalay	Myauk Chaw Taw	Myauk Chaw Taw	1	
	hydropower	Matupi District	Hmuntung	Hmuntung	1	110
	Solar panels	Matupi District	Mindat	Mindat	11	70
Sub-Total						35,053
2015	Tube well	Central-4 Kalay- 8 Matupi-1 Tamu-4 Taunggyi-1	Htoe War Chaung, Taungoo, Taunggyi, Myo Hla, Pyin Taw Oo, Myauk Chaw Taw, Suh Khin Ta Yar, Dim Zaang, Vut Buak, Sa Tawm, Mindat, Jang Len Phai, Bokkan, Htan Ta Bin	Naung Ta Phan, Htoe War Chaung, Taungoo, Taunggyi, Myo Hla, Pyin Taw Oo, Myauk Chaw Taw, Suh Khin Ta Yar, Dim Zaang, Vut Buak, Sa Tawm, Mindat, Jang Len Phai, Bokkan, Htan Ta Bin	18 wells	21302
	Public Toilet	Central-2 Kalay -3	Yeni-2, Pyin Taw Oo-1, Letpanchaung-3	Yeni, Pyin Taw Oo, Letpanchaung	5	18788
	Private Toilet	Kalay, Tamu, Southern.	Tuikhinzang, PyinTaw Oo, Sukhintaya, Myauk Chaw Taw, Letpanchaung, Kanan, Khampat, Bokkan Dallah, Lay Dauk Kan, Bago	Tuikhinzang, PyinTaw Oo, Sukhintaya, Myauk Chaw Taw, Letpanchaung, Kanan, Khampat, Bokkan Dallah, Lay Dauk Kan, Bago	329	4224
	Street paved	Tamu	Htan Ta Bin	Htan Ta Bin	1	1390
	School teacher's residential house	Kalay	Myauk Chaw Taw	Myauk Chaw Taw	1	322
	Solar panel	Matupi	Mindat	Mindat	13	43
	Canal Bridge	Central-1, Kalay-4	Htoe War Chaung, Ci Cai, Tahan, Min Hla, Myauk Chaw Taw	Htoe War Chaung, Ci Cai, Tahan, Min Hla, Myauk Chaw Taw	5	15902
	Library	Kalay	Aung Ywa	Aung Ywa	1	2017
	Oxygen	Central, Tamu	Pyu, Htan Ta Bin	Pyu, Htan Ta Bin	17	2253
	School furniture, equipment/Fence/ Main gate, floor repair	Tamu, Kalay, Tamu	Htan Ta Bin, Chauk Net Kyi, Ci Cai, Min Hla, Myo Hla(Indaigone), Kanan	Htan Ta Bin, Chauk Net Kyi, Kanan, Ci Cai, Min Hla, Myo Hla(Indaigone, Tui Var	8	10203
	Rest house in Cemetery	Tamu	Htan Ta Bin	Htan Ta Bin	1	1400
	Trolley for water carry	Tamu	Kanan	Kanan	1	240
Sub-Total						78,084
2016	Tube well	Central-2, Kalay-3, Tamu-4 Tamu-2	Pyar Sa Khan, Mon Kone, Aung Tha Yar Let panChaung, Hlaing Ta Ya, Kanan, khampat, Htan Ta Bin, Jang Len Phai	Pyar Sa Khan, Mon Kone, Aung Tha Yar, Let panChaung, Hlaing Ta Ya, Kanan, khampat, Htan Ta Bin, Jang Len Phai	11	5285

Toilets	Kalay-7, Tamu-2, Southern-2, Central -1, Matupi 1	Zatual, Sekan, Kan Taya, Vutbuak, Pyin Taw Oo, CiCai, Min Hla. Kyun Taw Ye Sin, Bokkan, Lay Dauk Kan, Dallah Taung Tha, Taungoo , Hal Tu	Zatual, Sekan, Kan Taya, Vutbuak, Pyin Taw Oo, CiCai, Min Hla. Kyun Taw Ye Sin, Bokkan, Lay Dauk Kan, Dallah Taung Tha, Taungoo , Hal Tu	96	2530
Paving Street	Kalay-1, Tamu-2, Southern-3	Pyin Taw Oo, Khaw Hmun Nuam Bago, Lay dauk Kan	Pyin Taw Oo, Khaw Hmun Nuam Bago, Lay dauk Kan	7	7393
School building/fence / furniture/Ceiling	Kalay-1, Southern-2, Tamu-1, Central-2 Matupi-1	Sadaw, Dallah, Hle Seik, Kanan, Htoe War Chaung, Taunggyi, Hmungtung	Sadaw, Dallah, Hle Seik, Kanan, Htoe War Chaung, Taunggyi, Hmungtung	7	2454
Bridge	Tamu	Khaw Hmun Nuam	Khaw Hmun Nuam	1	600
Motorbike parking	Tamu-1	Kanan	Kanan	1	2420
Solar panel	Kalay-2	Saw Bua Ye Sin, Suh Khin Ta Ya	Saw Bua Ye Sin, Suh Khin Ta Ya	22	124
Hydro power	Matupi-1	Tuisip	Tuisip Village	1	120
Blood Bank(20 Unit)	Kalay-1	Tahan	Tahan	1	2000
Day Care building	Kalay-1	Hakhalay	Hakhalay	1	175
Sub-Total					23,101
TOTAL					152,654

Table 4: No. of Capacity Building Conducted					
Year	ACTIVITIES	LOCATION	MALE	FEMALE	TOTAL
2013	Integrated mission & community development tools	Yangon, Southern District	8	10	18
	Integrated missions & Community development tools	Taunggyi,	10	7	17
	Administration and Finance training	Tarmwe, (Southern and Central)	23	28	51
	Administration and Finance training	Tahan (Kalay and Tamu)	27	19	46
	Monitoring and Evaluation workshop	CFOT, for 4 District, 1 Section	19	23	42
	Micro-credit & LOM training	Pyu (Central District)	10	33	43
	Orientation of project Log frame, Policies and guidelines	Tarmwe , Southern District	7	8	15
	Integrated mission & community development tools	CFOT (for Cadets)	5	6	11
	Orientation of Project log frame , Policies and guideline	Matupi	22	16	38
	Orientation of Project log frame , Policies and guideline	Pyu, Central	6	4	10
	Orientation of Project log frame , Policies and guideline	Kalay	28	19	47
	Orientation of Project log frame , Policies and guideline	Tamu	10	7	17
2014	Internal Evaluation development tools training	Yangon	6	5	11
	VDCs and SHGs training on Community Development	Taunggyi, Central District	18	23	41
	VDCs and SHGs training on Community Development	Khampat, Tamu District	26	16	43

	VDCs and SHGs training on Community Development & Health Awareness	Falam, Kalay District	22	31	53
	VDCs and SHGs Training on Community Development	Tarmwe, Southern District	6	21	27
	VDCs and SHGs Training on Community Development	Pyu, Central District	21	6	27
	VDCs and SHGs Training on Community Development	Aye Tha Yar, Taunggyi	4	10	14
	Basic Health and First Aid training for Community health workers with women officers	Tahan, Kalay	9	54	63
	Micro-credit and skill training	Kalay,Tamu,Southern,Central,Matupi and Taunggyi (10 times a year)	41	286	327
2015	Youth Development Strategy Consultation	Yangon (for 5 District	20	18	30
	Basic document Case Study	Yangon (for 5 District)	9	11	20
	Psychosocial support and Counselling training for health worker, community worker and home and hostel staff	Yangon	4	19	23
	Internal evaluation data Analysis	Yangon	5	6	11
	TAG training for RHQ staff and Dos and DDWMs	Yangon	10	15	25
	VDCs and SHGs Training on Community Development	Kalay District(Dimzang,-54,Tui Khin Zaang-42,Zatual-24, Saw Bua Yee Sin-33)	96	57	153
	VDCs and SHGs Training on Community Development	Tamu (Khampat+,Kanan-34, Bokkan-30 Janglenpai-30,Htantabin-40, Khaw Hmun Num-103)	120	117	237
	VDCs and SHGs Training on Community Development	Matupi(Matupi-15,Mindat-30,Haltu,Tuisip-10, Hmuntung-10)	30	35	65
2016	TAG training for officers	Matupi	5	7	12
	TAG training for Officers and staff	Khampat (Kalay+Tamu)	23	27	50
	TAG training for officers and staff	Yangon (Southern+Central)	12	17	29
	Proposal writing workshop (new proposal for 2017-2020)	Yangon	5	5	10
	Data Collection for Base Line Survey	Yangon	9	6	17
	Case study writing workshop	Kalay	8	10	18
	Youth participation in community mission	Yangon, for lower	10	10	20
	Youth participation in community mission	Kalay for Upper	26	14	40
	Human right and Gender training for VDCs and SHGs	Yangon	14	13	27
	Data Collection training for Context Analysis	Yangon	10	5	15
TOTAL			744	1,024	1,768

Table 5: No. Of Facilitators trained								
YEAR	ACTIVITY	LOCATION	Trained Facilitators	MALE	FEMALE	Corps	Villages	Trained
2013	Monitoring and Evaluation	Kalay, Tamu Central Southern, Matupi	20	12	8	10 Corps	10 Villages	LO:20 (M:12,F-8) SHG: 30 (M15,F15) VDC: 10 (M7, F3)
	Proposal writing	Kalay, Tamu, Southern, Central, Matupi	30	16	14	20 corps	20 villages	LO: 15 (M10,F5) SHG: 20(M13,F7) VDC: 10(M6,F4)
	Integrated Mission & Community development tools	Kalay, Tamu, Southern, Central, Matupi	100	69	31	15 Corps	15 Villages	LO: 30 (M22,F8) SHG:60(M28,F12) VDC:20(M16,F4)
2014	VDCs and SHGs For Community Development	Kalay, Tamu, Southern, Central, Matupi	205	97	108	20 Corps	20 Villages	LO: 60 (M 32,F28) VDC:50(M38,F12) SHG:80(M45,F35)
2015	Case Study	Yangon 16	20	9	11	10 corps	10 Villages	VDC:20(M12,F8) SHG: 30(M 18,F22)
Total			375	203	172			

Table 6. Number of networking and Consultation Conduced

ACTIVITY	LOCATION	Participants	Corps	Supported
Project orientation	4 Districts	Officers&staff-117 (M:71/F46)	25 Corps	69SHGs:1068 (M:641/F:472) 14VDCs:98 (M:64/F:34)
Networking	MINA(Myanmar Interfaith Network On HIV/AIDS)	13 NGOs	N/A	N/A
	Burnet	10NGOs	N/A	N/A
	MPG (Myanma Positive Group)	10 NGOs	N/A	N/A
	Ratana Myinta Foundation	5NGOs	N/A	N/A
	Garuna Myanmar Social Srevices	13 NGOs	N/A	N/A
	CBI(Capacity building Initative)	6 NGOs	N/A	N/A
Consultation	Tamu	600	10 corps	Young people-600 (M278,F322)
	Southern	29	6 Corps	Young people-29 (M16,F13)
	Central	40	6 Corps	Young people-40 (M13,F27)
	Kalay	55	5 Corps	Youth leader-55 (32,23)
Networking	MINA	13 NGOs	N/A	N/A
Networking	MINA	13 NGOs	N/A	N/A
	CHGN	10 NGOs	N/A	N/A
Consultation	Yangon	10		
Networking	MINA	13 NGOs	N/A	N/A
	CHGN		N/A	N/A
	MCC	10 NGOs	N/A	N/A
	MBC	5 NGOs	N/A	N/A

1.4 Site observed and number of people interviewed

Kalay District

Workshop with 13 staff from Kalay and Tamu District at Kalay DHQ

Letpanchaung – Toilet, Tube well - 13 VDC, SHG, Youth leaders and 2 Micro-credit members

Pyin Taw Oo - Tube well, road repaired, Micro-credit - 5 SHGs and 5 Micro-members

Aung Ywa – School furniture, Clinic, Library – 1 nurse, 1 School head master

Min Hla- Bridge

Myauk Chaw Taw- School (residence for teachers)

Tamu District

Khampat village – Public Toilet, tube well, Micro-credit-10 SHGs and 4 Micro-credit members

Kanan Village - Duck farming, tube well, private toilet - 3 SHGs

Khaw Hmun Nuam- Bridge and Road repair

Htan Ta Bin Village- Oxygen bottles and Privat toilet, tube well - 2 SHG members

Southern District

Meeting with DO, DDWM, Project coordinator and community worker, Corps Officer.
Dallah – Road repair, private toilets and micro-credit work – 10 Blood Donor SHGs, 5
Micro-credit members, 2 PLHIV members.

Central District

Yeni – tube wells, Public toilet and Micro-credit work
Pyar Sa Khan Village- Water
2 school teacher, 2 Community leaders, 3 SHGs members, 3 Micro-credit members

Some photos



1. Group photo at Kalay DHQ – External Evaluation members. Workshop On 1 Dec 2016



2. Group interview at Letpanchaung with VDC, SHG, Youth leaders and Micro-credit



3. Min Hlat Middle School – Benchs and Desks supported by Min HLa SHG group



4. Group interview at Pyin Taw Oo



5. Tube well in Pyin Taw Oo



1. Micro-credit Loan ; Waving group