

# FANTA III

FOOD AND NUTRITION  
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## **Qualitative Evaluation of Food for Peace Development Food Assistance Projects in Bangladesh**

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## Abbreviations and Acronyms

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ANC	antenatal care
BCC	behavior change communication
BMI	body mass index
BRAC	Bangladesh Rural Advancement Committee
CHV	community health volunteer
CLP	Char Livelihoods Program
CMAM	community-based management of acute malnutrition
DMC	disaster management committee
DRR	disaster risk reduction
ECCD	early childhood care and development
EKATA	empowerment, knowledge, and transformative action
EPI	Expanded Programme on Immunization
FANTA	Food Assistance and Nutrition Technical Assistance III Project
FFP	Food for Peace
FGD	focus group discussion
FY	fiscal year
GMP	growth monitoring and promotion
GOB	Government of Bangladesh
HDSS	Household Dietary Diversity Score
iDE	International Development Enterprises
IDI	in-depth interview
IGA	income-generating activity
IR	Intermediate Result
kg	kilogram(s)
KII	key informant interview
L	liter(s)
LSP	livestock service provider
M&E	monitoring and evaluation
MAHFP	months of adequate household food provisioning
MCHN	maternal and child health and nutrition
MUAC	mid-upper arm circumference
MYAP	Multi-Year Assistance Program
NGO	nongovernmental organization
PCI	Project Concern International
PEP	poor and extreme poor
PLW	pregnant and lactating women
PM2A	preventing malnutrition in children under 2 approach
PNC	postnatal care

PROSHAR	Program for Strengthening Household Access to Resources
RDRS	Rangpur Dinajpur Rural Service
RUTF	ready-to-use therapeutic food
SAAO	sub-assistant agriculture officer
SC	Save the Children International
SHOUHARDO	Strengthening Household Ability to Respond to Development Opportunities Program
SO	Strategic Objective
SOW	scope of work
TIPS	Trials of Improved Practices
UDMC	union disaster management committee
UP	union parishad
USAID	U.S. Agency for International Development
USG	U.S. Government
VDC	village development committee
WASH	water, sanitation, and hygiene

## Executive Summary

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This report presents the findings of a third-party qualitative final evaluation of three 5-year development food assistance projects (formerly known as Multi-Year Assistance Programs [MYAPs]) in Bangladesh, funded in FY 2010 by the U.S. Agency for International Development’s (USAID) Office of Food for Peace. The projects were designed to address problems of household food insecurity in vulnerable areas of the country through activities related to livelihoods and agriculture, maternal and child health and nutrition (MCHN), disaster risk reduction (DRR), and women’s empowerment. The evaluation was implemented by the Tufts University Friedman School of Nutrition Science and Policy through the Food and Nutrition Technical Assistance III Project (FANTA).

The three projects were:

1. Save the Children’s Nobo Jibon (“New Life”) Program, implemented in 11 *upazilas* of three districts in Barisal Division
2. ACDI/VOCA’s Program for Strengthening Household Access to Resources (PROSHAR), implemented in three *upazilas* of three districts of Khulna Division
3. CARE’s Strengthening Household Ability to Respond to Development Opportunities II Program (SHOUHARDO II), implemented in four regions: north (North Char), northeast (Haor), northwest (Mid Char), and southeast (Coastal) of the country, reaching 31 *upazilas* in 11 districts

This evaluation used a variety of qualitative primary data collection methods, including in-depth interviews with beneficiaries and non-beneficiaries, focus group discussions, and key informant interviews with key stakeholders, to answer evaluation questions relating to project effectiveness; linkages and coordination with the Government of Bangladesh (GOB), other U.S. Government (USG), and other donor activities; effectiveness of DRR approaches, women’s empowerment efforts, and behavior change communication (BCC) strategies; and unintended positive and/or negative effects. Recordings from 167 interviews were transcribed, translated, imported into the NVivo qualitative analysis software package, and analyzed. The evaluation team also undertook a secondary document review to develop the qualitative design and instruments.

**Table ES-1** summarizes the evaluation’s findings with regard to seven evaluation questions.

**Table ES-1. Summary of Evaluation Findings by Project and by Evaluation Question**

Evaluation questions	All three projects	Nobo Jibon	PROSHAR	SHOUHARDO II
1. Effectiveness in meeting strategic objectives	All three projects were successful in reducing household food insecurity and improving health and nutritional well-being in most targeted households. Projects were also effective in provision of localized MCHN services and counseling during implementation period.	Nobo Jibon livestock and fisheries service providers were particularly effective in provision of services that appear sustainable. Nobo Jibon also expanded input markets and successfully utilized lead farmers and collection centers.	PROSHAR, using master trainers and farm business advisors, was remarkably effective in making livelihoods work sustainable.	SHOUHARDO II's Comprehensive Homestead Development, field crop production (rice), livestock rearing, and income-generating activities led to higher-than-expected profits.
2. Effectiveness of linkages with government and nongovernment services	Linkages with government were strongest in livestock and fisheries and weakest in MCHN. Linkages with other projects were weak or nonexistent.	Village health committees formed by Nobo Jibon helped government in MCHN service delivery.  Government agriculture, fisheries, and livestock extension workers provided training to beneficiary farmers and usually continued with service provision.	PROSHAR was generally effective in connecting livelihoods beneficiaries with the respective government extension officers. However, the project was less effective in establishing government linkages in the health sector.	SHOUHARDO II used management score sheets to rate union committees, service fairs, "open budget" facilitation, and activation of special committees used to improve scores.  The project was highly effective in connecting beneficiaries with government officials.
3. Effectiveness of DRR approaches	Projects facilitated DRR preparedness in coverage areas despite government attention focused primarily on disaster relief.	Although Nobo Jibon focused on strengthening the capacity of households, local communities, and union parishads to cope with hazards through building of community resilience, less of the Nobo Jibon effort was directed at strengthening existing government systems.  Nobo Jibon-established community-based disaster groups were largely ignored by the government system and are no longer functioning.	PROSHAR provided valuable inputs to prepare households and train volunteers. However, the PROSHAR-established community-based disaster groups were largely ignored by government and are no longer functioning.	SHOUHARDO II's success resulted from prioritization of areas according to vulnerability, training, and equipping of union disaster management committees and from well-organized contingency planning.
4. Coordination with GOB, other USG, and other donor activities	Coordination, except with GOB services, was a weakness in all three projects. Multiple examples of multi-project duplication among the same target groups, particularly in SHOUHARDO II areas. Examples provided in main text.			
5. Effectiveness of approaches to gender issues	Positive findings, differing substantially from the findings of the quantitative evaluation.	Notable progress, although not a strategic objective.	Notable progress, although not a strategic objective.	Addressing gender issues was an explicit strategic objective of SHOUHARDO II. There were highly impressive results, particularly in mobility, participation in decision making, and awareness (sometimes leading to group action, including action by adolescent girls).

Evaluation questions	All three projects	Nobo Jibon	PROSHAR	SHOUHARDO II
6. Unintended positive and/or negative effects	<p><i>Positive:</i></p> <ul style="list-style-type: none"> <li>• Effect of economic improvement on family harmony greater than anticipated.</li> <li>• Income-generating activities rescued many households that lost farmland due to erosion.</li> </ul> <p><i>Negative:</i></p> <ul style="list-style-type: none"> <li>• Occasional exacerbation of dependency culture (e.g., why pay for a latrine when it is likely to be provided free by some organization).</li> <li>• Increased women’s employment adversely affects exclusive breastfeeding.</li> </ul>			
7. Effectiveness of BCC and extension strategies	Impressive in all projects.	<p>Particularly effective in:</p> <ul style="list-style-type: none"> <li>• Hygiene counseling</li> <li>• Improving pregnancy food intake</li> <li>• Improving understanding of problems associated with pregnancy in young girls</li> </ul>	<p>Particularly effective in:</p> <ul style="list-style-type: none"> <li>• Training and counseling on small livestock and fisheries</li> <li>• Increasing use of plinths for protection against disasters</li> </ul>	<p>Particularly effective in:</p> <ul style="list-style-type: none"> <li>• Vegetable cultivation using beds, better seeds, and improved practices</li> <li>• Provision of short-duration rice seed varieties to combat food insecurity in the October–December lean season</li> <li>• Improving disaster preparedness by households</li> </ul>

Evaluation findings also included the following, each pertinent to the overall evaluation purpose.

- **Strategic Thrust:** The projects opened up previously underexploited rural opportunities, generating income through homestead production, livestock, fisheries, and small business activities not requiring farmland.<sup>1</sup>
- **Breadth of Services:** SHOUHARDO II included a broad range of multisectoral nutrition-sensitive activities (taking advantage of the synergistic benefits of combining agriculture; health; education; and water, sanitation, and hygiene). Nobo Jibon provided fewer sets of activities, while PROSHAR provided only one or two.
- **Targeting:** The team noted multiple differences and inconsistencies in terminology and definitions, particularly of “extreme poor” and “poor,” and in targeting processes among the three projects. The team also found (through its own food insecurity scoring) multiple cases of mis-targeting in all three projects, as specified in the report.
- **Exit Strategies:** Appropriate exit strategy planning and monitoring from project onset might have increased the opportunity for post-project sustainability.
- **Project Monitoring:** While project monitoring data were transferred smoothly from project sites to project headquarters for potential analysis and to fulfill the USAID reporting requirements, none of the projects actively utilized data for the purpose of identifying and rectifying problems in implementation as they arose.
- **The Ration:** While the ration has been particularly helpful in improving food consumption during “the first 1,000 days,” particularly for households experiencing economic hardship, the provision of this input is, by itself, unsustainable. While the government could continue ration provision subsequent to donor-provided food ration projects, as has been the case in some other countries, it has not been the case in Bangladesh.<sup>2</sup>
- **Unintended Effects:** The projects had multiple unintended positive effects. Among the most important were (a) improved relationships between spouses as incomes and household food security improved and (b) the highly positive effects of the income-generating activity component of projects in rescuing farm families that had lost farmland due to soil erosion. Among the unintended negative effects were, in some areas, the exacerbation of a dependency culture.

## Relationship to Quantitative Evaluations

An important potential contribution of a qualitative evaluation is the provision of context and an in-depth understanding of the results of a quantitative evaluation. This qualitative evaluation was somewhat limited in that the final quantitative evaluations were completed only after Institutional Review Board review of protocols of this evaluation had been completed and the protocols finalized. Nonetheless, some efforts were made to probe respondents about particular project quantitative evaluation findings; to assess the extent to which they are consistent with the understandings of project beneficiaries, project staff, and government officials; and, where

<sup>1</sup> USAID estimates that every 1% increase in agricultural income per capita reduces the number of people living in extreme poverty by between 0.6% and 1.8%. See: USAID. n.d. “Agriculture in Bangladesh: Results of USAID’s Agriculture spending.” Available at: <https://results.usaid.gov/bangladesh/economic-development/agriculture#fy2014>.

<sup>2</sup> The GOB earlier provided targeted food supplements to “at-risk” pregnant women and young children in the Bangladesh Integrated Nutrition Project and the National Nutrition Program, but these are no longer operating.

possible, to provide some context for these findings. The results of these assessments are provided throughout the report and then are summarized in Annex 7. Overall, this evaluation was able to confirm, and in some cases shed light on, the quantitative evaluation findings. The one exception relates to gender issues, where this evaluation found substantially greater improvements than the quantitative evaluation.

## Recommendations

It is recommended that new food security-related projects in Bangladesh, including the new FFP development food assistance project initiatives, seek to embody the following.

### Program Structure

- Encourage programs to be genuinely multisectoral, providing inputs from multiple sectors to the same targeted food-insecure households, thus taking advantage of the synergies of convergence in vulnerable areas of the country.<sup>3</sup>
- Include adequate resources to ensure full administrative backstopping for each of these multisectoral activities. While SHOUHARDO II's multiple and convergent activities took full advantage of these synergies, CARE regional offices were clearly challenged to adequately backstop all of the project's activities.
- Encourage consistent definitions of beneficiary categories (e.g., "extreme poor," "poor") among projects, and require projects to write up and make available their intervention methods (e.g., in women's empowerment, which groups targeted with which messages).

### Livelihoods

- Continue to take full advantage of the still considerable income-generating opportunities in rural Bangladesh for homestead production, livestock, fisheries, and small businesses.
- Continue creative efforts to increase the focus of livelihood initiatives on women, including increases in the employment of female agriculture extension agents.
- While continuing to focus on the poorest and most vulnerable, begin to integrate value chain approaches and "what-can-be-scaled-up" thinking into income-generating activity planning.

### MCHN

- Working closely with USAID health staff and other MCHN partners, explore means of providing preventive health and nutrition services in the large number of vulnerable local areas that are without reasonable access to community clinics or other government services.
- Include Trials of Improved Practices (TIPS) or other formative research approaches in projects to reduce gaps between MCHN knowledge and practices.

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<sup>3</sup> See, e.g.: Levinson, F. James and Balarajan, Yarlina. 2013. "Addressing Malnutrition Multisectorally: What have we learned from recent international experience? Case Studies from Peru, Brazil and Bangladesh." New York: United Nations.

- In future projects focused on adolescent girls, provide them with weekly iron/folate supplements in schools or through empowerment, knowledge, and transformative action (EKATA)<sup>4</sup>-type activities.<sup>5</sup>

### Women's Empowerment

- Carry out positive deviance inquiries at the outset of these programs to identify households where reasonable threshold levels of women's empowerment exist, identify what is different about these households, and seek to use these positive deviant behaviors and characteristics in future women's empowerment activities.
- While the increased employment of women appears to have had limited negative effect on child care practices (the one exception being inadequate exclusive breastfeeding in two of the projects<sup>6</sup>), this issue deserves continued attention should future efforts be made to increase women's employment away from the home. Should this problem prove significant, new projects also could explore alternative child care options.

### Disaster Preparedness and Management

- Working together with other development partners, encourage government efforts to shift primary government disaster management attention from what is now largely *post*-disaster responses to *pre*-disaster protection. Without government officials at the *upazila* and union levels whose sole responsibility is to address disaster management issues, such efforts will be inherently limited.
- Focus primary sub-district disaster-related attention in new projects on the strengthening of existing government disaster management systems and structures and on encouraging improved disaster preparedness and management activities within this structure.

### Linkages

- Promote joint field visits by program staff carrying out similar programs in the same districts, the active sharing of program information, and the avoidance of unproductive overlap. Do, however, encourage combined programming where possible to permit multisectoral convergence (e.g., adding sanitation or educational services where only livelihoods and MCHN are in place) in new programs.

### Monitoring and Evaluation

- Place a premium not only on timely reporting but also, in program monitoring (carried out reasonably well in the programs evaluated), on the local utilization of data, using

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<sup>4</sup> EKATA groups comprise 20 adult women and 15 unmarried adolescent girls that were organized to learn about the empowerment topics in more detail, to build leadership skills, and to prepare to confront neighbors to prevent early marriages and domestic violence.

<sup>5</sup> While the evaluation did not collect data on adolescent nutritional status, the World Health Organization estimates of anemia among adolescent girls in Bangladesh (30%), the relative absence of attention to the problem in the country, and the opportunity presented in such projects appear to justify its inclusion here.

<sup>6</sup> It remains a mystery why the prevalence of exclusive breastfeeding should have decreased in Nobo Jibon and SHOUHARHO II but increased in PROSHAR. The relationship of exclusive breastfeeding with household food security levels and the nature and location of women's employment needs to be explored in future projects as part of a more general exploration of the determinants of exclusive breastfeeding prevalence.

management by exception principles to identify, and then focus on, *upazilas* and unions that do not meet predetermined minimal acceptable levels on key indicators.

### **Exit Strategies and Sustainability**

- Require that programs develop carefully constructed exit strategies at project inception and that these exit strategies be monitored as diligently as the programs themselves. USAID should then ensure that post-exit evaluations of these exit strategies are carried out (ideally 2 years after program completion).
- Relatedly, assess whether the positive effects (e.g., on food security and women's empowerment) noted in this qualitative study have been sustained 1 or 2 years after the completion of these three projects and apply sustainability-related lessons to new FFP development food assistance projects. Where sustainability has not been achieved, discussions with the GOB would be useful and solutions should be sought.

## 1. Introduction

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### 1.1 Purpose of the Evaluation

This report presents the findings of a third-party qualitative final evaluation of three 5-year development food assistance projects, formerly known as Multi-Year Assistance Programs (MYAPs), in Bangladesh funded in FY 2010 by the U.S. Agency for International Development's (USAID) Office of Food for Peace (FFP). It is worth noting that the Bangladesh program is the second largest FFP program in the world, with projects now totaling more than US\$42 million a year. The three projects were operated by CARE, Save the Children International (SC), and ACDI/VOCA. Each of the projects sought to address problems of food insecurity in particularly vulnerable areas of the country through a range of activities providing income-generating opportunities; improved agricultural productivity; improved maternal and child health, hygiene, and nutrition; improved access to a clean water supply and sanitation; and disaster preparedness and mitigation.

The evaluation was implemented by the Tufts University Friedman School of Nutrition Science and Policy in June and July 2015 through the Food Assistance and Nutrition Technical Assistance III Project (FANTA) with funding from FFP/Washington.

The evaluation sought to qualitatively examine the effects and processes of these programs to assess how well they have proceeded and, more generally, to provide insights on optimal means of improving household food security and nutrition in deprived areas of Bangladesh through the food/agriculture and health sectors and through women's empowerment and disaster management. The evaluation will hopefully prove useful, more generally, to present and future USAID FFP projects with similar objectives, particularly in Bangladesh.

The primary evaluation questions posed by USAID and that the evaluation sought to investigate were<sup>7</sup>:

- How effective were the projects in meeting their strategic objectives?
- How effective were their linkages with government and nongovernment services, and what is the perceived sustainability of project activities?
- How well did communities and institutions associated with the projects prepare for and respond to disasters?
- How well coordinated were the projects with other Government of Bangladesh (GOB), U.S. government (USG), and donor activities?
- How effective were the projects in addressing gender issues?
- What were the unintended positive and negative effects?
- How effective were project behavior change communication (BCC) and extension strategies?

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<sup>7</sup> The questions as fully stated in the scope of work can be found in Annex 8.

This report seeks to provide answers to these questions for both the combined and the individual FFP development food assistance projects.

## 1.2 Country Context and Development Problem

Bangladesh has made impressive progress in recent years in its growth and development. Presently categorized as a “lower middle income country,” the government aspires to achieve “middle income” status by its 50th anniversary of independence in 2021.<sup>8</sup> During the past decade, the economy has grown at nearly 6% per year, while poverty dropped by nearly a third. An estimated 15 million Bangladeshis have moved out of poverty since 1992.<sup>9</sup>

At the same time, the absolute number of people living below the poverty line, an estimated 47 million, is high, and many people are still vulnerable to natural disasters.<sup>10</sup> The country continues to be hampered by annual floods and cyclones, while low-lying areas of the country are particularly vulnerable to the effects of climate change, with major implications for the country’s agricultural economy. (Bangladesh has been cited as the nation most vulnerable to global climate change in the world, according to Germanwatch’s Global Climate Change Index.<sup>11</sup>)

With improved health services, under-5 mortality has dropped from 139 (per 1,000 live births) in 1990 to 46 in 2013.<sup>12</sup> Maternal mortality, however, remains high, at 240 (per 100,000 live births), as does anemia among non-pregnant women (40%).<sup>13</sup> Only 51% of pregnant Bangladeshi women are receiving any antenatal care (ANC).

Unlike its South Asian neighbors India and Pakistan, Bangladesh is on course to meet global targets for reducing stunting among children under 5. Although the prevalence of stunting is still high, at 36% (43% in rural areas and 54% in the poorest wealth quintile), it has dropped from 41% in 2011, 51% in 2004, and 60% in 1996. A key contributor to stunting reductions has been the country’s success in reducing open defecation to less than 5% (in India, the estimate is 40%). Bangladesh has also made impressive progress in its coverage of vitamin A supplementation (94%) and iodized salt coverage (82%). In terms of other nutrition-related indicators, e.g., adult overweight and obesity, the country has done less well. And dietary diversity remains inadequate, with rice supplying 71% of calorie intake and 54% of protein intake. Only 21% of children aged 6–23 months receive the minimum acceptable diet.<sup>14</sup>

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<sup>8</sup> The GOB “Vision 2021” plan and the associated “Perspective Plan: 2010–2021” lay out a series of targets for 2021, including that of attaining a poverty headcount of 14% by 2021 and “middle income country” status. The likelihood that the target will be achieved is explored in: Giménez, Lea; Jolliffe, Dean; and Sharif, Iffath. 2013. “Bangladesh, a Middle Income Country by 2021: What will it take in Terms of Poverty Reduction?” Washington, DC: World Bank Group.

<sup>9</sup> Bangladesh Bureau of Statistics and World Bank. 2011. “Bangladesh Household Income & Expenditure Survey 2010.” Washington, DC: World Bank.

<sup>10</sup> World Bank. 2016. “Overview.” Available at: <http://www.worldbank.org/en/country/bangladesh/overview>.

<sup>11</sup> Kreft, Sönke; Eckstein, David; Dorsch, Lukas; et al. 2015. “Global Climate Risk Index 2016: Who Suffers Most From Extreme Weather Events? Weather-Related Loss Events in 2014 and 1995 to 2014.” Bonn: Germanwatch.

<sup>12</sup> UNICEF. 2013. “Improving Child Nutrition: The achievable imperative for global progress.” New York: UNICEF.

<sup>13</sup> Ibid.

<sup>14</sup> Ibid.

Within Bangladesh, there are substantial regional differences in nutrition and health indicators. Stunting prevalence ranges from 31% in Barisal Division to 51.3% in Sylhet Division.

The prevalence of non-pregnant women of reproductive age with a body mass index (BMI) <18.5 ranges from 47.6% in Khulna to 59.6% in Sylhet.<sup>15</sup>

In terms of policies, a National Nutrition Policy was drafted in 2015 and is awaiting cabinet approval. A substantial Nutrition Background Paper was prepared to inform the 7th Five Year Plan that will go into operation in mid-2016. Revisions to the National Food Policy Plan of Action (2008–2015) are ongoing. The country developed a draft National Nutrition Communication and Advocacy Strategy, and Bangladesh is a signatory to the International Breast Milk Substitutes Code.<sup>16</sup>

Overall, the continued high prevalence of stunting in Bangladesh, coupled with the economic and climatic vulnerability of significant proportions of the population and the effectiveness of past development projects in addressing these problems, more than justifies the existence of FFP development food assistance projects and comparable projects in the country.

### 1.3 Project Descriptions

The three projects of focus for this evaluation are described below.

#### 1.3.1 Save the Children – Nobo Jibon Program

SC implemented the Nobo Jibon (“New Life”) Program from June 2010 to May 2015. The total life of activity funding was approximately US\$52 million, provided by FFP, the GOB, and SC. Nobo Jibon targeted the most vulnerable and marginalized households of the cyclone-prone Barisal Division of Bangladesh.

The goal of Nobo Jibon was to reduce food insecurity and vulnerability for 191,000 households in 11 *upazilas* within the three districts of Barisal Division in southern Bangladesh.

#### 1.3.2 ACDI/VOCA – Program for Strengthening Household Access to Resources

ACDI/VOCA implemented the Program for Strengthening Household Access to Resources (PROSHAR) from June 2010 to May 2015. The total life of activity funding was approximately US\$46 million, provided by FFP, the GOB, and ACDI/VOCA. PROSHAR was implemented in partnership with Project Concern International (PCI). PROSHAR targeted the most vulnerable, marginalized households of coastal cyclone-prone and food-insecure Khulna Division. The goal of PROSHAR was to reach 43,000 poor and ultra-poor beneficiaries in three *upazilas* in three districts of that division.

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<sup>15</sup> Bangladesh Bureau of Statistics. 2013. “Child and Mother Nutrition Survey 2012.” Dhaka: Bangladesh Bureau of Statistics, Statistics and Informatics Division, and Ministry of Planning.

<sup>16</sup> Scaling Up Nutrition. 2015. “Bangladesh.” Available at: <http://scalingupnutrition.org/sun-countries/bangladesh>.

### 1.3.3 CARE – Strengthening Household Ability to Respond to Development Opportunities II Program

CARE implemented the Strengthening Household Ability to Respond to Development Opportunities II Program (SHOUHARDO II) from June 2010 to May 2015. The 5-year project built on the previous SHOUHARDO, implemented from FY 2004 to 2010, which established an effective, integrated model for reducing child malnutrition while contributing to greater livelihood security and women’s empowerment. The total life of activity funding was approximately US\$126 million, provided by FFP, the GOB, and CARE USA. The goal of SHOUHARDO II was to reach 370,000 poor and extreme poor households in 1,573 villages located in 172 unions in 31 *upazilas* located in 11 districts in four regions of Bangladesh (north, northeast, northwest, and southwest).

**Table 1** summarizes the interventions included in each of the projects and their design features.

**Table 1. Content and Design Features of FFP Development Food Assistance Project Interventions**

	Nobo Jibon	PROSHAR	SHOUHARDO II
<b>Agriculture and Livelihoods Component</b>			
# beneficiaries reached (rounded – see Annex 4)	86,000	43,000	370,000
Targeted beneficiaries	Pregnant and lactating women (PLW) and extreme poor, homestead productive poor, and productive poor households	PLW, ultra poor, poor, and marginal poor households	PLW and poor and extreme poor (PEP) households (social mapping by the community, well-being analysis and categorization of households in the PEP categories)
<b>Definitions</b>			
Extreme poor	Landless or small land and/or no productive assets		Community-based selection, various aspects
Homestead productive poor	Small land and/or some productive assets		
Productive poor	Moderate land and/or productive assets		
Ultra poor		<10 decimals of land <sup>17</sup>	
Poor	Some access to land or water	10–50 decimals of land	Community-based selection, various aspects
Marginal poor		>50 decimals of land	
		Significant labor, land, and/or water resources	

<sup>17</sup> 1 decimal = 1/100 of an acre.

	Nobo Jibon	PROSHAR	SHOUHARDO II
<b>Project positions created:</b>			
Agriculture	Lead farmer	Master trainer	Community agriculture volunteer
Livestock	Local livestock service provider (LSP)	Vaccinator	Local LSP
Off-farm		Off-farm advisor, women's business network leader	Collector
<b>Maternal and Child Health and Nutrition Component</b>			
# beneficiaries reached (rounded – see Annex 4)	225,000	30,000	303,000
<b>Food ration to women:</b>			
Size (wheat, lentils, oil) per month	PLW (until the child is 6 months): 6 kg wheat, 0.9 kg lentils, 0.6 kg oil 6–24 months children: 2.25 kg wheat, 0.45 kg lentils, 0.3 L oil	PLW (until the child is 6 months): 7 kg wheat, 2 kg lentils, 0.5 kg oil 6–24 months children: 3 kg wheat, 0.5 kg lentils, 0.5 L oil	PLW (until the child is 24 months): 10 kg wheat, ½ kg lentils, 1 kg oil 6–24 months children: 10 kg wheat, ½ kg lentils, and 1 kg oil
Length of distribution	Various lengths depending on when the pregnant women enrolls in the program (usually first trimester) until the child is 2 years old		
Conditions for women during pregnancy	ANC visits and attendance at courtyard sessions	ANC visits and attendance at Care group sessions	ANC visits, attendance at Care group sessions, and home visits
Conditions for children birth to 2 years	Growth monitoring and promotion (GMP) visits and attendance at courtyard sessions	GMP visits and attendance at Care group sessions	GMP visits, attendance at Care group sessions, and home visits
Program approach	Preventing malnutrition in children under 2 approach (PM2A)	PM2A	PM2A (17% of villages) and maternal and child health and nutrition (MCHN) (83%)
Project positions created	Village Health Committee	Mother leader (Care group trios)	Community health volunteer (CHV), positive deviant mother
Courtyard sessions – BCC, GMP, cooking demo	✓	✓	✓
<b>Disaster Risk Reduction Component</b>			
# beneficiaries reached (rounded – see Annex 4)	444,000	20,000	110,000
Type of risk	Cyclone, flood	Cyclone, flood	Flood, river erosion (cyclone in Cox's Bazar)
Evacuation centers repaired/built	✓	✓	✓
Union parishad strengthening	✓	✓	✓
Project positions created	Community-based disaster management group	Community-based disaster management group	Disaster volunteers (mobilized)

	Nobo Jibon	PROSHAR	SHOUHARDO II
<b>Governance Component (or cross-cutting)</b>			
Project positions created	Village development committee (VDC)	–	VDC
<b>Women’s Empowerment Component (or cross-cutting)</b>			
Women as asset recipients	✓	✓	✓
Men and boys engaged (numerous venues)	✓	✓	✓
<b>BCC through Livelihood and MCHN courtyard sessions for men and women to focus on:</b>			
Women’s control of income earned	✓	✓	✓
Joint/own decision making	✓	✓	✓
Women’s mobility	✓	✓	✓
Child marriage, dowry, and violence against women	Efforts to discourage child marriage – although not a strategic objective of the project	Efforts to discourage child marriage – although not a strategic objective of the project	✓
Empowerment, knowledge, and transformative action (EKATA) groups to focus on child marriage, dowry, and violence against women	–	–	✓

## 2. Evaluation Methodology

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### 2.1 Geographic Areas Included in the Evaluation

The team conducted interviews in June and July 2015, with members of *upazilas* from each of the districts covered by the three projects. *Upazilas* within districts where interviewing was to take place were identified with the assistance of the team's local logistical coordinator, being sure to cover both readily accessible and less accessible areas. *Upazilas* were divided into different strata, and villages were randomly chosen from within *upazilas* to ensure the greatest variability across livelihood strategies, agro-ecological zones, and access to resources and services. Random selection was considered important because the evaluation team could visit so few of the project villages—4 of more than 1,300 in the Nobo Jibon areas, 3 of more than 400 in the PROSHAR areas, and 17 of more than 1,500 in the SHOUHARDO II areas.<sup>18</sup> Selected villages were located 1–4 hours away from the nearest cities, near and far from main roads.

### 2.2 Evaluation Design and Sampling Methods

The evaluation made use of several qualitative primary data collection methods: in-depth interviews (IDIs) with beneficiaries and non-beneficiaries; focus group discussions (FGDs) with beneficiaries and non-beneficiaries; and key informant interviews (KIIs) with service providers, government officials, staff members, partner nongovernmental organizations (NGOs), and other key stakeholders.

**In-depth interviews** were conducted with individual beneficiaries and non-beneficiaries from households and were chosen purposively. They were chosen by evaluation team members after discussion with a community member, often a project volunteer, e.g., an agriculture volunteer or a health volunteer, to ensure inclusion of beneficiaries of the livelihood, maternal and child health and nutrition (MCHN), disaster risk reduction (DRR), women's empowerment, and governance interventions, and to ensure inclusion of poor and extremely poor participants. The evaluation team aimed to interview one non-beneficiary for every seven beneficiaries in the first half of the data collection period, and then increased that proportion in the second half of the data collection period as more questions emerged that non-beneficiaries could answer.

**Focus group discussions** were organized with the assistance of the community. The evaluation team picked a community member, often a project volunteer, e.g. an agriculture volunteer or a health volunteer, to gather participants for the FGDs. The majority of FGDs were conducted with a set of individual beneficiaries, but one was also conducted with a village development committee (VDC), one with an Upazila Disaster Management Committee, and four with staff of the prime or implementing organizations.

**Key informant interviews** were carried out with government and nongovernment service providers, government officials, staff members, partner NGO staff, and other key stakeholders.

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<sup>18</sup> The disproportionately higher number of SHOUHARDO II villages is explained not only by the larger number of SHOUHARDO II project households (larger than the other two projects combined), but also by the much larger number of districts in which SHOUHARDO II operates and the evaluation team's commitment to visit every project district.

KIIs with local government officials at the union, *upazila*, and district levels were set up 1–3 days in advance, with the assistance of the respective project staff.

### 2.3 Data Collection Methods

The team reviewed a broad range of background documents, including annual and quarterly project reports, mid-term evaluations, and final quantitative evaluations. (Annex 1 includes the complete list of documents reviewed.) In addition to serving as input to the background literature review, the documents were used in planning the evaluation.

IDIs were in most cases conducted inside the households of beneficiaries or non-beneficiaries (or right outside in other cases) and lasted between 20 and 100 minutes. FGDs were conducted in a village meeting room (when available) or outside in a courtyard and lasted between 30 and 130 minutes. The majority of KIIs were scheduled to occur in the key informants' offices, while several of the key informants came to villages to meet the team. KIIs lasted between 20 and 60 minutes.

Although not part of the original protocol, the team also conducted some non-beneficiary interviews to get a better understanding of targeting/mis-targeting and to assess potential spillover benefits to non-beneficiaries.

The evaluation team collected data from each of the districts covered by the three projects. Since SHOUHARDO II covered a much larger number of districts than the other two projects combined, 17 days were devoted to data collection relating to that project while 4 days were devoted to Nobo Jibon and 3 days to PROSHAR. (See further discussion in Section 2.8, Limitations.)

The evaluation team members divided into two groups and conducted a total of 69 IDIs, 34 FGDs, and 64 KIIs. The types of interviews and focus groups are summarized in **Tables 2–4**.

**Table 2. Number and Type of In-Depth Interviews**

Type	Nobo Jibon	PROSHAR	SHOUHARDO II	Total
Women beneficiaries	3	2	17	22
Women non-beneficiaries	1	1	4	6
Men beneficiaries	5	2	16	23
Men non-beneficiaries	1	–	–	1
Elder women beneficiaries	3	1	8	12
Adolescent girl beneficiaries	–	–	3	3
Adolescent girl non-beneficiaries	–	–	2	2
<b>Total</b>	<b>13</b>	<b>6</b>	<b>50</b>	<b>69</b>

Almost all of interviews were conducted in Bangla; some meetings with service providers were carried out in English. The interviews were recorded with an Olympus digital voice recorder VN-722PC after receiving the consent of those being interviewed.

**Table 3. Number and Type of Focus Group Discussions**

Type	Nobo Jibon	PROSHAR	SHOUHARDO II	Total
Women beneficiaries	3	1	9	13
Men beneficiaries	2	1	7	10
Elder women beneficiaries	1	1	1	3
Women and girls, EKATA	–	–	1	1
Adolescent girls, EKATA	–	–	1	1
Upazila District Management Committee	–	–	1	1
Village Development Committee	–	–	1	1
Staff of the prime organizations and implementing partners	2	–	2	4
<b>Total</b>	<b>8</b>	<b>3</b>	<b>23</b>	<b>34</b>

The evaluation team consisted of two members who were native speakers fluent in Bangla and two more who were conversant. The fluent members led interviews, FGDs, and meetings, and translated questions and comments for participants from the team members.

**Table 4. Number and Type of Key Informant Interviews**

Type	Nobo Jibon	PROSHAR	SHOUHARDO II	Total
<b>Government officials</b>				
District Relief and Rehabilitation Officer (Strategic Objective [SO] 3 Disaster)	1	–	1	2
Upazila Agriculture Officers (SO1 Livelihoods)	1	–	3	4
Upazila Livestock Officers and Fisheries Officers (SO1 Livelihoods)	2	–	2	4
Upazila Health and Family Planning Officers and Union Parishad (UP) Health Assistants (SO2 MCHN)	1	–	4	5
Upazila Women's Affairs Officers (SO5 Women's Empowerment or Cross-Cutting)	–	–	2	2
Other Senior Upazila Officers (Nirbahi, Chair, Family Welfare)	–	–	3	3
UP and Union District Management Committee (SO3 Disaster)	1	–	5	6
Community Health Care Provider (SO2 MCHN)	1	1	1	3
<b>Subtotal government officials</b>	<b>7</b>	<b>1</b>	<b>21</b>	<b>29</b>
<b>Project-initiated roles and private sector</b>				
Local Livelihood Advisors (SO1) – Lead Farmer, Master Trainer, Community Agriculture Volunteer, LSP, Off-Farm Advisor	3	3	2	8
Local Health Advisors (SO2) – Village Health Committee, CHVs, Mother Leaders	1	1	3	5
Local Disaster Advisors (SO3) – Community Disaster Management Committee, Disaster Volunteers	–	1	2	3
Village Development Committee Members (SO4 Governance or Cross-Cutting)	1	–	2	3
EKATA Volunteers and Early Childhood Care and Development (ECCD) Volunteers (SO5 Women's Empowerment or Cross-Cutting)	–	–	3	3
Private Sector (SO1) – Company Representative, Input Retailer, Animal Vaccinator, Collector	3	–	2	5
Implementing Partner Staff	4	–	4	8
<b>Subtotal project-initiated roles and private sector</b>	<b>12</b>	<b>5</b>	<b>18</b>	<b>35</b>
<b>Total</b>	<b>19</b>	<b>6</b>	<b>39</b>	<b>64</b>

## 2.4 Data Quality

Steps were taken to ensure data quality throughout the data collection period. These steps included:

- Team meetings each evening to share results and revisit challenges faced in the day's data collection.
- Seeking to address the “right answer” phenomenon. Beneficiaries, often feeling indebted for project inputs, were often reluctant to say anything that could be construed as negative about an FFP development food assistance project. Recognizing this phenomenon early on, the team found ways to skip over these initial responses and move quickly into details likely to more accurately capture the beneficiary experiences.
- Relatedly, the team repeatedly explained to partners, village leaders, and interviewees both about interview confidentiality and that responses would be used to enrich future projects.
- Finally, the team consistently sought to ensure privacy during interviews and discussions and repeatedly asked curious onlookers to leave surrounding areas.

## 2.5 Ethical Considerations

The evaluation protocol received ethical review approval from the Institutional Review Boards at Tufts University and at the Bangladesh Medical Research Council.

Once the evaluation and interviewing began, all participants were provided with details of the interview and consent process and were requested to sign a written informed consent form that included permission to record the conversation. All but one participant agreed to be interviewed, and only one declined to be recorded. If an interviewee could not sign, she gave verbal permission and this was noted on the consent form and signed by members of the evaluation team. In focus groups, members agreed on one person who would sign the consent form on behalf of the group.

According to standard ethical protocol, the evaluation team did not ask about individual experience with violence against women. The team did, however, ask about norms and recent community-wide changes, because violence against women was a women's empowerment topic addressed in the Nobo Jibon and SHOUHARDO II projects. In interviews in the project areas, violence against women was mentioned either spontaneously by respondents or in response to questions about what they learned about it through project sessions, whether it still existed in the community, or how it was handled if it did occur.

## 2.6 Data Analysis

### 2.6.1 Data Transcription and Coding

Recordings from 167 interviews were transcribed in the languages spoken. Most of each recording was in Bangla, but the periodic verbal translations by the interviewers to the non-Bangla-speaking rapporteurs were in English, and this also was transcribed, after which the Bangla portions of the recordings were translated into English. The recordings were deleted from the recorder once transferred to a computer for transcription.

The English transcripts were imported into the NVivo qualitative analysis software package. The transcripts, notes from the data collection period, and other documents related to the projects and this evaluation were reviewed, and 20 broad themes and characteristics were identified—main topics of the projects’ strategic objectives (SOs), primary interventions, and primary cross-cutting themes (**Box 1**). For the few interviews that were not recorded, team member notes were used instead. In addition to the transcripts, the notes were also used in the identification of major themes that defined codes for the analysis of the data.

Blocks of text from the transcripts were “coded” (highlighted and marked) to one or more of these themes as “nodes” in NVivo. Coding into nodes for all the interviews was done by one team member, following discussion and agreement with two other data analysts. The topics were then divided among the three analysts according to the SOs that they corresponded to. Each analyst reviewed all coded text on his topics, identified sub-themes among the topics mentioned by interviewees (often, e.g., gender and women’s empowerment, and livelihoods), and coded sub-themes as “child” nodes consistent with the initial coding of nodes. (See **Box 2** for examples of “Gender” and “Women’s Empowerment” sub-themes.) In addition, basic demographic and identifying information was classified in NVivo so analysis could be conducted or compared by subgroups, e.g., comparing the nature of responses between men and women interviewees. Comparisons could then also be made, for example, by age of interviewee, project area, and type of interview.

### Box 1. Main Analysis Themes

- Linkages – Government
- Linkages – NGO
- Sustainability
- Unintended Consequences – Positive, Negative
- Targeting
- Receipt of Multiple Inputs
- Gender Empowerment
- EKATA
- Behavior Change and Extension Strategies
- Services Provided – MCHN
- Health and Nutrition Services – Government
- Food Ration
- Dietary Diversity
- Livelihoods
- Education – Early Childhood Development
- Disaster Preparedness and Response
- Government Officials
- Government Focus on Extremely Poor and Poor
- Food Security
- Other Project Benefits

### Box 2. Gender and Women’s Empowerment Sub-Themes

- Decision making
- Mobility and permission to go out
- Work and income
- Child marriage, dowry, and girls’ education
- Violence against women

## 2.6.2 Analysis

The research questions related primarily to the effectiveness of project interventions as perceived by the beneficiaries and the constraints that they experienced. The analysis was largely descriptive and was conducted by reviewing sub-theme text for patterns, consistencies, and inconsistencies (e.g., between men and women, between older and younger respondents, and among projects). The initial list of topics was grouped for analysis by SO, for convenience of report writing. Data were analyzed systematically within each project, starting with the smaller projects—Nobo Jibon and PROSHAR—from which there were fewer interviewees, and then moving to SHOUHARDO II, noting those findings common to all three projects and any that were unique to only one project. Within each project, the interviews of female respondents were analyzed before those of men, distinguishing findings from IDIs, FGDs, and KIIs, and distinguishing between older and younger respondents. Detailed notes were made to describe common perceptions, as well as knowledge and practices on each of the sub-themes and the factors that influenced or constrained them. Exceptions were also noted. The report findings were distilled from these notes.

Findings from most of the 20 themes shown in Box 1 were categorized according to the SOs of the individual projects and then across the three projects, for a combined summary.

FGD data were particularly useful in understanding behavioral norms. KII data provided the perspectives of individuals with particular responsibilities relating to these projects.

IDIs of individual beneficiaries were the most frequent type of interview conducted and elicited data describing perceptions of behaviors learned and benefits gained, e.g., how they used project inputs ranging from the food ration to vegetable seeds and minnows (fish fry); the extent to which household income increased as a result of these inputs; and whether and how household decision making was perceived to have changed over the course of the project. Data from IDIs of non-beneficiaries were used to explore the reasons for non-participation (e.g., did not qualify or refused participation), the extent of diffusion of behavior change and inputs promoted by the projects, and perceptions about the benefits of the projects.

## 2.7 Theory of Change

During the course of document review and data collection, the team also reviewed the basic theories of change that underlay the projects, namely:

- That well-planned income generation targeted to food-insecure households would improve the household food security of most of these households
- That prioritized and accessible MCHN services provided in project communities would improve the health and nutritional status of large numbers of vulnerable individuals within targeted households
- That disaster preparedness and mitigation would reduce the consequences of disasters in project areas
- That well-implemented women’s empowerment efforts would support each of the SOs of these projects while reducing inequalities within households

The evaluation found this underlying theory of change consistent with the team’s overall evaluation findings.

## 2.8 Limitations

Qualitative data, by definition, are not representative and are ideally limited to small sample sizes; therefore, the results are not generalizable. That said, the data collected triangulate well with the larger-scale and representative quantitative data, except in the area of women’s empowerment, and provide context for many of those findings.

Major delays in ethical review approval resulted in delays of the fieldwork until June 2015. High temperatures and monsoon rains were often constraints to mobility. A potentially greater impediment was the necessity to collect most of the data during the Muslim fasting month of Ramadan. The team was concerned that beneficiaries would lack energy for the interviews or would not want to discuss diet and food. In fact, virtually all were willing, often even offering food to non-fasting members of the team. During Ramadan, however, government hours were reduced and meetings with *upazila* and union officials had to be scheduled early in the day.

One particularly unfortunate result of the weather and unexpected *hartals* (labor actions) was an inability to visit as many PROSHAR sites as originally planned. Although efforts were made to compensate for this in the sites that were visited, that shortage of interviews constitutes a limitation of the evaluation.

Although the qualitative evaluation team had the opportunity to study most of the quantitative evaluation reports before beginning its fieldwork, the evaluation protocol and interview instruments had, by that time, been fully developed, vetted through the Institutional Review Board process, and finalized. Nonetheless, recognizing the potential value of a qualitative evaluation in exploring contexts and reasons for particular quantitative findings, some efforts were made to engage in such exploration. The findings from this exploration are presented throughout the report and summarized in Annex 7.

One partially compensating advantage of the delay was the opportunity to view most of the villages post-project—and sometimes get glimpses of the projects’ sustainable effects. (The qualitative evaluation was conducted during a 3-month extension period for all three projects, a time for project documents to be completed after village project activities had ended. However, several villages the evaluation team visited were considered “low-performing,” and the extension period was used to continue project activities.)

The team recognized the major physical, demographic, and societal differences among areas where the three projects operated. While an effort was made to identify some of these differences, contextual comparisons among the three projects cannot always fully explain them. Similarly, the team, which was in the field only during summer months, was not able to adequately assess the effect of the projects on behaviors most pertinent to other seasons. Finally, inadequate project documentation on targeting, project design, and intervention content meant that the evaluation team lacked full information, which sometimes constituted a constraint.

## 2.9 Team Composition

The evaluation field team, which was made up of expatriates and Bangladeshis and of an equal number of men and women, offered expertise in program evaluation, qualitative analysis, gender analysis, community mobilization, behavior change communication (BCC), and disaster preparedness and mitigation.

The evaluation team consisted of the following people.

- **F. James Levinson**, Team Leader, assumed overall responsibility for the evaluation, ensuring that the scope of work was carefully followed, that high-quality information was collected and carefully analyzed, that the team followed the proposed timeline, and that associated FANTA and Tufts University staff were kept well informed of progress. He participated fully in data collection, analysis review, and report writing.
- **Jessica Blankenship**, consultant and Social and Behavioral Change Specialist, took responsibility for the coding and initial analysis of the qualitative data.
- **Julian Francis**, Disaster Preparedness Consultant, participated fully in the data collection and report review.
- **Kusum Hachhethu**, MCHN consultant, participated in the data collection, analysis, and report writing.
- **Rezaul Karim**, Nutritionist, participated fully in the data collection and report review.
- **Kathleen Kurz**, Gender Specialist, participated in the data collection, analysis, and report writing.
- **Nashida Akbar**, Interpreter, travelled to the field sites to conduct and interpret the interviews.
- **Maqbul Hossain Bhuiyan**, Local Logistical Coordinator, oversaw all administrative functions in Bangladesh. He also made arrangements for domestic travel within Bangladesh.

### 3. Findings/Interpretations of the Findings

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**Table 5** provides a summary of the evaluation findings for each of the projects, using the seven primary evaluation questions. This is followed by a discussion and critique of the organization of the projects as a whole and expanded descriptions of the projects by component: agriculture and livelihoods; MCHN; DRR; gender and women’s empowerment; governance, linkages, and coordination; and behavioral change and extension. There are then subsections on findings of the individual projects by these same components, plus an additional category, early childhood care and development (ECCD) for SHOUHARDO II.<sup>19</sup>

Note that the *effectiveness* question (question #1 of the seven primary evaluation questions) is addressed through examinations of the projects’ activities relating to agriculture and livelihoods, MCHN, DRR, gender and women’s empowerment, and behavioral change and extension, the last three having separate evaluation questions associated with them. Sections are also provided to address the evaluation questions relating to *linkages*, *coordination*, and *unintended effects*.

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<sup>19</sup> The fully stated goals, SOs, and Intermediate Results (IRs) for each project are presented as Annex 4, along with the numbers of beneficiaries reached per activity. A table comparing findings from the secondary literature review with the findings on the topics from the qualitative evaluation is presented as Annex 5. A table indicating the progress of each project in attaining its targets, as determined by the quantitative evaluation, is presented as Annex 6, and a table comparing findings from the quantitative evaluation with the findings on the topics from the qualitative evaluation is presented as Annex 7.

**Table 5. Summary of Evaluation Findings by Project and by Evaluation Question**

Evaluation questions	All three projects	Nobo Jibon	PROSHAR	SHOUHARDO II
1. Effectiveness in meeting strategic objectives	All three projects were successful in reducing household food insecurity and improving health and nutritional well-being in most targeted households. Projects were also effective in provision of localized MCHN services and counseling during implementation period.	Nobo Jibon livestock and fisheries service providers were particularly effective in provision of services that appear sustainable. Nobo Jibon also expanded input markets and successfully utilized lead farmers and collection centers.	PROSHAR, using master trainers and farm business advisors, was remarkably effective in making livelihoods work sustainable.	SHOUHARDO II's Comprehensive Homestead Development, field crop production (rice), livestock rearing, and income-generating activities led to higher-than-expected profits.
2. Effectiveness of linkages with government and nongovernment services	Linkages with government were strongest in livestock and fisheries and weakest in MCHN. Linkages with other projects were weak or nonexistent.	Village health committees formed by Nobo Jibon helped government in MCHN service delivery.  Government agriculture, fisheries, and livestock extension workers provided training to beneficiary farmers and usually continued with service provision.	PROSHAR was generally effective in connecting livelihoods beneficiaries with the respective government extension officers. However, the project was less effective in establishing government linkages in the health sector.	SHOUHARDO II used management score sheets to rate union committees, service fairs, "open budget" facilitation, and activation of special committees used to improve scores.  The project was highly effective in connecting beneficiaries with government officials.
3. Effectiveness of DRR approaches	Projects facilitated DRR preparedness in coverage areas despite government attention focused primarily on disaster relief.	Although Nobo Jibon focused on strengthening the capacity of households, local communities, and union parishads to cope with hazards through building of community resilience, less of the Nobo Jibon effort was directed at strengthening existing government systems.  Nobo Jibon-established community-based disaster groups were largely ignored by the government system and are no longer functioning.	PROSHAR provided valuable inputs to prepare households and train volunteers. However, the PROSHAR-established community-based disaster groups were largely ignored by government and are no longer functioning.	SHOUHARDO II's success resulted from prioritization of areas according to vulnerability, training, and equipping of union disaster management committees and from well-organized contingency planning.
4. Coordination with GOB, other USG, and other donor activities	Coordination, except with GOB services, was a weakness in all three projects. Multiple examples of multi-project duplication among the same target groups, particularly in SHOUHARDO II areas. Examples provided in main text.			
5. Effectiveness of approaches to gender issues	Positive findings, differing substantially from the findings of the quantitative evaluation.	Notable progress, although not a strategic objective.	Notable progress, although not a strategic objective.	Addressing gender issues was an explicit strategic objective of SHOUHARDO II. There were highly impressive results, particularly in mobility, participation in decision making, and awareness (sometimes leading to group action, including action by adolescent girls).

Evaluation questions	All three projects	Nobo Jibon	PROSHAR	SHOUHARDO II
6. Unintended positive and/or negative effects	<p><i>Positive:</i></p> <ul style="list-style-type: none"> <li>• Effect of economic improvement on family harmony greater than anticipated.</li> <li>• Income-generating activities rescued many households that lost farmland due to erosion.</li> </ul> <p><i>Negative:</i></p> <ul style="list-style-type: none"> <li>• Occasional exacerbation of dependency culture (e.g., why pay for a latrine when it is likely to be provided free by some organization).</li> <li>• Increased women's employment adversely affects exclusive breastfeeding.</li> </ul>			
7. Effectiveness of BCC and extension strategies	Impressive in all projects.	Particularly effective in: <ul style="list-style-type: none"> <li>• Hygiene counseling</li> <li>• Improving pregnancy food intake</li> <li>• Improving understanding of problems associated with pregnancy in young girls</li> </ul>	Particularly effective in: <ul style="list-style-type: none"> <li>• Training and counseling on small livestock and fisheries</li> <li>• Increasing use of plinths for protection against disasters</li> </ul>	Particularly effective in: <ul style="list-style-type: none"> <li>• Vegetable cultivation using beds, better seeds, and improved practices</li> <li>• Provision of short-duration rice seed varieties to combat food insecurity in the October–December lean season</li> <li>• Improving disaster preparedness by households</li> </ul>

## 3.1 Organization of the Projects

### 3.1.1 Targeting of Beneficiaries

Beneficiaries in all three projects were selected to receive the services provided and were not selected for single sector services only. (As noted, however, each project had different beneficiary categories, which determined the level of services provided, and these services were considerably broader in SHOUHARDO II than in PROSHAR, with beneficiaries uniformly receiving more services in the former.) Targeting issues were particularly pronounced in livelihood services as indicated below.

The team also noted multiple differences and some inconsistencies in terminology and definitions, particularly of poor and extreme poor, among the three projects. While the differences are not a deficiency of the project planners, they do create challenges for inter-project coordination and evaluation efforts and, accordingly, should be made consistent in future projects.

In Nobo Jibon, beneficiaries were selected for the livelihoods component based on household income and ownership/access to land. They were divided into three groups: extreme poor (landless or small land and/or no productive assets), homestead productive poor (small land and/or some productive assets), and productive poor (moderate land and/or productive assets). The matching of beneficiaries with inputs was done by the project, without consultation with beneficiaries themselves. Beneficiaries with no land were provided with sewing machines, small livestock, or bicycles with a flat platform for hauling goods.

In PROSHAR, beneficiaries for the livelihoods component were selected primarily based on ownership of land, and were divided into three groups: ultra poor (owning less than 10 decimals of land), poor and functionally landless households (owning 10–50 decimals of land), and marginal poor (owning more than 50 decimals of land).

SHOUHARDO II had a distinct community-based beneficiary selection process facilitated by the project but carried out by the community. Beneficiaries were selected at a gathering attended by villagers, VDC members (where VDCs existed), union parishad (UP) members, and other respected persons, during which households were classified as extreme poor, poor, middle class, and rich. (Only the extreme poor and poor received project services.) After the “well-being” analysis, CARE checked the poverty levels of households selected by the community in many areas to ensure that the eligibility criteria were properly applied, and more-advantaged households were eliminated after confirmation by the community. However, CARE did not always check unselected households that might have met eligibility criteria.

**Mis-targeting.** In all three projects, through food insecurity scoring with both beneficiaries and non-beneficiaries and interviews, the team found some likely cases of mis-targeting. For example:

- A household selected for project inputs despite owning 3.5 acres of land
- A fisheries beneficiary who indicated that he was selected because the project could not find anyone else in the village with a pond and potential for fisheries

- A non-beneficiary woman, likely to have been eligible based on her food insecurity score, but not selected for project inputs (we were told) because her husband’s uncle is rich

### 3.1.2 Breadth of Livelihood Services Provided

Nobo Jibon and SHOUHARDO II provided multiple livelihood services (inputs/productive assets, training, and linkages to markets) to poor/extreme poor households, while most PROSHAR beneficiaries received only one livelihood service. While PROSHAR’s more limited approach was permissible as a project design, it runs counter to multisectoral nutrition (and food security) theory and practice, which underscores the synergistic benefits derived by vulnerable populations when multiple nutrition-specific and nutrition-sensitive inputs<sup>20</sup> are provided. The quantitative evaluation found that PROSHAR beneficiaries receiving two sets of inputs experienced greater household food security improvement than those receiving only one.

### 3.1.3 Monitoring of Service Delivery

While project monitoring data moved relatively smoothly from project sites to project headquarters for fulfilling the USAID reporting requirements, and while field offices often made adjustments as problems were brought to their attention, none of the projects actively utilized data locally to help identify and rectify problems quickly as they arose. Additionally, given that field offices often must refer to their respective country offices before changes to projects can be made, it is recommended that better mechanisms be established between country and field offices to address identified field problems more expeditiously. Such local utilization and the “management by exception” approach should be usefully incorporated into future projects.

## 3.2 Summaries of Overall Findings across Projects

### 3.2.1 Agriculture and Livelihoods: Combined Summary

**Overall project effects.** Beneficiary interviews, FGDs, and KIIs conducted by the evaluation team indicate that the three projects were arguably most successful in their livelihoods initiatives, both in increasing household incomes and in improving household food security and dietary diversity. Many of these initiatives appear to have the potential to be sustainable.

Except in areas with high water salinity, impressive vegetable yields resulted from high-quality seeds, tools, information, and market linkages, and led to increases in both home consumption and market sales. Small livestock and fish also improved diets and generated income. And, in the income-generating activities (IGAs), provision of sewing machines, money to invest in small shops, and bicycle vans generated income for landless households lacking adequate courtyard space or adjacent ponds.

Based on new understanding in recent years,<sup>21</sup> it now appears that a critical pathway for reducing chronic undernutrition involves the provision of multiple nutrition-specific and nutrition-

<sup>20</sup> “Nutrition-specific” refers to activities, usually in the health sector, that address malnutrition or its immediate determinants directly. “Nutrition-sensitive” refers to activities, usually in other sectors (e.g., agriculture; education; water, sanitation, and hygiene; social protection) that address the underlying and basic determinants of malnutrition.

<sup>21</sup> See, e.g.: Levinson, F. James and Balarajan, Yarlina. 2013. “Addressing Malnutrition Multisectorally: What have we learned from recent international experience? Case Studies from Peru, Brazil and Bangladesh.” New York: United Nations.

sensitive inputs to households in vulnerable areas, thereby permitting synergies among these inputs. This multisectoral “convergence” approach was fully adopted by SHOUHARDO II (as it had been in SHOUHARDO I<sup>22</sup>) with highly impressive results in terms of stunting reduction, as documented in the final quantitative evaluation, and is likely the primary explanation for SHOUHARDO II producing the most impressive overall results of the three projects. PROSHAR, by contrast, offered beneficiaries only one or two activities, with lesser effects, as documented in the final quantitative evaluation. Similarly, Nobo Jibon activities, while broader than PROSHAR’s, did not take advantage of the convergence approach. While an array of livelihood opportunities were available in Nobo Jibon, individual beneficiaries rarely engaged in more than one activity.<sup>23</sup>

**Likelihood of sustainability.** Assets were generally provided for 2 or 3 years in the middle of the projects, permitting some assessments about sustainability during the last year of the project. The likelihood of sustainability appeared greatest where, during the course of the project, beneficiaries saved or purchased their own vegetable seeds, purchased their own vaccines and medicines for their animals, or bought their own minnows and supplies for their fish ponds. Sustainability also was more likely where beneficiaries, usually with project assistance, developed strong, viable relationships with concerned local government staff. While the beneficiaries interviewed reported a wide range of methods to generate income and to make investments, and an analysis of the evaluation data indicates that 22 of the 73 households for which food security status was assessed (using the Food Access Survey Tool [see Annex 3]) were still more than marginally food insecure at the time of the interview, it is clear that the inputs provided by these projects nearly always resulted in some improvement in household food security.

**Livelihood groups.** Individual interviews and focus groups indicated that beneficiaries made good use of group-based opportunities: collective animal vaccinations and courtyard sessions for training and counseling. In agriculture, the three projects created roles for village-based volunteers who were responsible for gathering farmers as needed for service provision and information updates (“lead farmers” in Nobo Jibon, “master trainers” in PROSHAR, and “community agriculture volunteers” in SHOUHARDO II). *Upazila* officials, particularly those based in unions, also often called such groups together for service provision and information, although some acknowledged, in KIIs, that more-remote villages were visited less often. In some areas, farmers also gathered to meet with input suppliers and crop collectors. The sustainability of such group-based service delivery likely depends on whether or not service providers have monetary incentives, e.g., earning a fee per animal vaccinated. Interviewed beneficiaries, most of whom had been beneficiaries of some form of group-based service delivery during the life of the projects, generally indicated a willingness to pay for the convenience of such service delivery.

<sup>22</sup> SHOUHARDO I recorded stunting reductions of 4.5 percentage points a year, as did comparable multisectoral convergence programs in Peru and Brazil (Levinson and Balarajan 2013).

<sup>23</sup> While some Nobo Jibon beneficiary households received both livelihoods assistance and MCHN services (and, as indicated, with impact indicators better in households receiving both rather than only one), these households did not receive assistance relating to water, sanitation, and hygiene; education; or adolescence that contributed so importantly to the synergies functioning in SHOUHARDO II. Nor did beneficiaries have choices among livelihoods opportunities.

**Extent to which wives and husbands shared in livelihoods work.** Consistent with project design, most livelihood interventions were targeted to women, who received the assets and the training. However, interviews and focus groups with both women and men revealed that husbands participated in some facet of all livelihood activity. In the case of small livestock, most of the work was carried out by women, while men were responsible for the marketing of eggs and meat. In most agriculture activity, women and men worked together. Men maintained fish ponds more frequently than women, while men and women usually divided the responsibilities for IGAs, with little work actually done jointly. (See Section 3.2.4 for a discussion of the extent to which women retained and were able to spend income earned.)

### 3.2.2 Maternal and Child Health and Nutrition: Combined Summary

**Overall project effects.** Information collected from beneficiaries and from project and government staff indicates that all three projects worked collaboratively and on the whole effectively, with government health service officers providing MCHN services, including behavioral change counseling in the community via courtyard sessions and Extended Programme on Immunization (EPI) centers plus some door-to-door services.<sup>24</sup> Participants in FGDs and beneficiary interviewees indicated that MCHN services were exceptionally impressive during the project period. Beneficiaries in all three projects reported taking advantage of the ANC, postnatal care (PNC), and growth monitoring and promotion (GMP) services offered in their community. While prior to the projects ANC and PNC services were offered intermittently at nearby EPI centers or satellite clinics, the frequency of service availability and, in turn, the use of those services increased substantially during the project period.

These services, however, were not sustainable. Upon completion of the projects, EPI service provision generally retreated to lower frequencies, and most former project beneficiaries now have minimal access to ANC and PNC and monthly GMP for young children. Former beneficiaries are now dependent on community clinics, which are distant from the villages in which most of them reside, for the services. Minimal utilization was confirmed post-project by examining records at community clinics visited and through discussions with former beneficiaries and government officials.

**Health and nutrition of young children.** In the coverage areas of all three projects, the qualitative evaluation findings substantiated the general findings of the quantitative evaluation, which found clear evidence of improvements in most indicators of the health and nutrition of young children.<sup>25</sup> Beneficiaries generally reported that their children's weights had increased steadily every month, some indicating that their child had won a prize for showing healthy progress along the growth chart. Improvements in children's growth were attributed by beneficiaries to more nutritious food (facilitated by the food ration) and increased awareness of

<sup>24</sup> EPI centers were run by the government and supported by the projects.

<sup>25</sup> TANGO International. 2015. "Save the Children Bangladesh Endline Survey Results: Nobo Jibon Multi-Year Assistance Program." Draft Report; TANGO International. 2015. "Endline Report PROSHAR Quantitative Final Program Evaluation (QFPE) 2015, Bangladesh." Draft; and TANGO International. 2015. "SHOUHARDO II Final Quantitative Performance Evaluation SHOUHARDO II Multi-Year Assistance Program (MYAP)."

better health and nutrition behaviors, including hygiene, breastfeeding, and vaccination, all promoted by the three projects.

**Infant and young child feeding.** Awareness of infant and young child feeding messages significantly increased during the project period, with beneficiaries clearly informing the evaluation team that an infant should consume only breast milk for the first 6 months, after which the child should receive complementary food (semi-solid food, with gradually increasing amounts of egg, fish, rice, lentils, and liver) in addition to breast milk. The majority of beneficiary mothers indeed reported that they exclusively breastfed for 6 months and continued breastfeeding for 2 years with extra food. Only rarely did mothers report that they could not exclusively breastfeed, convinced that they were not producing enough breast milk. CARE officials explained shortfalls in exclusive breastfeeding differently, noting in KIIs that, even with particular attention given to exclusive breastfeeding, already time-constrained women, now with additional livelihood opportunities, were finding the practice particularly difficult.

Mothers, mothers-in-law, and, in SHOUHARDO II areas, targeted adolescents were also aware that breastfeeding should commence within 1 hour of birth and that colostrum should be fed to the infant.

While knowledge on these subjects was impressive, indicating, in turn, a high coverage of infant and young child feeding counseling, it was less clear that all messages were being followed, and the evaluation team noted multiple gaps between knowledge and practice.<sup>26</sup> For example, when asked about the amount of water given to their children at 2 months, several women indicated the quantity, although they earlier stated that they were exclusively breastfeeding for 6 months. Similarly, women who were interviewed in all three projects, after making clear that they knew the “correct” answer, sometimes indicated that only when working in or near the homestead (as opposed to more distant tasks) were they able to exclusively breastfeed. Improved practices that did take place in the projects, together with improvement in water, sanitation, and hygiene (WASH) practices, may help explain the decreases in incidence of diarrheal disease infection reported for the Nobo Jibon and SHOUHARDO II projects in the quantitative evaluations.<sup>27</sup>

**Food intake and rest during pregnancy and lactation.** Beneficiaries (both men and women) were able to consistently repeat what a pregnant woman must do to have a healthy pregnancy: get plenty of rest (both during the day and at night); avoid risky situations; avoid strenuous work; and increase the intake of nutritious food, including, according to the beneficiaries themselves, *shak* (leafy green vegetables), *daal* (lentils), apples, oranges, fish, meat, eggs, fruits, and vegetables—all local foods separate from the ration. Dietary diversity scoring carried out by the evaluation team yielded surprisingly positive results, indicating a minimal gap between knowledge and practice in food consumption. Beneficiary women were also aware of the

<sup>26</sup> These gaps between knowledge and practice were found frequently in the projects. The high levels of knowledge demonstrated by beneficiaries are testimony to the high quality of BCC extension services in the projects, coupled with the inevitable desire among respondents to please. The shortfalls in actual practice appear to result from some combination of inadequate autonomy of decision making by the respondent and both resource and time constraints.

<sup>27</sup> The team recognizes the difficulty of drawing conclusions about diarrheal disease in such an evaluation given the cross-sectional nature of these evaluations and the way in which such data are collected (e.g., “Did your child have diarrhea within the past 2 weeks?”).

importance of regular antenatal checkups. In all three projects, women in beneficiary interviews and focus groups indicated that, with the onset of the project, they began receiving increased support from their families during pregnancy and lactation, suggesting that extension services provided to men and to older women may also have contributed to positive results.

**Food rations.** Beneficiary interviewees indicated that the food ration was widely appreciated in the three projects. Some women in SHOUHARDO II identified the ration as the most beneficial project intervention, and many lamented the termination of ration distribution with the end of the projects. However, during interviews and focus groups, it was suggested that the ration was considered most valuable during periods of hardship. It appears that the food ration in the projects had a better chance of reaching the intended mother and child than was the case in programs where food was traditionally provided for home consumption (as opposed to “on-site feeding”). Part of the reason may have been the fact that the wheat-soy blend provided by the projects is traditionally far less appealing to men in Bangladesh than rice-based foods. A few beneficiaries reported selling the wheat-soy blend to buy rice, and one reported selling half of her oil to have the cash. However, women in an FGD in a SHOUHARDO II area reported that recipients in their area never sold the ration. Some men expressed uncertainty about whether they would be able to provide as well for their wives during future pregnancies without the ration.

The evaluation team recognizes that, beyond the major costs involved, the ration per se is unsustainable (nor is it intended to be sustainable). This raises a primary question for post-exit evaluations: Has the *example* of the ration plus (a) improved incomes/reduced food insecurity and (b) better knowledge led to sustainable practices? Do pregnant women continue to eat better (eat balanced diets using locally produced foods) without the ration?

**Water, sanitation, and hygiene.** Both men and women beneficiaries were trained about proper handwashing practices at the courtyard sessions and “Trio”<sup>28</sup> group sessions. Interviewees *reported* that they practiced better hygiene by washing their hands with soap (using ash if soap was not available) five or six times a day, including after using the latrine, after cleaning their children’s waste, before feeding their children, before eating, and before cooking. They also *reported* using sanitary latrines instead of open space; wearing shoes in the latrine; cutting their nails; and drinking safe, clean water from tube wells when available.<sup>29</sup>

While a critical mass of participants appeared both to understand the messages well and to implement them, the team again identified gaps between knowledge and practice. Notably, while most beneficiaries *reported* that they washed their hands with soap, only a very few households had soap in the vicinity of the tube well or latrine.<sup>30</sup> The quantitative evaluation reported a significant increase in access and use of sanitary latrines in the three project areas (especially in

<sup>28</sup> See PROSHAR discussion below.

<sup>29</sup> In the qualitative evaluation, all male and female beneficiaries were asked (a) whether the project had assisted them with water, hygiene, or sanitation and, if so, to describe how; and (b) to explain what they normally do after defecation. Enumerators themselves determined whether the household had (a) its own sanitary facility and (b) a “handwashing station” with soap. See Annex 3.

<sup>30</sup> Although soap is sometimes stored inside the house so it does not get stolen, this is unlikely to explain the virtual total absence of soap from likely washing areas. (In future evaluations, it would be useful to ask households explicitly about this discrepancy.)

Nobo Jibon and SHOUHARDO II<sup>31</sup>), and the beneficiaries perceived this as a major advance in their communities. Some other organizations working in the project areas also provided latrines and tube wells, as did UPs, and a small number of project households benefitted. One beneficiary man said, “The number one development is regarding our latrines. Houses have sanitary latrines nowadays. And we wash our hands after coming out of there.”

### 3.2.3 Disaster Risk Reduction: Combined Summary

Although there were no major disasters in Bangladesh during the period of the projects, the Nobo Jibon and PROSHAR areas (and the Cox’s Bazar district of SHOUHARDO II’s coverage area) experienced cyclones, while the SHOUHARDO II areas experienced flooding and river erosion in the north and northwest. With project assistance, evidence gathered after these cyclones and floods indicates that households in project coverage areas generally knew what to do, but that government involvement in disaster preparedness (as opposed to post-disaster responses) was limited, and, should this limited involvement continue, major disasters would likely have serious consequences in these areas.

**Preparedness.** Awareness on disaster preparedness was significantly increased during the project period in all three project areas, with informants in Nobo Jibon and PROSHAR areas reporting consistently during beneficiary interviews and FGDs what they would do in the case of major storms, including how they would respond to the 10 different cyclone disaster preparedness signals and to news of flooding, most often received on radio and television.

A key to cyclone preparedness was the construction or repair of many cyclone shelters by the projects. In the future, however, many more will need to be built, as the schools that serve as temporary shelters are not likely to provide much protection in a strong cyclone, have inadequate space, and rarely have separate space for females.

A key to reducing flood damage in the PROSHAR and SHOUHARDO II areas was the raising of houses several feet onto mud or concrete plinths. The approach is less expensive than the construction of houses on stilts and can prevent or reduce the intake of floodwater in a house. In addition, some informants in SHOUHARDO II areas told the evaluation team that they had built indoor platforms for their beds and kitchens when there was a risk of rising waters.

Informants in interviews and focus groups also appreciated that the projects helped arrange for the vaccination of livestock, recognizing the vulnerability of these animals, particularly cows, to diarrhea and other intestinal problems after a flood.

The projects were also prepared for post-shock assistance, particularly the provision of food assistance, and this was put into effect after cyclones and more serious flooding. Although as indicated, government services have been inadequate in disaster preparedness, they have been responsive after such shocks, particularly through the distribution of seeds and fertilizer when crops were destroyed.

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<sup>31</sup> Latrines and tube wells were provided by Nobo Jibon and SHOUHARDO II, but demand far exceeded supply.

**Organization.** Senior government officials in KIIs acknowledged and lamented the present orientation of government disaster management services that, as indicated, give far more attention to post-disaster response than to actions likely to reduce disaster losses. They also noted that there is no official at the *upazila* or union level whose sole responsibility is disaster management. As one beneficiary noted, “Committees are not sufficient.”

SHOUHARDO II was most successful in strengthening existing government systems, although all three projects were actively involved in constructing essential structures and plinths and in training volunteers (particularly youth volunteers in the case of Nobo Jibon). While the government was responsive to many project initiatives, particularly those relating to livelihoods (and most particularly with livestock and fisheries), they were less responsive in the disaster management arena, where systems, centered on union and *upazila* committees, tended to be more rigid and resistant to uninvited initiatives, such as village disaster management committees.

All three projects made efforts to strengthen disaster management committees (DMCs) at the union level. Though DMCs existed at the union level, they were rarely active. Each of the projects carried out training of union disaster management committees (UDMCs) and encouraged regular meetings. In each project area, concerns remained about the oversight of DMCs by *upazila* committees.

### 3.2.4 Gender and Women’s Empowerment: Combined Summary<sup>32</sup>

According to the content of the interviews coded for “Gender” and “Women’s Empowerment,” the following sub-themes emerged and were coded for each project: work and income, decision making, and mobility. In Nobo Jibon and SHOUHARDO II, child marriage, dowry, and violence against women were included, and, in some of the SHOUHARDO II villages, empowerment, knowledge, and transformative action (EKATA) groups were also coded. Because the findings differ considerably from those of the quantitative evaluation, special attention is given to these differences. If not otherwise mentioned, men and women reported similar results in beneficiary interviews and FGDs.

**Work and income.** Beneficiaries indicated that women’s contributions to household income, women’s control of income, and women’s management of household income increased substantially during the project period. Beneficiaries believed these contributions added to the improvements most of them experienced in year-round food security. Where these occurred, interviewees indicated that household harmony also improved.

**Decision making.** Beneficiaries indicated that joint decision making had increased and that women could now often decide on their own how to spend the new sources of income that they

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<sup>32</sup> Nobo Jibon and PROSHAR did have cross-cutting objectives relating to women’s empowerment issues, and the subject of child marriage and domestic violence did occasionally arise in FGDs when women were asked about counseling topics in courtyard sessions. Nevertheless, because of the relatively small amount of time that the qualitative evaluation team spent on these issues in Nobo Jibon and PROSHAR, and because of limitations imposed by the project’s ethical approval, the evaluation team decided to exclude a discussion on child marriage and domestic violence in the project-specific sections on women’s empowerment.

themselves had earned. Reasons for different results than those found in the quantitative evaluations regarding women's participation in decision making may include the following:

- Though women have more say than before, the words they use to describe their new decision making or answers to survey questions about it may not adequately capture the change. For example, a woman often says she is “seeking her husband’s permission” when, in fact, she is simply “informing him,” as he informs her in similar situations.
- Since, in many cases, informants indicated that joint decision making had been occurring before the projects began, it would be difficult for the quantitative evaluation to detect the extent of change during the project.<sup>33</sup>

**Mobility.** Beneficiaries described a large increase in the mobility of women and adolescent girls, with advantages from the new independence accruing to both women and men. One consistent exception mentioned was that women should not go to the market alone. Unlike the case of decision making, this increased mobility seemed fairly recent.

**Child marriage, dowry, and domestic violence.** Beneficiaries in both interviews and FGDs told the team that domestic violence was infrequent in project areas,<sup>34</sup> and described reductions in child marriage, due to:

- Enforcement of the laws making these practices illegal, including fines and jail time, with enforcement strengthened by the active interest of the senior-most *upazila* officials (the Nirbahi Officer) in project areas.
- Encouragement and facilitation of implementing partners through training, meetings, and courtyard sessions. In fact, beneficiaries, particularly in FGDs, often eagerly described reductions in child marriage and dowry brought about through community action, sometimes stimulated, in SHOUHARDO II project areas, by EKATA groups with the cooperation of UP- and *upazila*-level officials. These activist beneficiaries appeared prepared to confront parents to prevent the marriage of any girl younger under 18 years.

**Speed of change.** When asked how these changes in gender equity and women's empowerment could be taking place so quickly, beneficiaries noted that they often coincided with economic improvements in their lives. (This is consistent with international findings on the relationship between improved economic status with contributions from women's income earnings and women's empowerment, including decision-making capacity.) Looking at the interviews and focus groups as a whole, the key factors appear to be the effectiveness of the training and courtyard sessions often reaching men as well as women; the increased community support for women's empowerment, including among imams who were interviewed; and the increased

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<sup>33</sup> Given the disparities on this topic between the findings of the quantitative evaluation (mostly closed-ended questions relating to evaluation indicators) and the qualitative evaluation (mostly open-ended questions often seeking opinions on changes and trends), this evaluation recommends, for future quantitative evaluations of women's empowerment, a careful examination of indicator selection and measurement. The team's brief review of quantitative evaluation processes suggests that problems in that evaluation with limited sample size and data exclusion, along with the possibility of inadequately sensitive measurements, may also have contributed to the differences.

<sup>34</sup> The team was aware, here as in other facets of data collection, that beneficiaries well understood the “socially desirable” responses on such topics and often sought to frame their responses accordingly.

cooperation of men, often better recognizing the economic advantages of women being employed and more mobile.

**Non-beneficiaries.**<sup>35</sup> Some non-beneficiaries, usually women, actively participated in courtyard sessions without receiving the food ration, livelihood assets, or EKATA membership, but nevertheless learning and utilizing the courtyard messages. Those non-beneficiaries choosing not to participate in the courtyard sessions often reflected pre-project gender attitudes.

### 3.2.5 Governance, Government Linkages, and Coordination with NGOs and Donors: Combined Summary

#### Linkages between Target Communities and Government Services

**Effectiveness.** All three projects were effective in linking beneficiaries with government services, which has resulted in beneficiaries now contacting respective government extension officers for animal vaccinations, advice on fisheries problems, and other services. In most cases, all three projects utilized existing resources to deliver training programs. Most government officials indicated that they attended the training programs, either as trainers or as external monitors. The presence of government extension workers at the training sessions ensured their introductions to the beneficiaries. The village-level service providers also served as liaisons between the government and targeted communities.

**Sustainability.** Post-project observations and discussions provided evidence that project linkages with government services led to sustainable livelihood and service delivery activity, most notably with livestock vaccinations and where project activities included active roles for master trainers, farm business advisors, and business advisors (dramatically demonstrated in PROSHAR) who have found it profitable to continue serving as links between former beneficiaries and government and private sector services.

#### Coordination with the Government of Bangladesh, the U.S. Government, and Other Donor Projects

**Synergies.** Overall, coordination was a weakness in all three projects. Although formal NGO coordinating sessions were held, they were often poorly organized and attended and resulted in little formal organizational coordination. One livestock officer in a SHOUHARDO II area said that attendance at *upazila*-level coordination meetings was poor and that the information from these meetings was rarely conveyed to the district, national, or local level. Interviews with international organizations at their Dhaka headquarters confirmed the absence of coordination activities/meetings at the national level. Some local-level coordination did occur when the same implementing (partner) NGOs worked with more than one prime contractor or donor agency. For example, most of CARE's implementing NGOs in the Char area are also running the Department for International Development-funded Char Livelihoods Program.

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<sup>35</sup> As indicated, the three projects selected beneficiaries differently and labeled and defined them differently. These differences were summarized in Table 1.

One example of effective collaboration between project partners took place in SHOUHARDO II's Cox's Bazar area, where Nobo Jibon provided non-food items for 14,000 flood-affected persons through SHOUHARDO II.

However, the three projects, and particularly Nobo Jibon and SHOUHARDO II, were able to establish and maintain effective relations with government officials by:

- Keeping them updated on project activities
- Including them in project activities when applicable
- Inviting them to training activities and often requesting their active participation in the training

**Evidence of duplication.** One Upazila Nirbahi Officer mentioned that the NGO coordination meetings were effective in avoiding duplication of services. Nonetheless, the evaluation found numerous examples of duplication and overlap of services targeted to low-income households in the same villages.

### 3.3 Project-Specific Findings: Nobo Jibon<sup>36</sup>

**Table 6. Assessment of Nobo Jibon Strategic Objectives**

Nobo Jibon SOs and IRs	Level of Effectiveness Based on Qualitative Evaluation
<b>SO1: Improved MCHN</b>	
IR 1.1: Improved MCHN practices	Good (for both beneficiaries and non-beneficiaries), particularly in hygiene-related practices and on food intake and rest during pregnancy. However, gaps found between knowledge and practices, particularly on exclusive breastfeeding and handwashing with soap.
IR 1.2: Improved service delivery	Excellent: ANC, PNC, and GMP provided through courtyard sessions or nearby EPI centers. These accessible services, however, were not sustainable.
IR 1.3: Benefits to women and children	Good: Although stunting reductions not better than national average, beneficiaries uniformly indicated improved child health, attributing change to Nobo Jibon counseling and services.
<b>SO2: Production and Income Distribution</b>	
IR 2.1: Application of improved knowledge	Good, particularly in livestock and fisheries.
IR 2.2: Improved access to inputs, capital, and market information	Good: Seed provision, treadle pumps, and livestock services particularly valuable, plus Nobo Jibon linking of beneficiaries with input retailers and suppliers.
IR 2.3: Access by extreme poor	Good: Landless benefitted particularly from small livestock on homestead land.

<sup>36</sup> It should be noted that Nobo Jibon established a target of 20,000 beneficiary households. Unlike the other FFP development food assistance projects, however, Nobo Jibon selected an unnecessarily large coverage area for this number of households. With 440,000 households in its coverage area (and assuming that roughly 40% would have been eligible at the beginning of the project), the project's 20,000 beneficiary households were dwarfed by approximately 156,000 *other* households that would have been eligible using the same criteria.

Nobo Jibon SOs and IRs	Level of Effectiveness Based on Qualitative Evaluation
<b>SO3: DRR</b>	
IR 3.1: Functional emergency preparedness and response	Fair: Less support to existing government systems; project-supported VDCs were unsuccessful and not sustainable. However, beneficiaries indicated a reasonable understanding of where to go, what to have available, and how to address special needs.
IR 3.2: Access to appropriate infrastructure	Excellent: High-quality shelter construction and repair and road repair, some via food for work.
IR 3.3: Effective and coordinated responses	Fair: Phone-based disaster communications systems functioned inadequately.
IR 3.4: Response to early warnings: floods and cyclones	Good, but no major emergencies. In Cyclone Mahasen (May 2013), losses to life and property would have been higher without Nobo Jibon preparedness training.

### 3.3.1 Agriculture and Livelihoods

Beneficiary interviewees indicated that the livelihoods-related extension services provided by Nobo Jibon with government assistance were valuable and improved incomes and that livelihood beneficiaries with livestock or fisheries assistance fared particularly well. The interviews confirmed the findings of final quantitative evaluation of the project indicating that it met or surpassed all of its targets relating to household food security. The interviews, and the KIIs particularly, emphasized the following in explaining these improvements:

- Nobo Jibon-established village savings and loan associations were highly appreciated.
- Pond-based fisheries with fishing nets and training were provided, and pond and production sharing was common and has proven relatively successful and sustainable.
  - The lead farmer system and mobile phone connections proved invaluable for all producer beneficiaries, and collection point committees functioned successfully where they were established.
  - Sales of goat offspring generated considerable income for recipient households.
  - In some areas, however, the continued supply of quality vegetable seeds was a problem, with input suppliers located only at the *upazila* level.

Nobo Jibon provided assets and training to beneficiaries in vegetables, small livestock, and fish ponds, while some without land received assistance in other IGAs.

**Vegetables.** Interviewed beneficiaries regularly confirmed that vegetable cultivation in Nobo Jibon coverage areas was not widespread before the project and that productivity had been low.

Beneficiaries who were interviewed attributed improvements during the project primarily to:

- Lead farmers providing technical assistance and distributing seeds procured from suppliers
- Treadle pumps provided by the project for irrigation in shallow waters
- *Upazila* agriculture officers providing training on pheromone traps to prevent insect infestation, artificial pollination for sweet pumpkins, identification of good-quality seeds, construction of seedbeds, utilization of compost, spraying with lime and potassium, and pruning

One enthusiastic sub-assistant agriculture officer (SAAO) estimated that the percentage of households in his coverage area growing vegetables increased from 10% to 60%.

**Small livestock.** Nobo Jibon created the position of livestock service provider (LSP). LSPs were selected and trained by *upazila* livestock officers, a process designed to increase the likelihood of long-term relationships. LSPs provided vaccinations and medicines to chickens, goats, and cows, and assisted with the births of goat kids. While some *upazila* livestock officers cautioned against LSPs providing medicines and treatments, arguing that they had insufficient training and knowledge, KIIs indicated that LSPs regularly provided these services. LSPs told the evaluation team that they generally worked with groups of animal tenders, announcing a day for vaccinations and immunizing many animals at once. In the case of sick animals, they tried to respond when owners called seeking treatment.

Nobo Jibon provided vaccines to LSPs only the first time, after which LSPs purchased them in a local market or from the UP, recovering their expenditures plus profits through vaccination fees. KIIs indicated profits of Tk. 3,000–15,000 per month for carrying out this work, and Nobo Jibon highlighted the system as an example of project-supported activities likely to be sustainable.

**Fish ponds.** According to beneficiaries, Nobo Jibon’s package of assets and training was highly useful in making their fish ponds more productive. Training topics included optimal means of digging or extending the pond, clearing the weeds, dealing with pests (beetles), and using three kinds of minnows to live in three layers of the pond. Assistance was also provided on ways to reduce salinization. A problem encountered late in the project was the high price of fish feed. Nobo Jibon and other development partners tried to solve this problem with machines capable of increasing fish seed (fertilized fish egg) production efficiency.

**Market linkages and the private sector.** Nobo Jibon was effective in linking beneficiaries with input retailers, seed suppliers, and company representatives. One input retailer indicated in a KII that he transported seeds worth Tk. 6,000 from his town to a village where Nobo Jibon had introduced him to the farmers. All of the Nobo Jibon agricultural beneficiaries and 70% of non-beneficiaries in the village purchased seeds from this retailer. This retailer and a company representative in another KII were clear that the farmers wanted high-quality seeds *and* that the farmers had been taught how to identify quality. In villages not yet served by a seed supplier, an *upazila* agriculture officer, or a collection point committee, farmers often had to travel more than 2 hours to buy high-quality seeds. There was less project involvement in linking producer beneficiaries with markets beyond the collective buying and selling that was carried out.

**Food security and dietary diversity.** Most Nobo Jibon beneficiary interviewees indicated that year-round household food availability had increased, and most beneficiaries were able to consume three full meals a day. Evaluation team interview questions related to food security and dietary diversity confirmed the statements of beneficiaries about present food consumption.

### 3.3.2 Maternal and Child Health and Nutrition

**Health and nutrition of young children.** While stunting reductions in Nobo Jibon areas were significant during the project period, and exceeded project targets, they were very similar to

reductions at the national level.<sup>37</sup> Most MCHN beneficiaries told the evaluation team that the health of their children had improved, attributing these improvements to Nobo Jibon counseling and service provision coupled with the ration. Additionally, a community health care provider in a KII reported that the treatment record charts (for pneumonia, diarrhea, malaria, fever, and various other diseases) introduced by Nobo Jibon were still being used post-project.

**Infant and young child feeding.** Nearly all beneficiary women interviewed had a clear understanding of health and nutrition-related messages, particularly those relating to child feeding (including the importance of colostrum) and hygiene. (The same was found among non-beneficiary women who had attended courtyard sessions.) While almost all beneficiary mothers indicated that they had exclusively breastfed or were exclusively breastfeeding their infants for 6 months, responses to follow-up questions often indicated that water, honey, and soft foods were sometimes provided to their children who were still younger than 6 months of age (suggesting a belief that breast milk alone may not have been sufficient for younger infants) and that women working outside of the home compound frequently left their infant with an older sibling, indicating gaps between knowledge and practices. This gap between knowledge and practice also helps explain the quantitative evaluation finding that only 23% of infants and toddlers received a minimally acceptable diet (up from 6% at baseline, but short of the 25% target).

**Food intake and rest during pregnancy and lactation.** Both women and men were aware of the importance of each of the necessary pregnancy behaviors. One pregnant woman explained that her family made sure that she received enough food “even if there is a shortage of food.” Some interviewed women told the team that they discussed lessons from the courtyard sessions with their husbands and in-laws. Beneficiary interviews and dietary diversity scoring indicated that dietary diversity among pregnant and lactating women (PLW) clearly improved significantly, consistent with the quantitative evaluation finding that the consumption of iron-rich food and vitamin A-rich food increased by 184% and 166%, respectively, between baseline and endline in this group.

**Food ration.** Beneficiaries interviewed indicated much appreciation for the ration, which follow-up questions to multiple household members suggest was well targeted to the intended women and young children, despite occasional sales and family feeding of ration food to older sons. Many beneficiary women and their husbands lamented the termination of the ration, which occurred prior to the end of the project.

**Use of MCHN services.** Nobo Jibon MCHN services—ANC, PNC, and GMP—were provided via courtyard sessions or nearby EPI centers.<sup>38</sup> In some cases, with volunteer encouragement,

<sup>37</sup> For children in Nobo Jibon aged 6–59 months, stunting decreased from 43.6% in 2010 to 35.4% in 2014, a reduction of 8.2 percentage points (TANGO International. 2015. “Save the Children Bangladesh Endline Survey Results: Nobo Jibon Multi-Year Assistance Program.” Draft Report). Nationally, stunting fell from 45% in 2010 to 35% in 2013 (Helen Keller International and James P. Grant School of Public Health. 2014. “State of food security and nutrition in Bangladesh: 2013.” Dhaka: HKI and JPGSPH). The team notes, however, the difficulties with such survey data given that the baseline and endline figures are simply midpoints of confidence intervals that have not themselves been subjected to a statistical test of differences.

<sup>38</sup> However, the quantitative evaluation found that only one-third of pregnant beneficiaries received four or more antenatal check-ups and that iron/folate distribution to pregnant women was seriously inadequate.

beneficiaries also traveled to “community clinics” (which were often distant or hard to reach).<sup>39</sup> Participants in a women’s FGD told the evaluation team that women previously had not wanted to visit the vaccination centers or go for regular check-ups, but that visits increased significantly during the project.

With the closure of the project, these preventive services in Nobo Jibon coverage areas are now available only at community clinics or other government health facilities. EPI centers that had been multipurpose have now reverted to immunizations only. While some beneficiaries occasionally made post-project efforts to travel to these clinics for ANC and PNC, such efforts were not made for GMP.<sup>40</sup>

**WASH.** Beneficiaries regularly reported that they learned about the importance of good hygiene from Nobo Jibon courtyard sessions. The same was true of non-beneficiaries attending these sessions. While some female beneficiaries indicated that they washed their hands with soap after using the toilet and after cleaning their children, the team rarely saw soap present at wash sites. Beneficiaries also told the team that they learned to drink safe water and to properly clean glasses before drinking from them. Some noted a decline in the rate of diarrhea in their households and attributed this change to improved hygiene practices (most particularly regular handwashing).

### 3.3.3 Disaster Risk Reduction

In the districts in which Nobo Jibon worked, the disasters described were mostly cyclones. There were no major disasters during the project period.

**Preparedness.** Participants in beneficiary interviews, FGDs, and KIIs all indicated a reasonable understanding of disaster preparedness among most of the households: knowing where to go during a disaster; how to take special care of older persons, pregnant women, and children; and the importance of having gas lights and dry food available. Responses appeared consistent with the quantitative evaluation finding that 64% of households had clear disaster preparedness plans.

In addition to counseling beneficiary households, Nobo Jibon also operated a small food-for-work program. Roads, important for evacuation, were repaired by men and women from extremely poor families that had not qualified for an MCHN food ration (in the absence of pregnancy or a young child).

One disaster risk reduction officer reported in a KII that 7 new shelters had been built and 71 had been repaired by the government in 86 unions where the project operated, all under Nobo Jibon supervision. The high-quality construction was possible, he said, only because of this supervision. The same officer, hopeful for future use of storm sirens, indicated the inadequacy of present phone-based disaster communications systems. This concern was reiterated by beneficiaries in interviews who, while citing multiple advantages of their phones, reported that

<sup>39</sup> The government target is three community clinics per union; however, in areas visited, travel distances were considerable.

<sup>40</sup> The team is not aware of any country where monthly GMP with high participation rates has been possible using such clinics.

they almost always received their storm warning information from radio, television, or calls from relatives.

**Organization.** The evaluation found that less of the Nobo Jibon disaster management effort was directed at the strengthening of existing government systems than was the case in the other projects. Instead, Nobo Jibon formed VDCs in 86 unions. All informants agreed that these committees proved to be relatively dysfunctional and poorly linked, if at all, with the existing government committee system. An additional problem in Nobo Jibon areas was that *upazila*- and district-level DMCs did not work closely with UDMCs and failed to apply pressure for improved union performance in disaster situations.

**Responses to disaster.** During Cyclone Mahasen in May 2013, there were seven deaths in Barguna District and none in Patuakhli. Despite extensive damage to houses and land, interviews, including KIIs with UDMC chairs, indicated that the losses of life and property would have been much higher without the Nobo Jibon preparedness training.

### 3.3.4 Gender and Women's Empowerment<sup>41</sup>

**Work and income.** Interviews with men in beneficiary households elicited uniform responses about the positive effects that their wives' incomes were having on household food security and well-being. One interviewee noted that "[b]efore they did housework. Now they work outside planting vegetables, taking care of cows and goats, and sometimes doing road repairs." Most men said that they pass on their earnings to their wives to manage. Neither women nor men complained that these new income-generating opportunities created time constraints for other responsibilities.

At the same time, many women beneficiaries said in interviews that their husbands had become more helpful. For example, one woman noted that "[n]owadays they help with the children." Beneficiary interviewees and key informants indicated that husbands often joined their wives in Nobo Jibon courtyard sessions. Older women in FGDs indicated their support of the changes. One woman stated that there is a belief that younger women "are more sensible than [we] were, and are raising their children with more care."

**Decision making.** Men routinely reported that they make major household decisions jointly with their wives and that they are attentive to their wives' advice. The interviews suggested that these practices had been evolving for many years, indicating that Nobo Jibon counseling on women's participation in decision making often built on ideas introduced earlier. Both women and men said in interviews that women often made at least smaller decisions about expenditures themselves, particularly when their husbands were away or otherwise occupied. In some cases, both indicated that money earned by women was theirs and that they could decide how to spend it. In one FGD, a woman said, "Yes, nowadays we are able to make our very own decisions. Now we can decide to use our extra income to make clothes for our children [or] even hire private tutors for them."

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<sup>41</sup> Women's empowerment was a cross-cutting objective in both Nobo Jibon and PROSHAR, so counseling and support for women's empowerment was provided in both.

**Mobility.** As in the other projects, women in the Nobo Jibon project spoke of “seeking their husbands’ permission” before going outside of the house, when analysis of the interviews revealed that they really meant “informing.” There was no indication that women were forbidden from regular village movement, although they were less likely to travel to their parents’ homes in other areas alone. Safety appeared to be an issue in traveling outside of local areas.

### 3.3.5 Linkages and Coordination

#### Linkages with Government Services

**Effectiveness.** Nobo Jibon was successful in establishing effective linkages with government officials, who also facilitated the implementation of Nobo Jibon by participating in courtyard sessions and project coordination meetings. Specifically:

- Village health committees formed by Nobo Jibon helped government health assistants deliver MCHN services.
- Government agriculture extension workers, fisheries officers, and livestock officers were invited by Nobo Jibon to provide training to the enrolled farmers and then usually continued with service provision during the project period and often afterward.

**Sustainability.** KIIs with *upazila*-level fisheries officers indicated that many were likely to continue to support former Nobo Jibon fisheries beneficiaries after the project ended. According to one, “After they phase out, we will be 100% responsible. We already took over the support of beneficiaries and stakeholders and we will maintain this support.”

By contrast, none of the project’s MCHN activities has proven sustainable. With the termination of the project, ANC, PNC, and growth monitoring services are now available only at community clinics or other government facilities, usually distant from where beneficiaries live and therefore used by only small numbers of former project beneficiaries. As indicated, post-project visits to community clinics confirm their low utilization by former project beneficiaries.

#### Coordination with Other Projects

**Synergies.** Although formal NGO coordination meetings were held at the *upazila* and district levels, and occasionally at the union level, the meetings were organized on an ad hoc basis and were not well attended. One implementing partner staff reported in a KII that government officials were not always invited to the coordination meetings as “this is our internal meeting.”

In Bangladesh, multiple government and nongovernment development programs often operate in the same village. Microcredit programs operate in almost all villages, meaning that Nobo Jibon beneficiaries were often also involved with microcredit programs from the Bangladesh Rural Advancement Committee (BRAC), the Grameen Bank, village savings and loan associations, and other organizations. Findings from evaluation interviews suggest that there is no formal coordination between Nobo Jibon and these microcredit programs.

**Evidence of duplication.** A few interviewees mentioned that the Association of Rural Opportunities and Human Initiatives, an indigenous NGO involved in sanitation and tube well

construction, also served some Nobo Jibon beneficiaries delivering similar services and BCC messages. There is no evidence of collaboration between the two programs.

### 3.3.6 Behavioral Change and Extension

Behavioral change and extension services in Nobo Jibon agriculture was particularly effective in small livestock production (using LSPs). BCC and extension services were also particularly effective (for both beneficiaries and non-beneficiaries) in:

- Hygiene counseling, likely contributing to significant reductions in diarrheal infection as perceived by study participants and shown in the quantitative evaluation
- Improved pregnancy food intake
- Improved understanding of problems associated with pregnancy in girls whose bodies are not yet fully mature
- Increased involvement in child caretaking by fathers
- Active participation of government extension workers in farmer training

## 3.4 Project-Specific Findings: PROSHAR

**Table 7. Assessment of PROSHAR Strategic Objectives**

PROSHAR SOs and IRs	Level of Effectiveness Based on Qualitative Evaluation
<b>SO1: Improved Income and Food Access by Poor and Ultra-Poor Households</b>	
IR 1.1: Increased and diversified agriculture production	Good: The evaluation found that PROSHAR’s most impressive dietary diversity changes increased vegetables and fish consumption, resulting from diversified production.
IR 1.2: Development and strengthening of market linkages	Excellent, and largely sustainable: This was the result of financially incentivized PROSHAR-trained business advisors and master trainers developing linkages with private sector dealers and traders.
IR 1.3: Expansion and diversification of non-agriculture opportunities	Excellent, particularly bamboo-made handicrafts, stitching, and tailoring.
<b>SO2: Improved MCHN</b>	
IR 2.1: Prevention and treatment of malnutrition	Reductions in stunting comparable to national-level reductions, but most mothers reported that child weights increased regularly from month to month. Improvements were attributed to improved caring and hygiene practices promoted by PROSHAR.
IR 2.2: Improved effectiveness of health clinic services	Excellent localized services: “Trio” groups (see below) particularly effective. Improved women’s self-care practices found in quantitative evaluation reaffirmed in qualitative evaluation. But linkages with government services proved unsustainable.
<b>SO3: DRR</b>	
IR 3.1: DRR plans functional	Fair: PROSHAR expended considerable energy on the development of community-based disaster groups, which were not taken seriously by the government system and are no longer functioning.
IR 3.2: Early warning systems functional	Good: Villagers understood signals, with adherence strengthened by PROSHAR-established disaster management volunteer groups.

IR 3.3: Increased knowledge and skills by beneficiaries	Good, particularly use of plinths. Villagers also aware of what to store and how to care for children, pregnant women, elders, and livestock in an emergency.
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### 3.4.1 Agriculture and Livelihoods

The quantitative evaluation found that PROSHAR registered the most impressive increases in per capita income of the three programs,<sup>42</sup> a result of the program making use of financially incentivized master trainers and farm business advisors (and the assistance of International Development Enterprises [iDE]) to make its livelihoods work sustainable. Participants in beneficiary interviews, FGDs, and KIIs suggest that the following had particularly important effects on these income increases and on the associated reductions in household food insecurity (from 51% at baseline to 29% at endline) reported in the quantitative evaluation:

- Livelihoods beneficiaries, after training and the receipt of assets, brought animals together on specified days to receive immunizations and deworming.
- Using private sector dealers and traders, PROSHAR beneficiaries had the opportunity to sell their produce and animals collectively at reasonable prices.
- Since the end of PROSHAR, volunteers trained under the project continue many of their tasks, e.g., checking with market wholesalers on prices, checking on the condition of livestock and vaccinating, and supplying sewing and bamboo materials to beneficiaries.

One farm business advisor, convinced that she would sustain her activities after PROSHAR ended, reported that if she encountered any agriculture-related problem, she would not hesitate to contact the *upazila* agriculture officer for assistance.

Training of livestock and fisheries beneficiaries was often provided jointly by the PROSHAR implementing partner and government staff, which continued to be highly responsive throughout the project period. PROSHAR's packages of assets and training are discussed below.

The focus of this training and these inputs on targeted beneficiary households explains the finding in the quantitative evaluation that rice yields (for example) were 52% higher for participant than for non-participant families, this despite the economic advantages of the non-participating households.

**Vegetables.** PROSHAR's package of inputs included seeds, a spade, a water spray machine, a net to surround the garden, and training and follow-up assistance from a master trainer and the *upazila* agriculture officers. (According to PROSHAR design, a master trainer trains 10 trainers, who in turn provide technical support for 100 families.) Packages of seeds were procured from an agriculture input dealer, and vouchers were available to beneficiaries for their purchase 2–3 times during the project. These inputs and training explain the quantitative evaluation finding that the number of improved gardening techniques employed by households increased from 1.6 at baseline to 5.1 at endline.

<sup>42</sup> TANGO International. 2015. "Endline Report PROSHAR Quantitative Final Program Evaluation (QFPE) 2015, Bangladesh." Draft.

PROSHAR started several years after a major cyclone, Sidr, in 2007, which left many areas with highly saline soil. The saline levels have been gradually falling but presented problems for some beneficiaries early in the project period.

**Small livestock.** LSPs were also active in PROSHAR. One reported that, for vaccinations, he earns Tk. 10 per cow, Tk. 5 per goat, and Tk. 2 per duck or chicken. He purchases vaccines at the *upazila* livestock office, then goes house-to-house to check on the care and cleanliness of the animals, and provides advice to both animal-raising beneficiaries and non-beneficiaries to reduce the threat of a disease epidemic. During the project, he was paid by the implementing partner. Once the project was over, he told the team, he will not be able to make enough income to support his family by vaccinating alone, but he plans to continue vaccinations along with some additional IGA. This impressive LSP performance likely explains much of the impressive 27% increase in livestock gross margin found by the quantitative evaluation between baseline and endline.

**Fish ponds.** PROSHAR's fish pond intervention included the provision of minnows (four varieties), lime, medicine, and training. Beneficiaries were advised that, every 4–5 months, fish should be harvested and minnows restocked. Some reported that their fish were infected with a virus, but this seems to have been relatively rare.

**Market linkages and private sector.** PROSHAR-trained off-farm business advisors obtained bamboo and sewing material for beneficiaries to facilitate the production of bamboo-made handicrafts and stitching, tailoring, or *karchupi* (intricate gold thread work), and to sell the finished products collectively in bulk. Using private sector dealers and traders, PROSHAR beneficiaries had the opportunity to sell their products collectively at a reasonable price. While the beneficiaries received sewing machines and training from PROSHAR, the off-farm advisors facilitated the marketing and selling of their products. The PROSHAR model of business advisors is particularly sustainable, with many former off-farm advisors and farm advisors still actively involved in linking former beneficiaries with government services and private marketing opportunities. Given that the advisors receive a certain percentage of the profit, they have a financial incentive to continue their work.

**Food security and dietary diversity.** PROSHAR beneficiaries uniformly indicated in interviews that they were more food secure and that their diets were more diverse at the end of the project than they were at the beginning. Beneficiaries indicated that their major dietary diversity changes related to increased consumption of vegetables and fish.

### 3.4.2 Maternal and Child Health and Nutrition

**Health and nutrition of young children.** The quantitative evaluation found a considerable reduction in stunting between baseline and endline. As with Nobo Jibon, this is comparable to national-level reductions. During the project period, most MCHN beneficiaries took their children to vaccination centers (EPI centers) on a regular basis for immunizations and growth monitoring. Most mothers reported that their children's weights increased regularly from month to month. MCHN beneficiaries in FGDs attributed the improvement to the better caring, feeding, and hygiene practices that had been promoted by PROSHAR.

PROSHAR assisted community clinics in the distribution of large quantities of ready-to-use therapeutic food (RUTF) for children enrolled in community-based management of acute malnutrition (CMAM) and also trained government health workers to deliver CMAM services. The project's attention to severe and moderate acute malnutrition is consistent with the quantitative evaluation finding of a substantial reduction in children with severe acute malnutrition in PROSHAR areas.

**Infant and young child feeding.** With innovative “Trio” groups in PROSHAR (separate courtyard sessions for mothers, fathers, and grandmothers led by group leaders of the same sex and age group), the same family might get the same message in three different ways. Younger women's groups and grandmother groups met twice in a month with appointed care group leaders; male groups met once a month. Attendance at male care group sessions was low. Some male beneficiaries whose families received only the ration and no assets refused to participate, citing negative feelings about their minimal benefits from the project. Mothers and mothers-in-laws, however, were able to describe and often repeat the health, nutrition, and hygiene messages presented during the Trio group sessions.

**Food intake and rest during pregnancy and lactation.** Improved self-care practices by women, found in the quantitative evaluation, were affirmed in the evaluation's focus groups and beneficiary interviews. The quantitative evaluation reported dramatic increases in women's food consumption, and similar increases in pregnant women getting at least four ANC visits (from 17% to 46%) and consuming iron/folate supplements (from 38% to 74%) between baseline and endline, results generally reaffirmed by the evaluation's findings. In one FGD with mothers-in-law, participants explained that they let their pregnant daughters-in-law rest for 2 hours during the day and did not let them do any heavy work. In another FGD, one man reported that he did not allow his pregnant wife to do much work, “[e]xcept for things that men cannot do like cooking rice.”

**Food ration.** Beneficiaries seemed to understand the purpose of the ration; they referred to the food ration as “nutrition” and women reported consuming the ration as their “extra food.” One pregnant woman explained, “My family convinced me that I should be the only one to eat that food, as I needed the nutrition during pregnancy.” Another woman explained that when a child begins receiving complementary food, the child receives food from the ration, and the woman eats the rest.

**Use of MCHN services.** MCHN assistance appears to have been impressive during the PROSHAR implementation period, with the provision of ANC, PNC, GMP, and counseling services in easily accessible EPI centers or satellite clinics organized jointly by PROSHAR (which had, for example, a GMP promoter) and the government health extension staff. Beneficiary interviewees indicated that easily accessible health service provision also resulted in major increases in iron/folate supplement consumption during pregnancy. As with the other programs, accessible preventive MCHN services ended with the conclusion of the program.<sup>43</sup>

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<sup>43</sup> One community health care provider (government staff) based at a community clinic indicated that, post-PROSHAR, he would have tried to maintain the localized services but has been instructed not to do so by more-senior officials committed to the community clinic approach.

(Data collection carried out by qualitative evaluation team members at one community clinic after termination of the project revealed that only a tiny percentage of under-5 children in the coverage area had come for GMP in the previous month.)

**WASH.** Although beneficiaries reported that they washed their hands with soap at the necessary times during the day, the evaluation team rarely found soap at washing points. Although project documents and KIIs with project staff indicated that tippy-taps were made available and some BCC practices improved, the absence of improved sanitation facilities in some areas meant that the practice of open defecation continued and that child feces were often thrown into waterways, explaining, in part, the quantitative evaluation finding that the other two projects fared better than PROSHAR in reducing diarrheal disease in children. It should be noted that PROSHAR began focusing on sanitation only at mid-term.

### 3.4.3 Disaster Risk Reduction

In the districts in which PROSHAR worked, the disasters described were mostly cyclones.

**Preparedness.** Villagers in PROSHAR areas understood that, prior to disasters, they would be alerted through a signal in a range of 1 to 10, with 4–5 indicating that families should prepare to move to a cyclone center and 6–10 indicating that they should actually move. Members of several wealthier households reported that they generally waited to move until signal 9 to reduce the likelihood that their possessions would be stolen. Overall, participants told the evaluation team that:

- When leaving their homes for the shelter, they help children, pregnant women, and elders get there first, after which they relocate their cattle
- They learned how to store food, clothes, and household items at home and to pack dry food to bring to the shelter
- They usually learned about the signal level via radio and television and from local use of a portable microphone (“miking”) for warnings at signal 6 and above
- They had been taught to cut down trees at obvious risk of falling in a storm and to plant new ones away from their houses, as well as to raise their houses to a higher level

This preparedness explains the finding from the quantitative evaluation that the percentage of households experiencing “stress, anxiety, and fear” associated with disasters decreased among PROSHAR beneficiaries from 38% to 5% between baseline and endline.

The evaluation team observed many houses built on plinths that were made from concrete (if a donor or NGO was involved) or mud (if homemade), but did not see houses on stilts. One woman was observed applying new layers of mud by hand to her plinth, which she said she did as often as weekly.

**Organization.** As in Nobo Jibon, PROSHAR established community-based disaster groups. But the government union and *upazila*-based disaster management systems, often tradition-bound and inflexible, did not engage with these groups, and the groups have not met since the conclusion of the project.

In some PROSHAR villages, the team learned about community-based disaster management *volunteer* groups. PROSHAR initiated the idea of these volunteer groups, and the UP selected the members, some of whom were adolescents. In the more disaster-prone villages, the committees seemed more active, and villagers seemed to know the names of the specific volunteer responsible for their part of the village. Volunteers were responsible for making announcements of the signal of storm strength using a microphone and going door to door to make sure villagers were evacuating when it was necessary.

**Recent response to disaster.** During Cyclone Mahasen in 2013, villagers reported that they evacuated to a cyclone shelter, but that the cyclone did not cause major damage.

#### 3.4.4 Gender and Women’s Empowerment

**Work and income.** Men in interviews and FGDs reported that they were pleased that their wives were working. The men were unclear why women had done so little of this income-generating work before, but clearly attributed the change to PROSHAR. Most men reported that their wives held onto earnings until decisions were made about their use. Neither women nor men complained that the new income-generation opportunities created time constraints on other responsibilities. Women in interviews and FGDs indicated that, while they were the recipients of PROSHAR agriculture and livestock inputs, the couples shared the work. It was the men, however, who routinely took the surplus food to sell in the market.

**Decision making.** Both men and women interviewed reported that they discussed major decisions together. Participants in these interviews and FGDs also indicated clearly that women were able to purchase goods in the market, but that major decisions on expenditures were made together.

**Mobility.** As in the other projects, PROSHAR women beneficiaries spoke about “seeking permission,” when they really meant “informing.” It was clear that mobility issues were frequently discussed in PROSHAR training and courtyard sessions, and there was no indication of resistance from husbands.

#### 3.4.5 Linkages and Coordination

##### Linkages with Government Services

**Effectiveness.** Evaluation team findings suggest that PROSHAR was not particularly effective in establishing linkages with government officials in the health sector, although its own MCHN service delivery was impressive. One community health care provider in a KII indicated that he had never been approached by PROSHAR for participation in the project. Others indicated minimal contact. (It appears that this problem, not an issue in the other projects, could easily have been addressed.) However, PROSHAR was involved in the capacity building of some local government service providers. The project also provided resources, including mid-upper arm circumference (MUAC) tapes, weighing scales, and cupboards, to community clinics.

Interviews with beneficiaries and service providers indicated that PROSHAR was generally effective in connecting livelihoods beneficiaries with the respective government extension officers and in facilitating long-term linkages between the beneficiaries and government

officials. Evaluation team interviews and KIIs indicated that this worked best in the fisheries sector. One fisheries beneficiary reported that he regularly called or visited the government extension worker and that the official regularly visited the ponds and “told us what to do if the fish get sick.”

**Sustainability.** While government service provision for former beneficiaries appears to be continuing in the fisheries and livestock sectors, this has not been in the case with MCHN. Senior *upazila* officials indicated that they have been restricted by central government health ministry directives, which are promoting the use of community clinics (one per multiple villages) rather than more localized service delivery.<sup>44</sup> Although the number of community clinics has increased over recent years, the number remains seriously inadequate, discouraging most former project participants from seeking the critically important ANC, PNC, and growth monitoring services they received through the project. Professional private sector services are not yet meeting these gaps in rural areas as they have in urban and peri-urban areas.

### Coordination

As was the case with Nobo Jibon, there was no evidence of coordination with any of the microcredit organizations in PROSHAR coverage areas, and there was evidence of overlapping health services in these areas as well.

### 3.4.6 Behavioral Change and Extension

Behavioral change and extension services in PROSHAR worked best and proved most sustainable when they involved master trainers and farm business advisors. Also highly effective were the innovative “Trio” groups (separate courtyard sessions for mothers, fathers, and grandmothers). Other valuable BCC-related accomplishments included:

- Training and counseling on small livestock and fisheries
- Counseling on the importance of increased vegetable and fish consumption
- Counseling of the caretakers of young children suffering from severe acute malnutrition
- Reduced arduous labor by pregnant women
- Increased use of plinths for protection against disasters

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<sup>44</sup> This has also been the case with the delivery of nutrition services, earlier delivered through explicit nutrition projects with village-based service delivery, but now “mainstreamed” into other health sector activities and managed by the centralized National Nutrition Services.

### 3.5 Project-Specific Findings: SHOUHARDO II

Table 8. Assessment of SHOUHARDO II Strategic Objectives

SHOUHARDO II SOs and IRs	Level of Effectiveness Based on Qualitative Evaluation
<b>SO1: Increased Availability and Access to Nutritious Food by Poor and Extreme Poor Households</b>	
IR 1.1: Improved and diversified agricultural systems	Excellent: Women homestead vegetable producers far more productive with improved practices, cultivation using beds, and better seeds. Livestock production successful with effective vaccination system. Fisheries, though a smaller component, improved with varieties of minnows (fish fry) provided for ponds and nets for river fishing.
IR 1.2: Increased household income among these households	Excellent, particularly in IGAs (often bicycle vans buying and selling between villages and markets) for households with no homestead land or pond. Provision of short-duration rice seed helped combat food insecurity in lean <i>manga</i> season (October–December). Improved income and dietary diversity regularly reported.
<b>SO2: Improved Health and Nutrition of Children under Age 2</b>	
IR 2.1: Improved access and utilization of health and nutrition services	Excellent, with impressive stunting reduction. Mothers attributed child health improvements to counseling and local service provision by project. Accessible service provision rarely available post-project.
IR 2.2: Improved caring practices	Good despite problems with exclusive breastfeeding and gaps between knowledge and practice. Particular emphasis given in project to handwashing and use of latrines.
<b>SO3: Empowerment of Women and Adolescent Girls</b>	
IR 3.1: Increased decision making	Interviews suggested major improvements; this at odds with quantitative evaluation. Most significant changes: increased joint decision making and less need for permission to make expenditures.
IR 3.2: Strengthening of support systems to reduce violence against women	Excellent, particularly in the empowerment of adolescent girls (sometimes confronting members of violence-prone households). Project efforts were facilitated by legal enforcement.
<b>SO4: Increased Responsiveness of Elected Bodies and Service Providers to the Poor and Extreme Poor</b>	
IR 4.1: Improved efforts by National Building Departments and UPs	Good: Facilitated by management score sheets rating government committees and UPs and systematic action to improve scores.
IR 4.2: Access to entitlements and services by poor/extremely poor increased	Good: Responses by beneficiary households particularly encouraging and reflected regular utilization of government services and contact with government officials.
<b>SO5: Disaster Management<sup>a</sup></b>	
IR 5.1: Contingency plans in place and functioning	Excellent, particularly the prioritization of areas and the strengthening of UDMCs. Building and renovation of shelter schools and construction of soil-made plinths particularly impressive.
IR 5.2: Local and national initiatives influenced	Good: Facilitated by CARE's unique relationship with the government.

<sup>a</sup> Best of the three projects.

### 3.5.1 Agriculture and Livelihoods

SHOUHARDO II's livelihood assistance, along with EKATA programming (women's empowerment), was the most widely appreciated component of the project's assistance. The following appear to have been significant contributors to the quantitative evaluation finding that the average number of months of adequate beneficiary household food provisioning increased from 5.1 months at baseline to 11.0 months at endline:

- Government officials noted that women homestead vegetable producers were considerably more productive since implementing improved cultivation practices, including the use of vegetable beds and better seeds.
- Livestock vaccinations were highly successful, with few livestock dying and with a sustainable mechanism developed.
- Male fisheries beneficiaries received nets for river fishing, allowing them to catch larger, more-profitable fish.<sup>45</sup>

**Vegetables and fruits and field crops.** Findings from the quantitative evaluation indicated that the percentage of beneficiary households growing vegetables increased from 16.5% to 63.0% and that the percentage of field crop-producing households adopting at least three optimal technologies increased from 42.1% to 92.0% between baseline and endline.

Beneficiary interviewees and key informants indicated that vegetable cultivation, as part of the Comprehensive Homestead Development intervention (administered alongside livestock inputs on small parcels of land near the home), led to high productivity and yields in SHOUHARDO II areas. Project beneficiaries reported that they received intensive training two or three times during the project and technical support as needed, plus seeds two to three times, fruit seeds and saplings, a spade, a weeder, and a net for fencing.

Trainings were usually led by the *upazila* SAAOs based in the unions and organized by SHOUHARDO II. In KIIs, these agriculture officers stated that SHOUHARDO II had them working with small farmers for the first time. Beneficiaries were taught to use organic fertilizers and pesticides for sustainability and, to keep costs low, to make compost fertilizer and insecticide from neem juice, soapy water and ash, or kerosene and water, or to use a "light trap" (a light that attracts insects near a bowl of water that captures them). They were also introduced to shallow kerosene-powered pumps that more-advantaged farmers could purchase and rent out to farmers interested in laying canals to their plots. One SAAO promoted roadside cultivation, whereby the landless could grow crops along the roads on unused land owned by landed UP members and could share the crops harvested. The evaluation team learned through beneficiary interviews and KIIs that SAAOs often coupled their production-related training with messages that the family should eat vegetables and satisfy home consumption before selling the surplus.

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<sup>45</sup> Only a small proportion of fisheries beneficiaries in the three projects were engaged in river fishing, and the projects themselves did not address the issue of "overfishing." At the same time, the government has been diligent on the issue, with messages on the limitations of river fishing regularly disseminated on radio and television. See: "The Protection and Conservation of Fish Act, 1950" (East Bengal Act No. XVIII, available at: [http://bdlaws.minlaw.gov.bd/print\\_sections\\_all.php?id=233](http://bdlaws.minlaw.gov.bd/print_sections_all.php?id=233)).

The evaluation team learned through FGDs and KIIs that not all farmers were storing high-quality seeds from the intervention, preferring to buy new ones each year from the market or government office despite the fact that seeds were often available only in large volume. SHOUHARDO II often played the middleman role by buying large quantities of seed and selling it as needed to the beneficiaries. At the time of the interviews, there was no entity in place to take on this role in the long term.

SHOUHARDO II also had a field crop livelihood component with inputs for rice production. In one area, the provision of a short-duration variety of rice seed helped combat food insecurity in the lean *manga* season from October to December,<sup>46</sup> allowing for three rice crops in a year. The project also provided high-yielding seed varieties, tools, and money to facilitate irrigation. Yields increased with the use of these inputs, even with traditional varieties. One of the practices that proved difficult for some producers related to urea. Although the improved practice involves placing urea tablets at the base of each crop, time-constrained farmers found it easier to continue spreading urea over their entire cropland area.

**Small livestock.** Livestock rearing, as part of the Comprehensive Homestead Development intervention, increased small livestock production significantly among beneficiary households, consistent with the quantitative evaluation finding that the percentage of beneficiary livestock producers adopting at least three improved technologies increased from 2.6% at baseline to 44.7% at endline. Women in one FGD reported that:

- Goat kids with no problem of feeding would sell for Tk. 2,000–3,000, and none fell sick due to frequent vaccination.
- There was rapid multiplication of ducks, with only slightly higher mortality rates.
- Vaccinations for chickens, purchased by beneficiaries on their own, were often organized collectively in the village every 3 months; demand for eggs increased, and they could easily be sold once household needs were met.

Livestock training was conducted by the *upazila*- and union-level livestock extension workers, organized by SHOUHARDO II.

**Fish ponds.** The fish ponds component of SHOUHARDO II was relatively small due to constraints at the beginning of the project. These constraints were gradually resolved over the course of the project, with good-quality minnows (fish fry), fish feed, and lime becoming locally available. One fisheries beneficiary indicated that he was now making a profit from his pond after failing to do so for 20 years. The project provided four types of fish fry in the first year and money to buy fish fry the second year. The *upazila* fisheries officials provided assistance as requested and, in some areas, were particularly responsive. Visits to areas where the project was no longer in operation indicate that these government fisheries services to former project beneficiaries were continuing and that these former beneficiaries were investing their own resources.

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<sup>46</sup> This seed variety, which can be harvested in 100 days, was developed by the Cereal Systems Initiative for South Asia (CSISA). Some beneficiaries, however, indicated that they continue to prefer the taste of traditional varieties, which, in turn, sometimes elicit a higher price in the market.

**Income-generating activities.** IGA beneficiaries who had neither land nor a pond generally acquired their assets through a SHOUHARDO II process involving both the asset transfer facilitator (a staff member of CARE or the implementing partner) and VDC procurement. In some cases, however, beneficiaries received cash directly, sometimes spending all of the cash for assets relating to the business in which they had been trained or adding it to cash reserves already on hand and sometimes using the cash for assets that they believed would be more profitable (e.g., a goat or ducks). Implementing partners were flexible in this regard, insisting only that the cash not be used directly for consumption. The basic project message to IGA beneficiaries was: “Eat from the profits, not from the capital.”<sup>47</sup> Interviewed beneficiaries, assisted in setting up small shops or in the buying, moving by bicycle van, and selling of foodstuffs (e.g., eggs from villages to *upazila* markets or groceries from *upazila* markets to villages), indicated that their profits were higher than expected. The IGA component was particularly valuable in areas where there was easy access to roads and markets and for former farmers whose cropland was lost due to river erosion. Although the IGA assets (except for fish nets) were provided to women (as were all type of livelihoods inputs according to project design), they were frequently used by their husbands.

**Market linkages and the private sector.** SHOUHARDO II staff reported in KIIs that they encouraged beneficiaries to reach out to both government and nongovernment services. Private vaccinators (often trained through the Youth Development Program by the livestock department) who purchased vaccines from the government sometimes served as “understudies” to livestock field workers. Vaccinators, trained by other development programs like the Char Livelihoods Program, also provided services to SHOUHARDO II beneficiaries. Post-project, community agriculture volunteers and VDC members continued to contact vaccinators to organize vaccination days.

SHOUHARDO II trained collectors as part of the IGAs and provided them with capital to start or continue their businesses. Collectors benefited from the increased income (one collector reported making a profit of Tk. 4,000–5,000 per month) and regularly served beneficiaries who could not go to the market themselves or had smaller amounts of goods to sell. SHOUHARDO II also worked in collaboration with the International Rice Research Institute’s (IRRI) Cereal Systems Initiative for South Asia (CSISA) project to provide short-term varieties of seeds.

To reduce the threat of livestock disease, SHOUHARDO II encouraged producers from both beneficiary and non-beneficiary households to vaccinate their livestock.

The team found cases where project assistance had sustainable effects, perhaps most importantly in livestock immunizations, where many former SHOUHARDO II community agriculture volunteers continued to facilitate the provision of services from government livestock officers and, in some cases, from private vaccinators, who purchased vaccines from the government and provided services at a small charge.

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<sup>47</sup> Although IGA beneficiaries purchasing small livestock were not trained in livestock support, they generally picked up the essentials and knew whom to contact in case of problems.

**Food security and dietary diversity.** Most interviewees reported that they were more food secure at the end of SHOUHARDO II than they had been at the beginning and that dietary diversity had increased, with household members consuming more vegetables and fruits. One older fisheries beneficiary indicated that when his three daughters-in-law, all living with him, received the food ration and food spending decreased, he was able to purchase a cow for the first time, and now everyone in the household drinks milk.

### 3.5.2 Maternal and Child Health and Nutrition

**Health and nutrition of young children.** At baseline, child stunting was considerably higher in SHOUHARDO II areas than in the coverage areas of the other two projects, suggesting that these villages were more vulnerable and, in some cases, that they were more remote. The quantitative evaluation found a substantial baseline-to-endline stunting reduction, and a particularly remarkable decrease in *severe* stunting among young children 6–59 months in “extreme poor” households (from 43.6% at baseline to 11.7% at endline).<sup>48</sup> Interestingly, while female stunting prevalence at endline was slightly lower than for males (47.8% vs. 49.7%), male stunting was significantly higher at baseline, meaning that the percentage reduction among males was almost twice that of females (16.4% vs. 8.7%).

Most interviewed beneficiary mothers reported health improvements in their children, attributing these to better health and nutrition practices resulting from the project.

**Infant and young child feeding.** Beneficiary mothers were universally able to describe optimal child feeding practices that, they indicated, they had learned from courtyard sessions and had not known before the project. Beneficiary interviewees and participants in FGDs suggest that, except for the problematic case of exclusive breastfeeding, infant and young child feeding improved significantly over the life of the project, consistent with the finding in the quantitative evaluation that the percentage of children 6–23 months receiving a “minimum acceptable diet” increased five-and-a-half fold.

**Food intake and rest during pregnancy and lactation.** Interviewees were similarly aware of optimal pregnancy practices and particularly the importance of adequate quantities of nutritious food (“more than usual”).

Interviews with both women and men beneficiaries indicated that at the end of the project pregnant women were doing less heavy lifting (including water collection from tube wells) and were being provided with additional food, including fruit. Men explained that they fed their wives more nutritious food “so that the baby can get more milk.” All findings were consistent with the quantitative evaluation findings that the percentages of women receiving more food and more rest (than usual) during pregnancy increased significantly from baseline to endline (12.5% to 57.6% and 23.5% to 63.3%, respectively).

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<sup>48</sup> USAID. 2015. Quantitative Evaluation Results: Multiyear Assistance Program, Bangladesh.

**Food ration.** Women reported that they received the food ration, ate it, and sold none of it. They also reported that no other family members ate this food as it was meant for them and their young children.

**Use of MCHN services.** MCHN services provided by SHOUHARDO II community health volunteers (CHVs), often with the assistance of government health assistants or family welfare assistants at locations easily accessible to villagers (EPI centers, community clinics, or satellite clinics), reached a high proportion of beneficiaries and also non-beneficiaries,<sup>49</sup> with impressive results. One remarkable accomplishment recorded in the quantitative evaluation is that 97.7% of children aged 6–24 months with diarrhea received oral rehydration salts.

ANC,<sup>50</sup> PNC, and GMP were regularly provided, and SHOUHARDO II CHVs even went from house to house to provide GMP services. With the provision of PNC within 24 hours of birth, it was also possible to record birth weights in some cases. However, with the conclusion of the project, most of these services are no longer locally available. In a few areas, government health staff continued to offer preventive services once a month at one of the EPI centers operating in their coverage areas. While some CHVs reported that they have continued to run the courtyard sessions even after the end of the program, others have moved on to different jobs. According to a community health care provider, attendance at her community clinic increased after the end of SHOUHARDO II, but only slightly, with women living close to the community clinic reportedly visiting the clinic up to four times during their pregnancies. At the same time, some women did not even know the location of the community clinic, and others reported that it was too far and difficult to reach.

**WASH.** Handwashing was particularly emphasized in the courtyard sessions. Most beneficiaries reported washing their hands with soap; some mentioned that they washed their hand with soap up to 6 times per day. Some women trained in courtyard sessions also taught their husbands about the importance of handwashing, also 6 times daily with soap. (As in the other projects, actual practices were less clear, with soap rarely available at the handwashing station.) When asked about the major changes that have taken place in their village, some participants in a male FGD replied “the use of latrines.” In a number of villages, interviewees reported that they no longer have a problem with diarrhea due to better hygiene.

The quantitative evaluation found that, while increases in access to improved sanitation had taken place in SHOUHARDO II, only 50% of beneficiaries at endline had such access.<sup>51</sup> The qualitative evaluation team found areas of both high and low coverage. Where access was high, beneficiaries indicated that SHOUHARDO II encouraged them to purchase latrines, sometimes informally identifying dealers who could provide sanitary latrines for Tk. 1,500–4,000. Some households, also with SHOUHARDO II assistance, received improved sanitation facilities at no cost, as a union budget line item. In some areas, BRAC, World Vision, and Rangpur Dinajpur Rural Service (RDRS) also provided free sanitary latrines, although latrine maintenance was not

<sup>49</sup> One CHV mentioned that she extended her service to non-beneficiary mothers.

<sup>50</sup> The proportion of SHOUHARDO II pregnant women beneficiaries receiving ANC increased nearly 40 percentage points (to roughly 85%) between baseline and endline (quantitative evaluation). It would be useful to assess the percentage 2 years hence, when services will no longer be available locally.

<sup>51</sup> In the Rangpur area, SHOUHARDO II monitoring estimated the figure at 61%.

provided by these organizations. In a small number of areas, SHOUHARDO II itself provided a limited number of free sanitary latrines to particularly needy households, with construction carried out by non-formal “labor constructing societies” made up of beneficiaries themselves trained by SHOUHARDO II engineers. In some areas, SHOUHARDO II facilitated beneficiary access to safe tube well water and, in other cases, provided tube wells and carried out arsenic assessments.

### 3.5.3 Disaster Risk Reduction

SHOUHARDO II’s overall success in disaster management resulted from the following:

- Areas were prioritized in disaster management activity according to vulnerability (project reports and KIIs)
- UDMCs were trained and equipped (KIIs)
- Contingency planning was usually well organized in these areas (beneficiary interviews and KIIs)

Disaster preparedness and response information came from KIIs with disaster officials and volunteers at district, *upazila*, union, and village levels, with villagers providing confirmation and context. In the SHOUHARDO II districts, the disasters described mostly frequently were floods.

**Preparedness.** The most impressive components of preparedness in SHOUHARDO II areas were the following.

- Using cash for payment, shelter schools were built and renovated, and substantial infrastructure was constructed in some villages, with particular attention in flood-prone areas to the construction of soil-made plinths. Quality standards employed in construction were sometimes adopted in subsequent government activities, and many of the structures were maintained by the Local Government Engineering Department.
- SHOUHARDO II trained existing government-selected “disaster volunteers” and actively encouraged their creation where they were not present.<sup>52</sup>
- In a few areas, SHOUHARDO II worked on an experimental basis with the Local Government Engineering Department to construct “mount protection walls” to protect against floods. These walls also allowed previously uncultivable lowland to be farmed.

As in PROSHAR, disaster volunteers reported that they warned of flooding door to door and by “miking” in the village. One disaster risk reduction officer stated that in SHOUHARDO II areas there is usually a 4–5 hour warning period prior to a flash flood, allowing for preparation and evacuation. As in the other projects, participants consistently reported that they were informed, often by disaster volunteers, to keep dry food, potable water, matches, and candles ready for an evacuation. They were also advised about the relative priority of preparedness action.

**Organization.** Several officials from UDMCs in SHOUHARDO II areas reported that their committees had been formed at the time of Bangladesh independence in 1971. They indicated

<sup>52</sup> Although government regulations require four disaster volunteers per ward (roughly three villages), SHOUHARDO II found many areas where such volunteers were not in place at the beginning of the project.

that, prior to the usual months of flooding, they organized meetings to remind villagers of precautions. One *upazila* officer said that he listens for news of high water from Nepal and Assam; another also listens for news in China, Bhutan, and other parts of India. The main modes of communicating about high water were radio and television. UDMC officers said that SHOUHARDO II contributed life jackets, torches, soap, and other non-food items, and, in some areas, boats.

While the *upazila* committees were established in 1971, the UDMCs were not created until 1991, at the time of the severe cyclone in Cox's Bazar and the urgent need to mobilize evacuations. SHOUHARDO II staff reported in KIIs that they sought to strengthen the preparedness and response of these union committees, with 3-day trainings and quarterly planning meetings, and encouraged UDMCs to arrange for four unpaid disaster volunteers (two men and two women) in each village.

One union official reported that he found the training and meetings useful and that he will continue the work after the conclusion of the project. Overall, it appears likely that most SHOUHARDO II-initiated efforts will continue. In some cases, UDMCs were themselves recruiting and training disaster volunteers, indicating their ownership of the extended preparedness structure.<sup>53</sup>

**Responses to disaster.** Disaster volunteers reported responding to floods by taking people to shelters on boats or banana tree rafts and distributing food afterward. And if rice and other crops were lost, *upazila* officials said, their office distributed seeds (those that can be cultivated in flood waters) and fertilizer.

### 3.5.4 Gender and Women's Empowerment

In the SHOUHARDO II areas, women's empowerment interventions occurred in all villages through training and courtyard sessions. In 30% of the villages, there were also EKATA groups, in which 20 adult women and 15 unmarried adolescent girls were organized to learn about the empowerment topics in more detail, to build leadership skills, and to prepare to confront neighbors to prevent an early marriage or domestic violence.

Women's empowerment counseling was targeted not only to women and girls, but also to men and boys, with increased attention to males following the mid-term evaluation. Messages to males were delivered during courtyard sessions (not limited to project beneficiaries) and in core occupational and MCHN group meetings, and boys received additional messages at schools, with an emphasis on girls' rights and "eve-teasing" (cat calling) in SHOUHARDO II coverage areas. Dialogue on the subject also took place in VDC meetings and in "Eliminating Violence Against Women" forums.<sup>54</sup>

<sup>53</sup> However, one *upazila* official was more tepid in discussing the future of disaster volunteers: "[W]e will contact them if necessary."

<sup>54</sup> See: CARE Bangladesh. 2014. "Women's Empowerment: The Journey So Far – The Experience of the SHOUHARDO Program in Bangladesh." Dhaka: CARE Bangladesh; and SHOUHARDO II Annual Reports for 2013 and 2014. There was, by contrast, little mention of such attention to men in the 2012 Annual Report.

**Work and income.** Male and female beneficiaries indicated in interviews that, over the SHOUHARDO II project period, economic hardship was reduced. Men uniformly noted the contribution of women's employment. Some also indicated that family harmony improved as food insecurity was reduced. In a men's FGD, one participant stated that many "of the problems are solved now.... Now the kids go to school. The women didn't have any responsibilities before. But they have now after all those meetings held. They keep the money from selling the eggs... and can give [eggs] to the kids when they head to school." Neither women nor men complained that the new income-generating responsibilities adversely affected time for other responsibilities. There were suggestions in male and female FGDs that men and women have equal ownership of their assets and that both can own property. The lack of elaboration suggested that there may not have been much experience with this.

Because much of the new work for women was agricultural, inquiries were made about agriculture extension to women. One *upazila* agriculture officer said that there is a government mandate that women should constitute at least 30% of the members of agriculture groups. The team's observations suggest that this target has yet to be reached.

**Decision making.** Women and men alike indicated that they make decisions together. This was emphasized in SHOUHARDO II trainings and courtyard sessions. One unmarried adolescent EKATA girl thought that this was *the* most important change that had taken place during the program: "In the past, women could not make decisions for their families. Now they can, and they act on it." Joint decisions included arrangements for their children's marriages.

Most women reported that they can spend the money that they earn as they wish. One young woman stated during her interview that "I don't need the permission, but I do consult." When asked how she is able to spend money independently now when she could not earlier, one young woman said, "After getting training, my bravery level has gone high... because I can earn now."

**Mobility.** Interviews with SHOUHARDO II beneficiaries clearly indicated the transition taking place with respect to women's mobility. Older women and men described earlier constraints to mobility, while younger women and men and those with SHOUHARDO II exposure (women's empowerment or EKATA) reported that women were freer to go further from home, some noting the value of mobile phones to keep their husbands informed. However, responses in male FGDs also indicated concerns for their wives' safety and the need to accompany them on longer excursions. Some visits to markets, particularly where the selling of produce was involved, were restricted to men.

**Child marriage, dowry, and girls' education.** Most informants said that, although early marriages had been common earlier, they were now less so. Members of an FGD of elder women said that, while they all had been married before they were 18, they now oppose the practice. Interviewees indicated that the change had resulted from a combination of government enforcement of child marriage laws and marriage registration and encouragement from SHOUHARDO II.

One participant in an FGD of men said that he had "stopped an early marriage just a few days back." A UP chairman said that early marriage was much reduced since the government started

requiring marriage registration in 2000.<sup>55</sup> Now, he said, early marriage “... happens only in very poor families. They do not register these marriages. There is an average of 10–20 early marriages that happen throughout the year in this union. If they hold a function, I send police and break off the marriage.” They can receive a Tk. 1,000 fine and a year’s jail time.

Surprisingly, most informants indicated that dowries were almost nonexistent as well, also due to government enforcement in recent years and SHOUHARDO II training. FGDs indicated that only particularly poor families ask for it, as a way to gain cash if they have a son. The team learned through KIIs that the penalty for accepting dowry of more than Tk. 500 is Tk. 5,000 and 1 year of jail time. SHOUHARDO II staff reported in one area that when families in dire straits are trying to organize a wedding for a son or daughter and the daughter is at least 18 years of age, money is sometimes raised from savings groups operating through courtyard sessions and provided to these families.

**Domestic violence.** Men and women reported in interviews and FGDs (without solicitation) that domestic violence and eve-teasing had nearly stopped, again the result of awareness raising (through meetings with both men and women) and legal enforcement.<sup>56</sup> Interviews and KIIs indicated that women, being more empowered overall, were, as small groups, confronting households where violence was taking place. One local official reported that he witnessed three cases where such small groups of women in a non-EKATA village confronted violence-prone households and successfully resolved the problems underlying the violence. In each case, the intervening women’s groups threatened to take the case to the UP for *salish* (village court), but resolution was possible without involving the UP. Members of an FGD of women reported that the fine for beating is Tk. 5,000 and 1 year of jail time. Members of FGDs of EKATA women also indicated that they were ready to respond to cases of eve-teasing, but that there had been no cases during the project period.

**EKATA.** As indicated above, in 30% of SHOUHARDO II villages, an EKATA group was formed, with 20 adult women and 15 unmarried adolescent girls. The topics covered in EKATA groups were similar to those in non-EKATA villages.<sup>57</sup> The key difference was that in EKATA villages groups met more frequently, sometimes women and girls separately, sometimes together. One *upazila* women’s affairs officer said that because such good leadership skills were developed in these women and girls, she called on them to help her elsewhere in the *upazila*. Participants in one FGD of EKATA women and girls reported that they had stopped one dowry case and six early marriages and ensured two marriage registrations during their tenure to date.

<sup>55</sup> Through marriage registration, women are given protection in case of divorce through *Den Mohor* (laws pertaining to Islamic marriage and divorce) as was described by women and by an *upazila* women’s affairs officer. “Number 18” on the marriage registration states an amount of “care money” to be provided to the bride in case of divorce, which is negotiated between the bride’s and groom’s parents; interviewees mentioned Tk. 50,000–100,000 depending on the groom’s status. As one older man told us, “Number 18 is government rule.”

<sup>56</sup> According to standard ethical protocol, the evaluation team did not ask about individual experience with violence against women. Violence against women was mentioned either first by respondents or in response to questions about what they learned about in project sessions.

<sup>57</sup> Members said the topics covered included how to earn and manage money, how to sign their names, the importance of fully understanding documents before signing (with the assistance of a literate person where necessary), reading medical prescription instructions, washing hands and maintaining hygiene, drinking clean water, taking necessary actions to stop eve-teasing, domestic violence, child marriage and dowry, and ensuring that marriages are registered.

In addition, women and girls in the EKATA groups said that they were encouraged “to be smart and self-confident” and to be ready to “confront people socially,” e.g., raising issues and discussing decisions with their husbands and parents. Parents of the adolescent girls in EKATA groups were invariably supportive of their involvement.

Strangely, in a project with a substantial focus on adolescent girls, no effort was made in SHOUHARDO II to get weekly iron tablets to these girls. The value of such supplementation and the importance of pre-pregnancy iron stores are well recognized internationally.<sup>58</sup>

While some SHOUHARDO II activities are being continued post-project with community funds, the EKATA groups seemed uncertain about continuing without project support.

### 3.5.5 Linkages and Coordination

#### Linkages

**Effectiveness.** Document review plus KIIs indicated that SHOUHARDO II used management score sheets to rate UPs, UDMCs, and Union Development Coordinating Committees, and then used service fairs, “open budget” facilitation,<sup>59</sup> and the activation of standing and special committees in efforts to improve scores.<sup>60</sup> SHOUHARDO II also encouraged VDCs to prepare community action plans focused on activities discussed above and to negotiate with UPs to ensure budgets for particular community action plan activities. The team found that, in many villages, VDCs were still meeting monthly, and, in one village, they were meeting jointly with EKATA group members. However, SHOUHARDO II experience suggests that such meetings are likely to decline over time.<sup>61</sup> Responses from the beneficiaries suggest that SHOUHARDO II was highly effective in connecting beneficiaries with government officials. During the regular SHOUHARDO II training sessions, beneficiaries were taught to utilize government resources and contact government officers when needed. Most beneficiaries reported that they had, in fact, contacted *upazila*-level government officers for advice on general queries.

**Sustainability.** Of the SHOUHARDO II-trained volunteers in health, agriculture, women empowerment, and education, many were still actively working in the villages. One Upazila Nirbahi Officer indicated in a KII that SHOUHARDO II had provided him with a book containing the names and contact information of all former project volunteers and that he would use the volunteers for his activities. While the quality of volunteer service delivery varies widely in Bangladesh as in most countries, the evaluation team was particularly impressed with SHOUHARDO II volunteers, a judgment reinforced in discussions with government officials.

<sup>58</sup> See, e.g.: Joshi, M. and Gumashta, R. 2013. “Weekly iron folate supplementation in adolescent girls—an effective nutritional measure for the management of iron deficiency anaemia.” *Global Journal of Health Science*. Vol. 5, No. 3, pp. 188–94.

<sup>59</sup> The purpose of “open budget” facilitation is to promote (a) public access to budgetary information and (b) the adoption of accountable budget systems.

<sup>60</sup> However, the team found unions where such actions were not included, making their inclusion on village monitoring forms questionable.

<sup>61</sup> SHOUHARDO I experience suggests that where VDC members have moved up to become UP members, their former VDCs are more likely to continue. SHOUHARDO I VDCs have also been used in subsequent NGO projects in SHOUHARDO I areas.

Experience from SHOUHARDO I indicates that most volunteers in that project continued in service provision employment, often with the government or with other NGOs.<sup>62</sup>

### Coordination with Other Projects

**Synergies.** Unlike most other NGOs working in Bangladesh, CARE has a memorandum of understanding with the government, going back to the pre-liberation period, indicating a special relationship—and suggesting a greater sense of GOB “ownership” of CARE projects. The government invested US\$11 million in the SHOUHARDO II project—roughly 10% of total project costs and significantly larger than its contribution to most other NGO projects. While most NGOs meet officially with the government in periodic “NGO coordinating meetings,” SHOUHARDO II has its own coordination meetings at the *upazila* level, which are held every 2 or 3 months. The Program Advisory Coordinating Committee of 14 ministries, chaired by the Secretary of the Ministry of Local Government, has regular meetings of its own at the national, divisional, district, and *upazila* levels. These meetings also provide an opportunity for SHOUHARDO II officials to develop mutually advantageous interactions with such government programs as the Youth Development Program and “Ekti Bari Ekti Khamar” (“One House, One Farm”).

**Duplication of services.** Interviews with MCHN beneficiaries in some areas suggest that SHOUHARDO II CHVs and BRAC *shasthya sevikas* were providing virtually identical services, with no formal collaboration between the two programs. Evaluation team findings also indicate that some SHOUHARDO II beneficiaries in Char areas were former Char Livelihoods Program (CLP) beneficiaries who had received assets and other services from CLP, this despite some early coordination between CARE and CLP. World Vision also worked with SHOUHARDO II beneficiaries in some areas, although the services provided were not identical. The evaluation team found no indication of formal coordination between SHOUHARDO II and these organizations.

### 3.5.6 Behavioral Change and Extension

Behavioral change and extension services in SHOUHARDO II worked exceptionally well. Effectiveness was particularly notable in:

- Vegetable cultivation using beds, better seeds, and improved practices, including the use of organic fertilizers and pesticides (with producers receiving intensive training and inputs two or three times during the project and with government agriculture officers working with small farmers for the first time)
- Introduction of shallow kerosene-powered pumps to facilitate irrigation
- Provision of short-duration rice seed varieties to combat food insecurity in the October–December lean season
- Improved child feeding and pregnancy practices (particularly increased food consumption during pregnancy, facilitated by the ration)

<sup>62</sup> This SHOUHARDO II approach of training and employing staff and volunteers who then go on to perform valuable services for other organizations has also been utilized in Bangladesh by BRAC on a large scale.

- Improved disaster preparedness by households
- Improved mobility by women
- Further reductions in child marriage (in part the result of adolescent girls groups energized by SHOUHARDO II counseling)

### **3.5.7 Early Childhood Care and Development**

SHOUHARDO II operated ECCD programs for children aged 3–5 in some areas. Volunteers working in these programs reported in KIIs that they regularly checked with primary school teachers to see how well their former ECCD students were doing. (They were usually doing well.)

These activities were considered sufficiently successful that, at the end of the project, some communities raised funds from guardians and from the VDC to maintain ECCD—but now with children from more-advantaged families also joining. Former ECCD volunteers in these areas now receive Tk. 700–1,000 per month (less than the Tk. 2,000 received during the project, but sufficient to keep the former volunteers functioning in these areas). Government officials in Dhaka, in contact with former SHOUHARDO II villages, confirmed that ECCD activity is still continuing there.

## 4. Unintended Positive and Negative Effects: All Projects

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Based on experience with earlier FFP programming in Bangladesh and the experience of similar projects, this qualitative evaluation was able to identify some unexpected effects—some promising, some not—that appear to have resulted from the projects. The most important of these are summarized below.

### 4.1 Positive Unintended Effects

- Relationships between husbands and wives improved, with higher incomes and improved food security, noted particularly in SHOUHARDO II. This effect was greater than anticipated.
- Mobile phones and the ability to communicate more frequently contributed to women’s mobility and, as some beneficiary interviewees suggested, to improved relations between spouses. The evaluation team found this to be the case particularly in SHOUHARDO II. The rapidly expanded use of these phones might not have been anticipated at project inception.
- Vegetable cultivation, although new as a cash crop to many farmers, was adopted with enthusiasm and with larger quantities than expected sold on the market (noted particularly in Nobo Jibon).
- The IGA component was able to rescue many former farmers who had lost their cropland to river erosion. While it was expected that IGAs would contribute to protecting beneficiaries against shocks, the extent to which they assisted these particular former farmers was not anticipated.
- The food ration often saved families money, with savings sometimes used to purchase small livestock.
- High-yielding seed varieties were often passed from household to household.

### 4.2 Negative Unintended Effects

- In some areas of all three projects, a culture of dependency resulted from the provision of free assets (e.g., “Why should I purchase a latrine, when I’ll probably get one free, in time, from a project?”).
- Resentment arose in some villages where it was perceived that wealthier households were receiving the food ration and that ration distribution in the projects was terminated earlier than expected (noted particularly in Nobo Jibon).
- Some UPs had to contend with complaints from residents of villages that had not been chosen to participate in a project (noted particularly in SHOUHARDO II).
- UPs sometimes excluded project villages from benefits that the UPs provided to some households (e.g., free latrines), noting the benefits that project villages were already receiving (noted particularly in SHOUHARDO II).

## 5. Broad Lessons Learned

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The most important lessons gleaned from analysis of the qualitative data are presented below.

1. The evaluation confirms findings of the quantitative evaluation that the projects were remarkably effective in improving the food security status of large numbers of poor and food-insecure households in vulnerable areas of the country.
2. The earlier stranglehold on rural economic opportunity by economically more advantaged rice-growing households led to major migration to the cities. These three projects opened up previously underexploited rural opportunities, generating income through homestead production, livestock, fisheries, and small business activities not requiring farmland per se. This success should have implications beyond Bangladesh.
3. The projects differed considerably in the breadth of services that they provided. While SHOUHARDO II (like SHOUHARDO I) provided multiple inputs (livelihoods, MCHN, WASH, EKATA, ECCD) to vulnerable households (consistent with multisectoral nutrition theory and experience indicating the synergistic benefits), PROSHAR beneficiaries received only one or two (with Nobo Jibon falling in between). The quantitative evaluation found that PROSHAR beneficiaries receiving both SO1 and SO2 assistance experienced greater household food security improvement than those receiving assistance under only one SO.
4. Working productively with some government officials—whose primary orientation is responding to problems rather than preventing them—was challenging. The most serious challenges are in MCHN where, post-program, former beneficiaries are now dependent on “community clinics,” still too distant for most of them, and in disaster management, where government attention is primarily focused on disaster relief rather than preparedness. (There is no government official at the *upazila* or union level whose sole responsibility is to address DRR issues.)
5. By contrast, the most helpful government officials were livestock and fisheries field staff, many of whom appear eager to continue to support beneficiaries post-project.
6. Regarding DRR, SHOUHARDO II was more successful in training government committees and volunteers and in constructing essential structures and plinths than Nobo Jibon and PROSHAR, whose village committees were not taken seriously by the often tradition-bound union and *upazila* committees (which believed they were already covering the necessary village-level responsibilities) and that ceased to function post-project. While structural innovations worked well in some other sectors, it was more difficult in disaster management.
7. All three projects worked productively to provide MCHN services (ANC, PNC, and GMP, plus behavioral change counseling on child care and feeding and on maternal care in the community via courtyard sessions and EPI centers). The lessons were well learned, often memorized. But consistent gaps between knowledge and practice emerged from beneficiary interviews, suggesting the value of incorporating formative research approaches, such as Trials of Improved Practices (TIPS) or other techniques, into health-related BCC programming.
8. The quantitative and qualitative evaluations differed in their conclusions about changes in women’s empowerment over the course of the projects. While the quantitative evaluation did

not find substantive improvements in women's empowerment (possible explanations are provided in project discussions), the qualitative data indicated consistent improvements across projects and villages during the projects' period of performance, with particular increases in:

- Women's roles in household decision making
  - Women's mobility
9. Among adolescent girls and women (notably in SHOUHARDO II areas), the projects increased the awareness of and frequently group action to prevent child marriage, dowry, and violence against women.
  10. The importance of WASH inputs and counseling emerged as having more importance than might have been appreciated at the onset of the program.
  11. Coordination with non-USG-supported projects was a weakness in all three projects. Although formal NGO coordinating sessions were held at all levels, they were often poorly organized and attended and resulted in little actual coordination. Not surprisingly, the evaluation found examples of duplication and overlap of target groups.
  12. The projects had multiple unintended positive effects, perhaps most importantly the improved spousal relationships resulting from increased incomes and food security and the effects of the IGA component in rescuing families who lost farmland due to erosion. The projects also had some negative unintended effects, including, in some areas, the exacerbation of a culture of dependency.

## 6. Recommendations

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The following recommendations emerged as potentially useful for new FFP projects in Bangladesh, including the recently initiated FFP development food assistance project initiatives.

### Program Structure

- Encourage programs to be genuinely multisectoral, with targeted food-insecure beneficiary households receiving inputs from multiple sectors, thus taking advantage of the synergies of convergence in vulnerable areas of the country. SHOUHARDO II and the earlier SHOUHARDO I are excellent models.
- Include adequate resources to ensure full administrative backstopping of these multisectoral activities. SHOUHARDO II staff were hard-pressed to support all of these activities adequately while at the same time meeting USAID reporting requirements.
- Encourage consistent definitions of beneficiary categories (e.g., “extreme poor,” “poor”) among projects, and require projects to write up and make available their intervention methods (e.g., in women’s empowerment, which groups targeted with which messages). Such consistency should facilitate management and subsequent evaluation of the projects.

### Livelihoods

- Continue to take full advantage of the still considerable income-generating opportunities in rural Bangladesh for homestead production, livestock, fisheries, and small businesses, and promote these successes in other South Asian countries.
- Continue creative efforts to increase the focus of livelihood initiatives on women, including increases in the employment of female agriculture extension agents.
- While continuing to focus on the poorest and most vulnerable, begin to integrate value chain approaches and “what-can-be-scaled-up” thinking into IGA planning.

### MCHN

- Working closely with USAID health staff and other MCHN partners, explore means of providing preventive health and nutrition services in the large number of vulnerable local areas that do not have reasonable access to community clinics or other government services. Government reliance on community clinics alone for preventive health and nutrition service delivery is not likely to be sufficient in the foreseeable future.
- Include TIPS or other formative research approaches in projects to reduce gaps between MCHN knowledge and practices.
- Provide weekly iron/folate supplements to adolescent girls in schools or through EKATA-type activities.

### Women’s Empowerment

- Carry out positive deviance inquiries at the outset of these programs to identify households where reasonable threshold levels of women’s empowerment exist, identify what is

different about these households, and seek to utilize these positive deviant behaviors and characteristics in women's empowerment activities.

- While the increased employment of women appears to have had limited negative effect on child care practices (the one exception being inadequate exclusive breastfeeding), this issue deserves continued attention should future efforts be made to increase women's employment away from the home. Should this problem prove significant, new projects also could explore alternative child care options.

### Disaster Management

- Working together with other development partners, encourage government efforts to shift primary government disaster management attention from what is now largely *post*-disaster responses to *pre*-disaster protection. However, without government officials at the *upazila* and union levels who are solely responsible for disaster management, such efforts will be inherently limited.
- Focus primary sub-district disaster-related attention in new projects on the strengthening of existing government disaster management systems and structures rather than seeking to create new ones.

### Linkages

- Promote joint field visits by program staff carrying out similar projects in the same districts, as well as the active sharing of program information and the avoidance of unproductive overlap, but encourage combined programming where possible to permit multisectoral convergence (e.g., adding sanitation or educational services where only livelihoods and MCHN are in place) in new programs. This evaluation makes clear that existing coordination systems have been inadequate to foster inter-project coordination or to avoid duplication of services.

### Monitoring and Evaluation

- Place a premium not only on timely reporting but also on program monitoring (carried out reasonably well in the programs evaluated) and on the local utilization of data, using management by exception principles to identify, and then focus on, *upazilas* and unions that do not meet predetermined minimal acceptable levels on key indicators. (While project offices often took steps to address problems brought to their attention, this cannot be a substitute for the systematic data-based highlighting of shortcomings.) Given USAID's premium on high-quality monitoring and evaluation (M&E), the absence of such local utilization of data appears to be a missed opportunity.
- Additionally, given that field offices often must refer to their respective country offices before changes to projects can be made, it is recommended that better mechanisms be established between country and field offices to address identified field problems more expeditiously.

### Exit Strategies and Sustainability

- Require that programs develop carefully constructed exit strategies at project inception and that these exit strategies be monitored as diligently as the programs themselves. These exit strategies should address not only future plans for services delivered by the project (and their financing) and the maintenance or further improvement of project impact indicators at endline, but also the constructive future utilization of trained project staff and volunteers. USAID should then ensure that post-exit evaluations of these exit strategies are carried out (ideally 2 years after program completion).
- Relatedly, assess whether the positive effects (e.g., on food security and women's empowerment) noted in this qualitative study have been sustained 1 or 2 years after the completion of these three projects and apply sustainability-related lessons to new FFP development food assistance projects. Where sustainability has not been achieved, discussions with the GOB would be useful and solutions should be sought.

## Annex 1. Documents Reviewed

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The team conducted a desktop review of the following documents:

1. Program description for all three projects
2. Monitoring and Evaluation (M&E) plans
3. Project quarterly and annual reports
4. Baseline and mid-term evaluation data and reports
5. Annual survey data and reports
6. Indicators Performance Tracking Tables and Performance Indicators Reference Sheets
7. Bangladesh FFP Food Security Country Framework 2009–2014
8. Project Intervention Documents and Process documents
9. Project training materials and guidelines
10. USAID/Bangladesh Country Development Cooperation Strategy 2011–16
11. Programs’ proposals, cooperative agreements, and host country agreements
12. Pipeline Estimates Resource Proposals
13. 2011 and preliminary 2014 Bangladesh Demographic and Health Surveys
14. Information on other Feed the Future and USAID programming in the same districts
15. Alive and Thrive Bangladesh Program results (including frequency of visits, synergy among interventions, and intensity)
16. Quantitative Evaluation Reports of all three projects

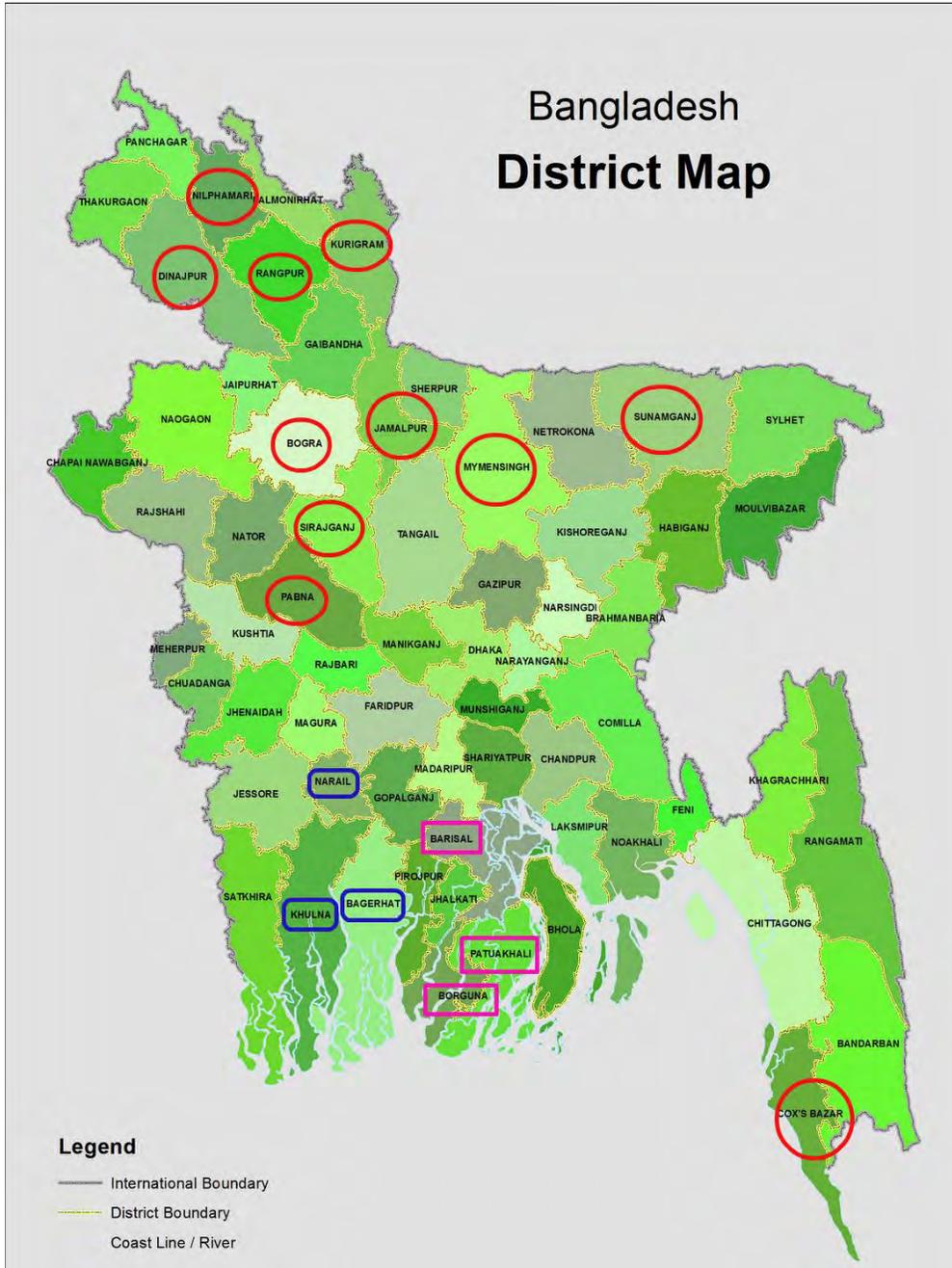
## Annex 2. Field Travel Schedule

Date	Time	Mode of transport	Activities
<b>Week 1 - Sunday</b> 7 June	Morning	Air	<b>NOBO JIBON</b> visit begins: Travel from Dhaka to Barisal District KII with Nobo Jibon staff, partner NGOs and stakeholders Night halt at Barisal town
Monday 8 June	Whole day	Car	Visit Amtali Upazila, Barguna District (Village Krishno Nogor in Kukuya Union) Night halt at Barisal town
Tuesday 9 June	Whole day	Car	Visit Barguna Sadar upazila, Barguna District (Village Rayer Tabak in Burirchar Union) Night halt at Kuakata town
Wednesday 10 June	Whole day	Car	Visit Kalapara upazila, Patuakhali District (Village Puran Mahipur in Khaprabhanga Union) Night halt at Barisal town
Thursday 11 June	Whole day	Speed Boat	Visit Mehendigonj Upazila, Barisal District (Village Bou Doberchar in Darichar Khajuria Union) Night halt at Barisal town
Friday 12 June	Whole day	NA	Team meeting in Barisal town to discuss Nobo Jibon preliminary findings Debrief with Save the Children regional office in Barisal to discuss Nobo Jibon preliminary findings Night halt at Barisal town
Saturday 13 June	Morning	Car	<b>PROSHAR</b> visit begins: Travel to Khulna Meeting with ACDI/VOCA staff Night halt at Khulna Town
<b>Week 2 - Sunday</b> 14 June	Whole day	Car	Visit Sarankhola Upazila, Bagerhat District (Village Amragachi in Dhansagar Union) Night halt at Khulna town
Monday 15 June	Whole day	Car	Visit Batiaghata Upazila, Khulna District (Village Birat in Baliadanga Union) Night halt at Khulna town
Tuesday 16 June	Whole day	Car, Air	Visit Lohagara Upazila, Narail District (Village Char Daulatpur in Itna Union) Due to hartal called by a political party on 17 June the evaluation team left the village early and returned to Dhaka by an evening flight Night halt at Dhaka
Wednesday 17 June	Whole day	Car	Team meeting to discuss PROSHAR preliminary findings and USAID presentation Meeting with USAID in the afternoon to debrief Nobo Jibon and PROSHAR preliminary findings Night halt at Dhaka
Thursday 18 June	Whole day	NA	Team meeting at Lakeshore hotel to discuss preliminary findings. Night halt at Dhaka
Friday 19 June	Start 9.30AM from Lakeshore Hotel	Car	<b>SHOUHARDO II</b> visit begins: Travel to Mymensingh District Meeting with CARE regional office staff in Mymensingh Night halt at Mymensingh town

Date	Time	Mode of transport	Activities
Saturday 20 June	Whole day	Car, Boat and Van	Visit Phulpur Upazila, Mymensingh District (Village Kuripara in Rupasi Union) Night halt in Mymensingh town
<b>Week 3</b> Sunday 21 June	Whole day	Car	Visit Fulbaria Upazila, Mymensingh District (Village Patuli in Achimpatuli Union) Night halt in Mymensingh town
Monday 22 June	Whole day	Car	Visit Haluaghat Upazila, Mymensingh District (Village Purba Dhara in Dhara Union) Night halt in Jamalpur town
Tuesday 23 June	Whole day	Car	Visit Islampur Upazila, Jamalpur District (Village Kasharidoba in Sapdhari Union) Night halt in Mymensingh town
Wednesday 24 June	Whole day	Car	Visit Dharmapasha Upazila, Sunamgonj District (Village Ahmmmedpur in Selborash Union) Night halt in Mymensingh town
Thursday 25 June	Morning	Car	Return to Dhaka Night Halt in Dhaka
Friday 26 June	Morning	Air	Travel to Sunamgonj District (Via Sylhet) Night halt in Sylhet town
Saturday 27 June	Whole day	Car	Visit Derai Upazila, Sunamgonj District (Village Athpuriya in Jagaddal Union) Night halt in Sylhet town
<b>Week 4</b> Sunday 28 June	Morning	Air	Return to Dhaka <b>Afternoon</b> PROSHAR Debriefing
Monday 29 June	Morning	Car	Travel to Pabna District Night halt in Sirajgonj
Tuesday 30 June	Whole day	Car	Visit Bera Upazila, Pabna District (Village Digholkandi in Jatshakhini Union) Night halt in Bogra Town
Wednesday 1 July	Whole day	Car	Visit Sonatola Upazila, Bogra District (Village Hasraj in Madhupur Union) Night halt in Rangpur Town
Thursday 2 July	Whole day	Car	Visit Dimla Upazila, Nilphamari District (Village Dakshin Khalisa Chapani in Khalisa Chapani Union) Night halt in Rangpur Town
Friday 3 July	Whole day	NA	Team meeting to discuss SHOUHARDO II preliminary findings Focus Group with CARE regional staff in Rangpur.
Saturday 4 July	Whole day	Car	Visit Ghoraghat Upazila, Dinajpur District (Village Khairul in Singra Union) Night halt in Rangpur Town
<b>Week 5</b> Sunday 5 July	Whole day	Car	Visit Kaunia Upazila, Rangpur District (Village Gadai in Bala Para Union) Night halt in Rangpur Town
Monday 6 July	Whole day	Car	Visit Bhurungamari Upazila, Kurigram District (Village Bokultali in Joymanirhat Union) Night halt in Rangpur Town

<b>Date</b>	<b>Time</b>	<b>Mode of transport</b>	<b>Activities</b>
Tuesday 7 July	Whole day	Car	Visit Chilmari Upazila, Kurigram District (Village Mandal Para in Ramna Union) Night halt in Rangpur Town
Wednesday 8 July	Whole day	Car, Speed Boat (RDRS and Speed Trust) and Van	Visit Raumari Upazila, Kurigram District (Village Balurgram in Dantbanga Union) Night halt in Rangpur Town
Thursday 9 July	Whole day	Car	Visit Kurigram Sadar Upazila, Kurigram District (Village Belgachha in Belgachha Union) Night halt in Bogra
Friday 10 July	Morning	NA	Team meeting at Naz Garden to discuss SHOUHARDO II preliminary findings. Night halt in Bogra
Saturday 11 July	Whole day	Car and Country Boat	Visit Kazipur Upazila, Sirajgonj District (Village Harinathpur in Tekani Union) Meeting with CARE staff in Sirajgong. Night halt in Dhaka
Week 6 Sunday 12 July	Morning	Air	Travel to Cox's Bazar Night halt in Cox's Bazar
Monday 13 July	Whole day	Car	Visit Ukhia Upazila, Cox's Bazar (Village Uttar Dhamon Khali Shialia Para in Palong Khali Union) Night halt in Cox's Bazar
Tuesday 14 July	Morning	Air	Travel to Dhaka

### Map of Development Food Assistance Projects' Districts



-  Nobo Jibon Districts
-  PROSHAR Districts
-  SHOUHARDO II Districts

## Annex 3. Data Collection Instruments

### Ten Question Food Access Survey Tool (FAST) for Bangladesh<sup>63,64</sup>

No.	Question	Response	Response Options
1	How often did you eat three 'square meals' (full stomach meals) a day in the past 12 months (not a festival day)?		Mostly (3 meals each day) Often (3 at least a few times each week) Sometimes (3 per day 7-12 times this year) Rarely (3 per day only 1-6 times this year) Never
2	In the last 12 months, how often did you or any of your family have to eat wheat (or another grain) although you wanted to eat rice (not including when you were sick)?		Never Rarely (only 1-6 times this year) Sometimes (7-12 times this year) Often (a few times each month) Mostly (most days/weeks)
3	In the last 12 months how often did <i>you yourself</i> skip <u>entire meals</u> due to scarcity of food?		Never Rarely (only 1-6 times this year) Sometimes (7-12 times this year) Often (a few times each month) Mostly (most days/weeks)
4	In the past 12 months how often did <i>you</i> personally eat <u>less</u> food in a meal due to scarcity of food?		Never Rarely (only 1-6 times this year) Sometimes (7-12 times this year) Often (a few times each month) Mostly (most days/weeks)
5	In the past 12 months how often did food stored in your home run out and there was no money to buy more that day?		Never Rarely (only 1-6 times this year) Sometimes (7-12 times this year) Often (a few times each month) Mostly (most days/weeks)
6	In the past 12 months how often did you worry about where food would come from? ( <i>Mathar bhitre koto chinta</i> from food or money worries).		Never Rarely (only 1-6 times this year) Sometimes (7-12 times this year) Often (a few times each month) Mostly (most days/weeks)

<sup>63</sup> Source: Coates, J.; Webb, P.; and R. Houser. 2003. *Measuring Food Insecurity: Going Beyond Indicators of Income and Anthropometry*. Washington DC: FANTA.

<sup>64</sup> Scores for all questions are added. The higher the score, the more food insecure the household.

No.	Question	Response	Response Options
7	In the past 12 months, how often did your family purchase rice?		Never Rarely (once every few months last year) Sometimes (a few times each month) Often (every week) Mostly (every day)
8	In the past 12 months how often did <u>your family</u> take <u>food</u> (rice, lentils etc.) on credit (or loan) from a local shop?		Never Rarely (only 1-6 times this year) Sometimes (7-12 times this year) Often (a few times each month) Mostly (this happens a lot)
9	In the past 12 months how often did <u>your family</u> have to borrow food from relatives or neighbors to make a meal?		Never Rarely (only 1-6 times this year) Sometimes (7-12 times this year) Often (a few times each month) Mostly (this happens a lot)
10	Based on answers to the above questions, <i>in the enumerator's opinion</i> , this household should be classified as:		Food secure Moderately food insecure Highly food insecure

### Data Collection Instrument for Interviews with Beneficiary Women or Men

#### A. Demographics

1. Name
2. Sex
3. Village
4. Upazila
5. District
6. Number of household members
7. Number of children under age 3
8. Please list the primary school-age girls in your household and indicate for each whether the girl is in school.
9. If yours a female headed household?
10. Source of employment for primary earner

#### B. Program Constraints Assessment

1. Are you familiar with the \_\_\_\_\_ project? (Describe the project, if the name is not familiar.)
2. Can you explain what this project seeks to accomplish?
3. Please describe your involvement in the project and tell us for how long you've been involved.
4. Please describe any ways you or your family have benefited from the project.

5. Please describe any ways the project has reduced your wellbeing, or that of any member of your family.
6. How effective do you believe the project is in accomplishing its purposes? (These can be explained, if necessary)
7. What constraints do you believe inhibit the project from fully accomplishing its purposes?
8. (For each of these constraints) what is your suggestion on means by which this constraint can be overcome?

C. Hygiene/Sanitation<sup>65</sup>

1. Has the project assisted you with water, hygiene or sanitation? Please explain
2. After defecation what do you normally do?

D. To be filled in by the enumerator

1. Is the household living in an area that could be described as “remote?”
2. Does the household have its own sanitary facility?
3. Does the household have a “handwashing station” with soap visible?

**Data Collection Instrument for Beneficiaries with a Primary Involvement in Agricultural Production**

A. Demographics

1. Name
2. Sex
3. Village
4. Upazila
5. District
6. Number of household members
7. Number of children under age 3
8. Please list the primary school-age girls in your household and indicate for each whether the girl is in school.
9. Is yours a female headed household
10. Source of employment for primary earner
11. Amount of land owned

B. Specific agricultural information

1. Has the project specifically assisted your household in agricultural production, in the processing or preservation of agriculture produce or in marketing or the provision of market-based information? Please describe.

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<sup>65</sup>Note: Since the PROSHAR project is involved only with food security and nutrition, questions relating to women’s empowerment and gender violence will not be included in information collection at PROSHAR project sites.

2. Has anyone in your household participated in farmer field schools? Has your household benefited from such participation? Please explain.
3. Over the past three years has your agriculture production:
  - a. Increased
  - b. Decreased
  - c. Remained the same
4. Over the past three years has your household's vegetable consumption
  - a. Increased
  - b. Decreased
  - c. Remained the same
5. Over the past three years, has your household's consumption of fruits, legumes, dairy and meat
  - a. Increased
  - b. Decreased
  - c. Remained the same
6. Over the past few years have these foods become
  - a. More readily available
  - b. Less readily available
  - c. About the same
7. Over the past three years, do you find that your household is spending more on some expenses and less on others? Please explain

C. Program Constraints Assessment

1. Please describe any ways the project has reduced your wellbeing, or that of any member of your family.
2. How effective do you believe the project is in accomplishing its purposes? (These can be explained, if necessary.)
3. What constraints do you believe inhibit the project from fully accomplishing its purposes?
4. (For each of these constraints) what is your suggestion on means by which this constraint can be overcome?

D. To be filled in by the enumerator

1. Is the household living in an area that could be described as "remote?"
2. Does the household have its own sanitary facility?
3. Does the household have a "handwashing station" with soap visible?

## Data Collection Instrument for Beneficiary Women who are Pregnant or who have a Child or Children Under Age 3

### A. Demographics

1. Name
2. Sex
3. Village
4. Upazila
5. District
6. Number of household members
7. Number of children under age 3
8. Number of pregnant women
9. Please list the primary school-age girls in your household and indicate for each whether the girl is in school.
10. If yours a female headed household?
11. Source of employment for primary earner
12. Amount of land owned

### B. Specific health and nutrition information

1. Has your household received any assistance from this project relating to pregnancy or the growth of your young child(ren)? Please describe.
2. Over the past three years, have health and nutrition services for you and your children become
  - a. More readily available
  - b. Less available
  - c. About the same
3. Has anyone in your household participated in a “care group?” If yes, has your household benefited from such participation? Please explain.
4. (If child is 6 months or older) At what age did you introduce semi-solid food to this child?
5. During your present or last pregnancy did you eat less, more or the same as pre-pregnancy?
5. During the past three years has diarrhea among your children
  - a. Increased
  - b. Decreased
  - c. Remained about the same

### C. Program Constraints Assessment

1. Please describe any ways the project has improved or reduced the wellbeing of you, during your pregnancy, or that of any of your children under age 3.
2. How effective do you believe the project is in accomplishing its purposes? (These can be explained, if necessary.)
3. What constraints do you believe inhibit the project from fully accomplishing its purposes?
4. (For each of these constraints) what is your suggestion on means by which this constraint can be overcome?

D. To be filled in by the enumerator

1. Is the household living in an area that could be described as “remote?”
2. Does the household have its own sanitary facility?
3. Does the household have a “handwashing station” with soap visible?

**Data Collection Instrument for Focus Groups on Project Effects with groups of younger women, groups of older women and groups of men**

Program Constraints Assessment

1. Are you familiar with the \_\_\_\_\_ project? (Describe the project, if the name is not familiar.)
2. Can you explain what this project seeks to accomplish?
3. Please describe your involvement in the project and tell us for how long you’ve been involved.
4. Please describe any ways you or your family have benefited from the project.
5. Please describe any ways the project has reduced your wellbeing, or that of any member of your family.
6. How effective do you believe the project is in accomplishing its purposes? (These can be explained, if necessary.)
7. What constraints do you believe inhibit the project from fully accomplishing its purposes?
8. (For each of these constraints) what is your suggestion on means by which this constraint can be overcome?

**Data Collection Instrument for Interviews with Community Leaders on Disaster Preparedness**

1. What natural disasters (flooding, tornadoes/hurricanes, drought) has your community faced in the past three years?
2. How well was your community prepared for these disasters? Please explain preparatory actions taken.
3. Did the project contribute to these preparations? If yes, how?
4. (If preparations were put in place) Did the households in your community suffer less from the disasters than in previous years? Please explain.
5. In the case of the most recent disaster, did the project provide any humanitarian assistance to mitigate its effects on the households in your community? (If yes, please explain.)
6. What constraints impeded effective disaster preparedness?
7. What would be your suggestions for overcoming each of these constraints?

## **Data Collection Instrument for Project Managers and Service Providers**

### **A. Program Constraints Assessment**

1. How effective do you believe the project is in accomplishing its purposes?
2. What constraints do you believe inhibit the project from fully accomplishing its purposes?
3. (For each of these constraints) what is your suggestion on means by which this constraint can be overcome?

### **B. Linkages and Coordination**

1. Please describe the linkages/coordination efforts you have with (as relevant) other USG or donor entities, or with GOB projects.
2. Have any of these linkages/coordination efforts improved the functioning of your project? Please give examples.
3. If not fully effective, what are the constraints inhibiting effectiveness?
4. What are your suggestions for overcoming these constraints?
5. Has the government taken any action to increase their responsibility in activities presently being undertaken by the project? (Please explain.)

## **Data Collection Instrument for Local Government Officials**

### **A. Extent of Involvement and Program Constraints Assessment**

1. Can you tell us about this project and describe the components in which you've been involved?
2. How actively has your department been involved in this project? Please describe your involvement?
3. Your department is involved in many different activities. Do you consider the activities of this project a priority? If so, how much of a priority?
4. Now that this project is drawing to a close, will the government be assuming responsibility for some of the activities? If so, which activities? Please describe.
5. How effective do you believe the project is in accomplishing its purposes?
6. What constraints do you believe inhibit the project from fully accomplishing its purposes?
7. (For each of these constraints) what is your suggestion on means by which this constraint can be overcome?

### **B. Linkages and Coordination**

1. Please describe any linkages/coordination efforts you have with the project or with any of its activities.
2. Do you believe any of these linkages/coordination efforts have improved the functioning of government activity? Please give examples.
3. If not fully effective, what are the constraints inhibiting effectiveness?
4. What are your suggestions for overcoming these constraints?

## Data collection instruments for individual women and men on the gender empowerment effects of the projects

### *Questions for women:*

1. How have you personally been affected by the project?
2. Has it improved or reduced your personal wellbeing? If so, how?
3. Do you believe you are more involved/less involved/about the same/ in household decision-making (e.g. re household expenditures and control of household resources) compared to three years ago? (Please explain being specific about areas of decision making.)
4. Do you believe that your ability to travel unaccompanied by a male to markets or to participate in other community activities has been affected (more access/less access/about the same) because of this project? Please explain.
5. Can you explain the reasons for changes in “2” or “3” above? (Seek to determine whether any facets of the project have contributed, and, if yes, which specific facets.)
6. Over the past three years has your own food consumption
  - a. Increased
  - b. Decreased
  - c. Remained about the same
7. Over the past three years has your own rest time during the day
  - a. Increased
  - b. Decreased
  - c. Remained about the same
8. Over the past three years has your personal use of health facility services
  - a. Increased
  - b. Decreased
  - c. Remained about the same

### *Questions for Men*

1. Do you believe that women in your household contribute more income (either cash or in-kind) to the household because of the project? If so, how?
2. Do you believe women in your household are more involved/less involved/about the same/ in household decision-making (e.g. re household expenditures and control of household resources) compared to three years ago? (Please explain being specific about areas of decision making.) How do you feel about women’s decision making in household decision making?
3. Do you believe that the ability of women in your household to travel unaccompanied by a male to markets or to participate in other community activities has been affected (more access/less access/about the same) because of this project? Please explain. How do you feel about women doing such traveling unaccompanied?
4. Can you explain the reasons for changes in “1” or “2” above? (Seek to determine whether any facets of the project have contributed, and, if yes, which specific facets.)
5. You are probably aware that women’s empowerment is something this project is seeking to increase. What is your opinion about women’s empowerment? Do you believe there is value in empowering women? Please explain.

**Data collection instrument for focus groups on men and women on the gender empowerment effects of the projects:**

1. In your community, are there differences in the status of men and women or in their access to resources, services and opportunities? Please explain
2. (If yes) do you believe these differences have increased, been reduced or remained the same over the past three years?
3. Do you believe that the project has affected these differences in any way? Please explain.
4. What suggestions do you have for reducing any of the differences you have identified?

## Annex 4. Goals, Strategic Objectives, and Intermediate Results per Project (Fully Stated as in Project Documents) and Beneficiaries Reached Where Relevant<sup>66</sup>

<b>Nobo Jibon<sup>67</sup></b>		
<b>Project Goal: Reduce food insecurity and vulnerability for 191,000 direct beneficiary households, or nearly one million people, in nine upazilas of Barisal Division (which became 11 upazilas) over five years</b>		
<b>SO1:</b> Improved health and nutritional status of targeted households, particularly children less than five years of age  <i>No. of beneficiaries: 225,000<sup>68</sup></i>	<b>SO2:</b> Poor and extremely poor households have increased production and income to improve to access to food  <i>No. of beneficiaries: 86,000<sup>69</sup></i>	<b>SO3:</b> Households in targeted communities protect their lives and assets and quickly resume livelihoods activities following natural disasters  <i>No. of beneficiaries: 444,241<sup>70</sup></i>
IR 1.1: Households and communities practice MCHN and environmental health behaviors promoted by the program	IR 2.1: Targeted households apply improved knowledge and skills for increased production and market sales	IR 3.1: Communities manage functional emergency preparedness and response plans
IR 1.2: Government, NGO and community based health providers deliver improved integrated health, family planning and nutrition services	IR 2.2: Targeted households access quality inputs, capital, and market information	IR 3.2: Communities access appropriate infrastructure for protecting lives and assets in an emergency
IR 1.3: Women and children benefit from a transformed social and policy environment	IR 2.3: Extremely poor households access land, water bodies, and inputs for sustainable income generation	IR 3.3: SC and MYAP partners respond to emergencies in an effective and coordinated manner
		IR 3.4: Targeted communities receive and respond to early warning for floods and cyclones

<sup>66</sup> Beneficiary figures, where not rounded are actual numbers; where rounded they are beneficiary targets.

<sup>67</sup> Source: Tango International. 2010. Nobo Jibon Baseline Survey Report.

<sup>68</sup> The actual number of beneficiaries reached, target was 80,000 (Tingo, A. 2015. “Nobo Jibon: Contribution to Food Security and Nutrition in Bangladesh.” Presentation. Dhaka: Save the Children.)

<sup>69</sup> The actual number of beneficiaries reached, target was 80,000 (Tingo 2015).

<sup>70</sup> The actual number of beneficiaries reached, target was 373,470 (Tingo 2015).

**PROSHAR<sup>71</sup>****Project Goal: Reduce food insecurity among vulnerable rural populations in selected upazilas in Khulna Division**

<b>SO1:</b> Incomes and access to food of poor and ultra-poor households improved	<b>SO2:</b> Health of pregnant and lactating women (PLW) and children under 5 (with particular attention to children under 2) improved	<b>SO3:</b> Institutions and households prepared to respond effectively to shocks
<i>No. of beneficiaries<sup>72</sup>: 42,846</i>	<i>No. of beneficiaries: Non-Ration: 3,833 Ration: 26,216</i>	<i>No. of beneficiaries: 20768</i>
IR 1.1: Agricultural Productivity Increased and Diversified	IR 2.1: Malnutrition prevented and treated	IR 3.1: Disaster Risk Reduction Action Plans (DRRAPs) functional
IR 1.2: Market Linkages Developed and Strengthened	IR 2.2: Improved effectiveness of health clinic services	IR 3.2: Early warning systems functional
IR 1.3: Non-Agricultural Opportunities Expanded and Diversified		IR 3.3: Increased knowledge and skills on disaster risk management

<sup>71</sup> Source: Moneval Solutions Ltd. 2013. "Mid-Term Review for the PROSHAR Project in Bangladesh."

<sup>72</sup> The actual number of beneficiaries reached (Source: ACDI/VOCA household population tracking sheet).

SHOUHARDO II <sup>73</sup>

**Project Goal: Transform the lives of women and men in 370,000 poor and extreme poor (PEP) households in eleven of the poorest and most marginalized districts in Bangladesh**

<p><b>SO1:</b> Availability of and access to nutritious foods enhanced and protected for 370,000 PEP households</p> <p><i>No. of beneficiaries: 370,000<sup>74</sup></i></p> <p><i>No. of Core Occupational Group (COG) beneficiaries reached: 370,616<sup>75</sup></i></p>	<p><b>SO2:</b> Improved health, hygiene and nutrition status of 281,000 children under 2 years of age</p> <p><i>No. of beneficiaries: 281,000<sup>76</sup></i></p> <p><i>No. of Food Ration Recipients: 154,319<sup>77</sup></i></p>	<p><b>SO3:</b> PEP women and adolescent girls empowered in their families, communities and Union Parishad (UP)</p> <p><i>Total no. of EKATA members<sup>78</sup>: 21,472</i></p>	<p><b>SO4:</b> Local elected bodies and government service providers responsiveness and accountability to the PEP increased</p> <p><i>Total no. of VDC members who received training<sup>79</sup>: 15,069</i></p>	<p><b>SO5:</b> Targeted community members and government institutions are better prepared for, mitigate, and respond to disasters and adapt to climate change</p> <p><i>No. of beneficiaries who received<sup>80</sup>: disaster preparedness training: 21,415</i></p> <p><i>Emergency response training: 89,197</i></p>
<p>IR1.1: Improved and diversified agriculture systems developed and linked with private and public services</p>	<p>IR2.1: "Access to" and "utilization of" health and nutrition services improved to care givers of children under 2 years of age</p>	<p>IR3.1: Influence of PEP women and adolescent girls in decision-making increased.</p>	<p>IR4.1: Nation Building Departments (NBDs) and UPs proactively work to address the needs of the PEP, especially women</p>	<p>IR5.1: Disaster contingency systems in place and functioning</p>
<p>IR1.2: Increased household income among PEP in the target communities</p>	<p>IR2.2: Caregivers of children under 2 adopt improved health, hygiene and nutrition behavior and caring practices</p>	<p>IR3.2: Local support systems strengthened to reduce Violence Against Women (VAW)</p>	<p>IR 4.2: PEP access to entitlements and services increased, including safety nets and natural resources</p>	<p>IR5.2: Influence local and national humanitarian assistance initiatives</p>

<sup>73</sup> Source: Caldwell, Ravesloot, and Smith. 2011. "SHOUHARDO II Baseline Study Report."

<sup>74</sup> Targeted number of beneficiaries (Source: SHOUHARDO II Baseline Report).

<sup>75</sup> No. of beneficiaries reached (Source: CARE Office, Bangladesh).

<sup>76</sup> Targeted number of beneficiaries (SHOUHARDO II Baseline Report).

<sup>77</sup> No. reached (Source: CARE Office, Bangladesh).

<sup>78</sup> No. reached (Source: CARE Office, Bangladesh).

<sup>79</sup> Source: CARE Office, Bangladesh.

<sup>80</sup> Source: CARE Office, Bangladesh.

## Annex 5. Selected Findings from Secondary Literature Review and Assessment from Qualitative Evaluation

Findings from Secondary Literature Review	Related findings from Qualitative Evaluation
<b>Nobo Jibon</b>	
1. Inadequate irrigation facilities and seasonal salinity limiting vegetable production	1. Verified
2. Difficulty in linking MCHN services with government facilities	2. Verified
3. Small but effective food for work program	3. Verified
<b>PROSHAR</b>	
1. Working systematically to link producer groups with private sector	1. Verified
2. Significant improvements in WASH facilities and counseling	2. Progress inadequate; efforts initiated only after mid-term evaluation; less progress than other projects in reducing diarrhea.
3. 78% of pregnant women receive at least 2 hours of daytime rest	3. This finding, based only on participant responses, is not supported by qualitative evaluation findings.
<b>SHOUHARDO II</b>	
1. Increased investment of training of key officials to increase likelihood of sustainability of activities	1. Verified
2. Reduction in practice of exclusive breastfeeding	2. Despite participant responses to the contrary, this lit review finding appears accurate, in part the effect of increased employment by women.
3. Participants regularly accessing government health facilities	3. Highly inadequate during project; negligible thereafter.

## Annex 6. Progress Achieved Against Primary Project Targets<sup>81</sup>

### Nobo Jibon

Indicator	Baseline	Endline	Program Target
Average Household Dietary Diversity Score (HDDS) <sup>82</sup>	4.7%	5.7%	5.5%
Average number of Months of Adequate Household Food Provisioning (MAHFP) <sup>83</sup>	9.4	10.4	11
Stunting (children age 6–59 months)	43.6%	35.4%	39.50%
Percent of children under 6 months exclusively breastfed <sup>84</sup>	38.6%	44.9%	65.0%
Percent of children 6–23 months of age who receive a minimally acceptable diet <sup>85</sup>	5.8%	22.5%	25%

### PROSHAR

Indicator	Baseline	Endline	Program Target
Average Household Dietary Diversity Score (HDDS)	6.6%	7.2%	6.9%
Average number of Months of Adequate Household Food Provisioning (MAHFP)	9 months	10.6 months	10.2 months
Stunting (children age 6–59 months)	42.4%	31.9%	34%
Percent of children under 6 months exclusively breastfed	41%	74%	60%
Percent of children 6–23 months of age who receive a minimally acceptable diet	29%	39%	36%

<sup>81</sup> Source: USAID. Quantitative Evaluation Results: Multiyear Assistance Program, Bangladesh. 2015.

<sup>82</sup> Household dietary diversity is defined as the number of unique foods groups, out of 12, consumed by household members in the previous 24 hours. Twelve food groups are included in the measure: cereals, roots and tubers, vegetables, fruits, meat/poultry/offal, eggs, fish and seafood, pulses/legumes/nuts, milk and milk products, oils/fats, sugar/honey, and miscellaneous.

<sup>83</sup> The average number of months in the previous year that the household had adequate food, as reported by the member responsible for preparing food. MAHFP is a measure of a household's ability to manage vulnerability in such a way to ensure that food is available above a minimum level for up to one year.

<sup>84</sup> Children up to 6 months of age who are given nothing but breast milk in the 24 hours preceding the interview.

<sup>85</sup> Children 6–23 months who received solid, semi-solid, or soft foods in addition to breastmilk during the previous day.

**SHOUHARDO II**

<b>Indicator</b>	<b>Baseline</b>	<b>Endline</b>	<b>Program Target</b>
Average Household Dietary Diversity Score (HDDS)	4.8	8.7	6
Months of Adequate Household Food Provisioning (MAHFP)	5.9	11.0	8
Stunting (children age 6–59 months)	61.7%	50.4%	55.1%
Percent of children under 6 months exclusively breastfed <sup>86</sup>	64.1%	62.2%	66.2%
Percent of children 6–23 months of age who receive a minimally acceptable diet	8.7%	47.9%	20%

<sup>86</sup> The sample size used in the analysis for breastfeeding was too small to detect the difference between baseline and target. Furthermore, when the target and the endline values were evaluated for this indicator, it was found that they were not significantly different.

## Annex 7. Primary Findings from the Quantitative Evaluation and Assessment from Qualitative Evaluation

Primary Quantitative Evaluation Findings	Assessment of Findings in Qualitative Evaluation	Explanatory Insights from Qualitative Evaluation
1. Increases in crop production by project beneficiaries: 44%–50%	Appears accurate	Beneficiary interviewees and key informants indicated exceptionally good crop production training in all projects and valuable inputs, including optimal seed varieties for soils and climate.
2. Improvement in dietary diversity	Consistent with findings	The dietary diversity scoring by the qualitative evaluation team indicated surprisingly high dietary diversity scores—in some cases even where overall food security levels were low. Beneficiary interviews suggest that the most significant improvements were in vegetable and fish consumption. Beneficiaries credited the counseling that took place, particularly in courtyard sessions.
3. Per-capita income increased most sharply in PROSHAR, but increased steadily in SHOUHARDO II (from a lower baseline) and in Nobo Jibon	Consistent with findings	The beneficiary interviews elicited highly positive reactions to livelihood interventions and the resulting income improvement. Sharp increases in income among PROSHAR recipients is consistent with enthusiastic responses to the financially incentivized PROSHAR-trained business advisors and master trainers who developed linkages with private sector dealers and traders.
4. SHOUHARDO II decreased stunting prevalence significantly; in the other two projects, stunting reductions were similar to the national average for that time period	Consistent with findings (note, however, the caveat about the statistical methodology mentioned in the text)	SHOUHARDO II’s multisectoral nutrition convergence approach, visible in all its project areas, permitted synergistic effects among nutrition-specific and nutrition-sensitive activities resulting in highly impressive stunting reductions (as had been the case in SHOUHARDO I and in programs in Peru and Brazil).
5. (a) Significant increases in women’s employment, but (b) minimal improvement in women’s empowerment indicators	“b” is inconsistent with qualitative evaluation findings, which revealed significant improvements (see text for possible explanations of disparities)	Analysis of beneficiary interviews suggests that language used in quantitative evaluation may have failed to elicit the significant improvement elicited by the beneficiary interviews.
6. The percentage of households with a disaster preparedness plan increased in all three projects—in SHOUHARDO II and PROSHAR from baselines near zero	Consistent	Key informants indicated that while the projects differed in their effectiveness in strengthening existing government structures, all of the projects were successful in developing and disseminating disaster preparedness plans, which worked well.

Primary Quantitative Evaluation Findings	Assessment of Findings in Qualitative Evaluation	Explanatory Insights from Qualitative Evaluation
7. Community groups mobilized for disaster risk management	Consistent, but, despite significant disaster risk management inputs, the village-level disaster management committees established by Nobo Jibon and PROSHAR were largely ignored by the government system and no longer exist	Participants in KIIs and beneficiary interviews indicate that local volunteers were well trained and effective and that the early warning systems worked reasonably well, except for the phone chain plans.
8. Sustainable linkages established with GOB health services	Inconsistent; post-project few former beneficiaries are able to avail themselves of these services	Post-project KIIs and beneficiary interviews plus record checking at community clinics indicate that these government clinics are usually too distant—meaning that the impressive service delivery through localized services during the projects is not continuing.

## Annex 8. Evaluation Scope of Work

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### 1. BACKGROUND

In Fiscal Year (FY) 2010, USAID's Office of Food for Peace (FFP) awarded funding to three private voluntary organizations (PVOs) to implement five-year Title II development food assistance programs, also known as Multi-Year Assistance Programs (MYAPs), in the most food insecure regions of Bangladesh. FFP issued three awards: one to CARE, the second to Save the Children International (SC), and the third to ACDI/VOCA. The MYAPs use an integrated approach for addressing food insecurity in Bangladesh by developing income generating opportunities; improving agricultural productivity, improving maternal and child health, hygiene and nutrition; improving access to water supply and sanitation; and ensuring disaster preparedness and mitigation against the effect of climate change.

Through this SOW, FFP/Washington and USAID/Bangladesh seek third-party firm to conduct a final performance evaluation to measure the development outcomes of the three MYAPs in Bangladesh.

#### i. Overview of the CARE/SHOUHARDO II program

CARE is implementing the Strengthening Household Abilities for Responding to Development Opportunities II (SHOUHARDO II) program from June 2010 to May 2015. The five-year MYAP builds on the previous SHOUHARDO program, implemented from FY 2004 to 2010, which established an effective, integrated model for reducing child malnutrition while contributing to greater livelihood security and women's empowerment. The total Life of Activity (LoA) funding is approximately US\$ 126 million, provided by FFP, the Government of Bangladesh (GOB), and CARE USA. The program plays an influential role in Bangladesh's poverty alleviation efforts. The program is implemented in four regions of North, North-East, North-West and South-West, reaching 11 districts, 31 Upazilas, 172 Unions, and 1,558 villages.

The overall goal of SHOUHARDO II is to transform the lives of 370,000 Poor and Extreme Poor (PEP) households in 11 of the poorest and most marginalized districts in Bangladesh by reducing their vulnerability to food insecurity. To achieve this goal, CARE-Bangladesh and partner non-governmental organizations (NGOs) established the following Strategic Objectives (SO) and Intermediate Results (IR):

- SO1: Availability of and access to nutritious foods enhanced and protected for 370,000 PEP households.
  - IR1.1: Improved and diversified agriculture systems developed and linked with private and public services.
  - IR1.2: Increased household income among PEP in the target communities.

- SO2: Improved health, hygiene and nutrition status of 281,00087 children under 2 years of age.
  - IR2.1: Access to and utilization of health and nutrition services improved to caregivers of children under 2 years of age.
  - IR2.2: Care givers of children under 2 adopt improved health, hygiene and nutrition behavior and caring practices.
- SO3: PEP women and adolescent girls empowered in their families, communities and Union Parishad.
  - IR3.1: Influence of PEP women and adolescent girls in decision making increased.
  - IR3.2: Local support systems strengthened to reduce Violence Against Women (VAW).
- SO4: Local elected bodies and government service providers responsiveness and accountability to the PEP increased.
  - IR4.1: Nation Building Departments (NBDs) and Union Parishads proactively work to address the needs of the PEP, especially women.
  - IR 4.2: PEP access to entitlements and services increased, including safety nets and natural resources.
- SO5: Targeted community members and government institutions are better prepared for, mitigate, and respond to disasters and adapt to climate change.
  - IR5.1: Disaster contingency systems in place and functioning.
  - IR5.2: Influence local and national humanitarian assistance initiatives.

Partner NGOs are responsible for 90% of the program implementation, while CARE Bangladesh implements the other 10% through direct delivery. While technical and operational capacity varies somewhat among partner NGOs, each benefit from significant administrative and technical support from CARE.

SHOUHARDO II maintains close working relationships with a number of technical partners. These include the International Rice Research Institute's (IRRI) Cereal System Initiative for South Asia (CSISA), Chittagong Veterinary & Animal Science University (CVASU), International Union for Conservation of Nature (IUCN), Fruit Tree Improvement Program (FTIP) and Conservation of Black Bengal Goat (CBBG) Units of Department of Animal Breeding and Genetics Bangladesh Agricultural University Mymensingh, World Fish, and the Regional Integrated Multi-Hazard Early Warning System (RIMES). Each of the partners' primary focus is on SO1, with the exception of RIMES, which supports early warning activities under SO5.

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<sup>87</sup> Revised to 176,706 (Ref. PREP 2102).

## ii. Overview of Save the Children/Nobo Jibon Program

SC is implementing the Nobo Jibon (“New Life”) program from June 2010 to May 2015. The total LoA funding is approximately US\$ 52 million, provided by FFP, the Government of Bangladesh and SC. Nobo Jibon targets the most vulnerable and marginalized households of the cyclone-prone Barisal division of Bangladesh. Malnutrition and food insecurity in Barisal is the highest among all divisions of Bangladesh.

The overall goal of Nobo Jibon is to reduce food insecurity and vulnerability for 191,000 households in the eleven upazilas of Barisal division in southern Bangladesh. To achieve this goal, SC established the following SOs and IRs:

- SO1 (Maternal and child health and nutrition (MCHN): Improved health and nutritional status of targeted households, particularly children less than five years of age
  - IR 1.1: Households and communities practice MCHN and environmental health behaviors promoted by the program
  - IR 1.2: Government, NGO and community based health providers deliver improved integrated health, family planning and nutrition services
  - IR 1.3: Women and children benefit from a transformed social and policy environment
- SO2 (Market-based production and income generation): Poor and extremely poor households have increased production and income to improve to access to food
  - IR 2.1: Targeted households apply improved knowledge and skills for increased production and market sales
  - IR 2.2: Targeted households access quality inputs, capital, and market information
  - IR 2.3: Extremely poor households access land, water bodies, and inputs for sustainable income generation
- SO3 (Disaster risk reduction (DRR) and emergency preparedness): Households in targeted communities protect their lives and assets and quickly resume livelihoods activities following natural disasters
  - IR 3.1: Communities manage functional emergency preparedness and response plans
  - IR 3.2: Communities access appropriate infrastructure for protecting lives and assets in an emergency
  - IR 3.3: SC and MYAP partners respond to emergencies in an effective and coordinated manner
  - IR 3.4: Targeted communities receive and respond to early warning for floods and cyclones

The program works closely with the Ministry of Disaster Management and Relief (MDM&R) and implemented through four national local NGOs. Additionally Helen Keller International, iDE, World Fish, and RIMES work as technical partners for the Nobo Jibon program. Nobo Jibon works with stakeholders through an integrated approach in achieving the objectives and ultimate goal. The program focuses specifically on activities and intended results that are designed around three major SOs to reduce food insecurity.

### iii. Overview of the ACDI VOCA/PROSHAR Program

ACDI/VOCA is implementing the Program for Strengthening Household Access to Resources (PROSHAR) from June 2010 to May 2015. The total LoA funding is approximately US\$ 46 million, provided by FFP, the Government of Bangladesh and ACDI/VOCA. PROSHAR is implemented in partnership with Project Concern International (PCI). PROSHAR targets the most vulnerable, marginalized households of coastal cyclone-prone and food insecure Khulna Division. The program targets three *upazilas* in three districts of Khulna Division.

The overall goal of PROSHAR program is to reduce food insecurity among vulnerable rural populations in the Khulna Division. To achieve this goal, ACDI/VOCA established the following SOs and IRs:

- SO 1: Increase the Incomes of Poor and Ultra-Poor Households
  - IR 1.1 Livelihood groups formed and strengthened
  - IR 1.2 Agricultural productivity increased through improved practices and technologies
  - IR 1.3 Market linkages developed and strengthened
  - IR 1.4 Alternative livelihoods improved
- SO2: Improve the Health and Nutrition of Women and Children
  - IR 2.1 Malnutrition prevented and treated
  - IR 2.2 Access and use of integrated community health services expanded
  - IR 2.3 Improved Household & Community Response to Health and Nutrition Challenges
- SO3: Strengthen the Resiliency to Shocks and their Long Term Impacts
  - IR 3.1 Mechanisms for mitigation and response to shocks strengthened
  - IR 3.2 Broad range of capacities and resources utilized by communities to reduce vulnerability
  - IR 3.3 Capacity of local organizations, government and communities to respond to disasters strengthened

The program works closely with the Local Government Division, Ministry of Food and Disaster Management (MFDM), and several other line Ministries and Directorates through its program steering committees established at the national level.

## 2. EVALUATION RATIONALE

### a) Evaluation purpose

The purpose of the final performance evaluation is to measure the development outcomes of the three MYAPs. This performance evaluation comes towards the end of the Bangladesh MYAPs. The specific final evaluation objectives are to:

- Review, analyze, and evaluate the effectiveness of all three MYAPs in achieving program objectives and contributing to USAID efforts to improve food security of target population in the project area;
- Evaluate major constraints in achieving expected project results;

- Provide specific recommendations and lessons learned on strategies and implementation approach;
- Identify best practices, strengths, weaknesses and constraints to sustaining program achievements and approaches that the FFP and Mission should consider in the design and development of future programs in Bangladesh; and
- If feasible, using the monitoring data collected by the programs, evaluate the theory of change of the three programs.

## **b) Audience and intended uses**

The primary audience of the evaluation report will be USAID (in particular FFP/Washington and USAID/Bangladesh), the three PVOs (CARE, Save the Children and ACDI/VOCA), and their sub-recipients. The Government of Bangladesh (GOB) is also a secondary user of the findings of the evaluation.

Findings from the performance evaluation will be used to draw lessons learned for the selection, design, and implementation of future programs in Bangladesh. USAID will also make extensive use of findings from the evaluation to make different presentations and bulletins as part of wide dissemination of best practices and lessons learned. The evaluation recommendations may be used by FFP to refine proposal guidelines and program policy.

## **c) Evaluation Questions**

The evaluation is expected to provide answers to the following key questions, which are numbered in order of priority:

- I. To what extent were the SHOUHARDO II, Nobo Jibon, and PROSHAR programs effective in achieving specific strategic objectives?<sup>88</sup> Based on the existing knowledge about the pathways for reducing chronic malnutrition and improving food security, what is the likelihood of the three programs achieving their strategic objectives?
- II. What is the effectiveness of the enhanced linkages between targeted communities and government and non-government agriculture extension and health and nutrition services? What are the results (tangible and in-tangible) of these enhanced linkages? How are the quality, frequency, effectiveness, and sustainability of the services perceived by the community? What key lessons learned and best practices related to the programs' strategies in establishing linkages should inform future FFP programming in Bangladesh?
- III. What evidence exists to indicate improved community and institutional preparedness for response to and recovery from disasters? How effectively has the disaster risk reduction approaches in the project strengthened the community and local institutions preparedness against disasters? What can we learn from the planning and implementation of the

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<sup>88</sup> The final evaluation should focus on those strategic objectives and intermediate results that can be measured through qualitative methods.

program strategies designed to minimize disaster risks that can be used in future FFP programming in Bangladesh?

- IV. How did the three MYAPs coordinate and harmonize their activities with other USG, donor or GOB projects to create complementarities and synergies? What key lessons learned and best practices related to coordination and coordination should inform future FFP programming in Bangladesh?
- V. How effective are different approaches used by individual MYAP to address gender issues related to access and control over resources; decision making roles and opportunities; participation in community and social institutions; and freedom of speech and movement ? What has been or could be done to sustain the positive gender related outcomes that are achieved by these programs? What are the lessons learned?
- VI. What are the unintended positive and/or negative consequences of the programs? What lessons can be learned to minimize unintended negative consequences in the design of future programs? How can FFP and its partners design strategies to systematically capture positive consequences?
- VII. What can be learned about the effectiveness and quality of different behavioral change communication and extension strategies, such as leader farmer, positive deviant farmer model, farmer field school, community agriculture volunteers, community health volunteers, care group, early childhood care and development volunteers, used by the three programs that may inform future strategy and program design?

#### **4. EVALUATION METHODOLOGY**

The proposed performance evaluation will apply a primarily qualitative approach, while project monitoring data (depending on the quality) should be used to measure the intermediate outcomes to evaluate the theory of change and programs' performance in achieving beneficiary-level intermediate outcomes. Some quantitative analyses may be used, for example, in the review of MYAPs' performance monitoring data or in the analysis of their efficiency. The evaluation team will design the overall approach and should consider employing a variety of qualitative primary data collection methods, including semi-structured in-depth-interviews, group discussions, key informant interviews, and direct observation.

Following is a list of indicative methods:

- i. Desktop review of relevant documentation, including program proposals, monitoring and evaluation plans, baseline studies, program performance reports, mid-term evaluations, assessments and studies, and other related documents as necessary.
- ii. Field visits to meet with beneficiaries, conduct different survey and data collection, and observe program implementation.
- iii. Semi-structured in-depth interviews; focus group discussions with the programs' direct beneficiaries and non-beneficiaries; and key informant interviews with beneficiaries,

staff from USAID, PVOs, and partner NGO, host Government officials, and other agencies as appropriate.

- iv. Since the evaluation team will not have access to the end-line quantitative data that are representative of the program population and the program implementation areas are relatively large, the team may consider selecting interview sites to understand the differences between major livelihood strategies, agro-ecological zones, and communities' access to resources and services and remoteness.

Key informant interviews: The evaluation team will conduct qualitative, in-depth interviews with key stakeholders and partners. Whenever possible, the evaluation team should conduct face-to-face interviews with informants. When it is not possible to meet with stakeholders in person, telephone interviews can be conducted. The evaluation team will have interviews with the following stakeholders (note that this list is not exhaustive):

- Relevant USAID offices and other USG offices in Bangladesh and USAID/W;
- SHOUHARDO II, Nobo Jibon, and PROSHAR staff at both headquarters and field level;
- Other donors providing funds to the programs;
- USAID partners who have collaboration with the programs, e.g. World Fish;
- Beneficiaries, community members etc.;
- Key Government of Bangladesh representatives at both national and local levels;
- Donors and staff from relevant implementing organizations; and
- Other key stakeholders, e.g. professional associations and universities.

Site visits: Evaluation team members, as appropriate, will visit selected project sites of each of the programs. The evaluation team in collaboration with USAID will choose a strategy to select sites. The team is expected to review all available field-level quantitative and qualitative data. The team will determine the effectiveness of the programs from existing documents and interviews. Data must be disaggregated by sex, age, geographical region, education level, etc.

The evaluation team will use a variety of methods for collecting information. These methods, to the maximum extent possible, will ensure that if a different, well-qualified evaluator were to undertake the same evaluation, he or she would arrive at the same or similar findings and conclusions. The evaluation team should decide on specific methodologies before traveling to Bangladesh and finalize the methodology during the first evaluation team meetings in-country. The evaluation team should also meet with FFP staff in Washington, D.C., before coming to Bangladesh.

Limitations of methodology: The evaluation team will not have the opportunity to review end-line quantitative data or FY 2014 annual survey data to triangulate qualitative data.

The methodology narrative should discuss the merits and limitations of the final evaluation methodology. The evaluation team will design appropriate tools for collecting data from various units of analysis. The tools will be shared with USAID during the evaluation and included in the evaluation report.

## **EXISTING SOURCES OF INFORMATION:**

Document Review: The evaluation team should consult a broad range of background documents in addition to program documents provided by USAID/Bangladesh and FFP/Washington. USAID and the PVOs will provide the evaluation team with a package of briefing materials, including:

- 1) Program Description for all three MYAPs
- 2) M&E plans
- 3) Project quarterly and annual reports
- 4) Baseline and mid-term review reports
- 5) Indicators Performance Tracking Tables and Performance Indicators Reference Sheets
- 6) Mid-Term Review Recommendations Strategy document
- 7) Project Intervention Documents and Process documents
- 8) Project training materials and guidelines
- 9) USAID/Bangladesh Country Development Cooperation Strategy 2011–16
- 10) Programs’ proposals, cooperative agreements, and host country agreements
- 11) Pipeline Estimates Resource Proposals

## **6. DELIVERABLES**

The evaluation team shall propose dates to deliver the following deliverables in accordance with their technical approach and specific evaluation design. All deliverables must be approved by FFP/Washington and USAID/Bangladesh prior to implementation.

**Team Planning Meeting(s):** Essential in organizing the team’s efforts. During the meeting (s), the Team should review and discuss the SOW in its entirety, clarify team members’ role and responsibilities, agree on a work plan, develop data collection methods, review and clarify any logistical and administrative procedures for the assignment and instruments and to prepare for in-brief with FFP/Washington and USAID/Bangladesh.

**Work Plan:** During the Team planning meeting, the team will prepare a detailed work plan which will include the methodologies to be used in the evaluation. The work plan will be submitted to FFP/Washington and USAID/Bangladesh for review and approval within one week.

**Methodology Plan:** A written methodology plan (evaluation design/operational work plan) including qualitative instrument and tools need to be prepared and submitted to USAID for approval prior to implementation.

**Data Collection Instruments:** The evaluation team will design and submit data collection instruments to FFP/Washington and USAID/Bangladesh prior to the commencement of fieldwork.

**USAID Briefings:** The evaluation team will provide separate entrance briefings to FFP/Washington and USAID/Bangladesh prior to the start of the evaluation to present the team's understanding of the objectives of the evaluation and for the team to provide details about the methodology. A brief mid-term status meeting is required. The evaluation team will also provide an exit briefing on its findings and recommendations to USAID/Bangladesh and FFP/Washington at the conclusion of the evaluation. The team will present the major findings of the evaluation to USAID through a PowerPoint presentation.

**Regular Updates:** The evaluation team leader (or his/her delegate) will provide regular updates on progress with the evaluation to the Agreement Officer's Representative (AOR) of the Bangladesh MYAPs and the Technical Team Leader or M&E Advisor in FFP/Washington. The updates should be on at least a weekly basis, in person or by electronic communication. Any delays or complications must be quickly communicated to the USAID/Bangladesh and FFP/Washington as early as possible to allow for quick resolution and to minimize any disruptions to the evaluation. Emerging opportunities for the evaluation should also be discussed with USAID/Bangladesh.

**Debriefing with USAID/Bangladesh, FFP/Washington, and Partners:** The team will present the major findings of the evaluation to USAID, the MYAP partners, donors, and Government of Bangladesh (as appropriate and defined by USAID/Bangladesh) through a PowerPoint presentation prior to the team's departure from Bangladesh. The team will also debrief FFP/W upon return to the United States. The debriefings will include a discussion of evaluation findings with possible recommendations. The team will consider USAID comments and revise the draft report accordingly, as appropriate and without compromising the validity or independence of the evaluation.

**Draft Evaluation Report:** The evaluation team will analyze all data collected during the evaluation to prepare a draft performance evaluation report and submit the report within 10 working days after the departure of expat team members from Bangladesh. The evaluation team should substantiate all findings and recommendations through citations of information sources. The evaluation team will submit an electronic Microsoft Word version of the draft written report of findings and recommendations to the AOR in USAID/Bangladesh and the Technical Team Leader in FFP/Washington within 30 business days from the last day of the debrief meeting at the Mission. USAID/Bangladesh and FFP/Washington and MYAP partners will provide comments on the draft performance evaluation report within 10 working days. The evaluation team will in turn revise the draft report incorporating USAID's comments and suggestions within 10 working days of receipt of the written comments. The evaluation team will also incorporate comments and suggestions from the MYAP partners. The written report should clearly describe findings, conclusions, and recommendations. In addition to a combined evaluation report, the team will disaggregate findings separately for each MYAP and other disaggregation required according to USAID evaluation policy.

**Final Report:** The evaluation team will submit a final report that incorporates USAID and PVO comments and suggestions 10 working days after receiving comments from USAID on the draft final evaluation report (see above). The team will follow the format given in the reporting requirement section (see below). The evaluation team will edit and format the final report as appropriate to ensure a high-quality deliverable.

The final report should meet the following criteria to ensure a high-quality deliverable:

- Represent a thoughtful, well-researched and well-organized effort to objectively evaluate what worked in the project, what did not and why;
- Address all evaluation questions included in the scope of work;
- Include the scope of work as an annex. All modifications to the scope of work, whether in technical requirements, evaluation questions, evaluation team composition, methodology or timeline need to be agreed upon in writing by the technical officer;
- Explain the evaluation methodology in detail. All tools used in conducting the evaluation, such as questionnaires, checklists, and discussion guides will be included in an Annex in the final report;
- Include evaluation findings that assess outcomes and impact on males and females;
- Disclose limitations to the evaluation, with particular attention to the limitations associated with the evaluation methodology, e.g. selection bias, recall bias, unobservable differences between comparator groups, etc.;
- Present evaluation findings as analyzed facts, evidence, and data, and not based on anecdotes, hearsay or compilation of people’s opinions. Findings should be specific, concise, and supported by strong quantitative or qualitative evidence;
- Properly identify and list all sources of information in an annex;
- Include recommendations that are supported by a specific set of findings; and
- Include recommendations that are action-oriented, practical, and specific, with defined responsibility for the action.

The format of the final evaluation report should strike a balance between depth and length. The report should include a table of contents, table of figures (as appropriate), acronyms, executive summary, introduction, purpose of the evaluation, research design and methodology, findings, conclusions, lessons learned, and recommendations. The report should include, in the annex, any substantially dissenting views by any Team member, USAID or the PVOs on any of the findings or recommendations, a copy of this Scope of Work, a list of persons and organizations contacted, and any other attachments deemed significant. The report should not exceed 30 pages, excluding annexes, and should be submitted electronically in English. The report will be disseminated within and outside USAID as appropriate. A second version of this report excluding any potentially procurement-sensitive information will be submitted electronically by the evaluation team to USAID’s Development Experience Clearinghouse (DEC).

All quantitative data, if gathered, should be (1) provided in an electronic file in easily readable format; (2) organized and fully documented for use by those not fully familiar with the program or the evaluation; (3) owned by USAID and made available to the public barring rare exceptions.

## 7. EVALUATION TEAM COMPOSITION AND QUALIFICATIONS

### Team Composition, Skills, and Level of Effort (LOE)

The composition and number of team members has deliberately not been exactly defined, leaving it to discretion of the evaluation team and third-party firm. The team will include and balance several types of knowledge and experience related to program evaluation. Individual team members should have the technical qualifications as described below. USAID will approve proposed candidates for each position based on the strength of the candidate(s).

The specialists must all have significant developing country program experience. The evaluation team should include at least one evaluation specialist with experience conducting evaluations of this nature. The evaluation team composition should enable the team to have a good local understanding, familiarity with FFP programming, gender mix, together with specialists who are experienced in the different technical sectors in which the MYAPs are engaged. Specifically, the team is expected to consist of experts in food security, health and nutrition, agriculture/income generation, health and hygiene, women empowerment, community mobilization and behavior change communication, institutional development, and disaster management. USAID staff may participate as appropriate in the evaluation team.

**Evaluation Team Leader:** The team leader should have 15 years' experience in international development and proven experience in carrying out donor-funded project and program evaluations. The team leader will be responsible for coordinating all evaluation activities, supervising the team, meeting all specified objectives, evaluating and monitoring systems, collaborating with each partner, presenting the evaluation results, and submitting drafts and final reports according to the defined timeline. In addition to evaluation expertise, the team leader should also provide sectoral expertise in at least one of the sectoral components promoted under the MYAPs. The evaluation team leader will take specific responsibility for assessing and analyzing the project's progress towards quantitative targets if possible, performance, and benefits/impact of the strategies. The evaluation team leader will be responsible for overall management of the evaluation, including coordinating and packaging the deliverables in consultation with the other members of the team. S/he will provide leadership for the team, finalize the evaluation design, coordinate activities, arrange meetings, consolidate individual input from team members, and coordinate the process of assembling the final findings and recommendations. S/he will also lead the preparation and presentation of the key evaluation findings and recommendations to FFP/W and USAID/Bangladesh and key partners. The evaluation team leader will submit the draft report, present the report, and, after incorporating USAID staff comments, submit the final draft report to FFP/W and USAID/Bangladesh within the prescribed timeline.

**Sector Specialists:** The team members should have ten years' experience in international development and proven experience in carrying out donor-funded project and program evaluations. The evaluation team should include additional sector specialists to address the remaining sectoral components not covered by the team leader. Among these sector experts two should have international expertise. The other sector specialists may be either from Bangladesh or from the international market.

**Community Mobilization and Behavior Change Communication (BCC) Specialist:** This specialist should have wide experience in implementation of behavior change communication and community mobilization programs in the areas of and maternal health, neonatal health, and family planning. S/he should have a postgraduate degree in health promotion sciences or a related field with a minimum of 10 years' experience working with USAID-supported behavior change and community mobilization programs in developing countries.

S/he will analyze MYAP's behavior change and communication interventions and assess the effectiveness and appropriateness of the approaches adopted by each program to improve knowledge, health-seeking behavior and health outcomes. S/he will also assess the technical focus of BCC and Community group activities and whether they are the appropriate mix and topics for intervention communities. The BCC specialist will participate in evaluation tea meeting, key informant interviews, group meetings, site visit, and draft the sections of the report relevant to his/her expertise and role in the team. S/he will also participate in presenting the report to USAID or other stakeholders and be responsible for addressing pertinent comments by USAID or other stakeholders. S/he will submit his/her contributions to the evaluation team leader within the prescribed timeline.

## **8. Conflict of Interest**

All evaluation team members will provide a signed statement attesting to a lack of conflict of interest, or describing an existing conflict of interest relative to the project being evaluated. USAID/Bangladesh will provide the conflict of interest forms.

## **9. Scheduling and Logistics**

Work for the final evaluation is to be carried out over a period beginning in May 2014, with a final evaluation report due o/a December 2014.

In consultation with USAID, the evaluation team should develop a schedule showing timeline and dates for each stage of the evaluation.

### Funding and Logistical Support

The proposed evaluation will be implemented through the Food Assistance and Nutrition Technical Assistance III (FANTA) Project with funding from FFP/Washington. FANTA will be responsible for all off-shore and in-country administrative and logistical support, including identification and fielding appropriate consultants. FANTA will include arrange and schedule field visits, meetings, translation services, international and local travel, hotel bookings, working/office spaces, computers, printing, and photocopying.

The evaluation team should make all logistic arrangements, including vehicle arrangements for travel within and outside Dhaka, Bangladesh, and should not expect any logistic support from USAID/Bangladesh. The team should also make its own arrangement on space for team meetings and equipment support for producing the report.

## 10. REPORTING REQUIREMENTS

The total pages of the final report, excluding references and annexes, should not be more than 30 pages. There should be separate sections for each of three MYAP. The following outline and suggested length should be used in the report:

1. **Cover page, Table of Contents, and List of Acronyms**
2. **Executive Summary** should be a clear and concise stand-alone document that states the most salient findings, conclusions, and recommendations of the final evaluation and gives readers the essential contents of the baseline report in three to five pages. The Executive Summary helps readers to build a mental framework for organizing and understanding the detailed information within the report concisely state the project purpose and background, key evaluation questions, methods, most salient findings and recommendations (3-5 pp.);
3. **Introduction** should provide a brief country context, including a summary of any relevant history, demography, socio-economic status etc. (1-2 pp.);
4. **Development Problem and USAID's Response** should present a brief overview of the development problem and USAID's strategic response, including design and implementation of the programs (1-2 pp.);
5. **Purpose of the Evaluation** should include purpose, audience, and synopsis of task (1-2 pp.);
6. **Evaluation Methodology** should describe evaluation methods, including strengths, constraints and gaps (1-2 pp.);
7. **Findings/Conclusions** should describe and analyze findings for each objective area using graphs, figures and tables, as applicable, and also include data quality and reporting system that should present verification of spot checks, issues, and outcomes (12-15 pp.);
8. **Lessons Learned** should provide a brief of key technical and/or administrative lessons on what has worked, not worked, and why for future project or relevant program designs (3-4 pp.);
9. **Recommendations** should be prioritized for each key question, separate from conclusions, and supported by clearly defined set of findings and conclusions. Include recommendations for future project implementation or relevant program designs and synergies with other USAID programs and other donor interventions as appropriate (3-4 pp.);
10. **Annexes** should include the scope of work, documents reviewed, bibliographical documentation, evaluation methodology, data generated from the evaluation, quantitative and qualitative instruments and tools used, interview tools and lists, data analysis plan, meetings, focus group discussions, surveys, and tables. Annexes should be succinct, pertinent and readable. Annexes should also include if necessary, a statement of significant unresolved difference of opinion by funders, implementers, or members of the evaluation team on any of the findings or recommendations.

The report format should be restricted to Microsoft products and 12-point type font should be used throughout the body of the report, with one-inch page margins at top/bottom and left/right.