



# **Pilot Study Report on Outcome Harvesting and Most Significant Change of Local Service Providers**

**November 2022**

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## Acronyms List

BHA	Bureau for Humanitarian Assistance
CG	Community Group
FGD	Focus Group Discussion
GMP	Growth Monitoring Promotion
H&FW	Health and Family Welfare
IDEAL	Implementer-Led Design, Evidence, Analysis and Learning
IDI	In-Depth Interview
IP	Implementing Partner
LSP	Local Service Provider
M&E	Monitoring and Evaluation
MSC	Most Significant Change
OH	Outcome Harvesting
OM	Outcome Mapping
PCSBA	Private Community Skilled Birth Attendants
PEP	Poor and Extreme Poor
QMII	Qualitative Monitoring Improvement Initiative
SHOUHARDO	Strengthening Household Ability to Respond to Development Opportunities
USAID	United States Agency for International Development
VDC	Village Development Committee
VEF	Village Entrepreneur Forum
VSLA	Village Savings and Loan Association
WASH	Water, Sanitation, and Hygiene

## 1 Introduction

The United States Government, through the United States Agency for International Development (USAID)/Bureau of Humanitarian Assistance, is sponsoring the third iteration of the Strengthening Household Ability to Respond to Development Opportunities (SHOUHARDO) Program, with additional funds provided by the Government of Bangladesh. To improve the lives of 725,611 people from 170,298 households, SHOUHARDO III operates in 947 communities of 115 unions from 23 Upazilas in eight districts in the Deep Haor and Remote Char region of northern Bangladesh. The program aims to improve the resilience of the rural poor while increasing their access to both public and private services. Initially implemented from 2016 to 2020, SHOUHARDO III was extended by USAID for an additional two years, from October 2020 through September 2022, to capitalize on and strengthen local leadership and resources and maintain the interventions in place since 2016.

In 2022, CARE was awarded the Qualitative Monitoring Improvement Initiative (QMII) under USAID's Implementer-Led Design, Evidence, Analysis and Learning (IDEAL) small grants program, which aims to identify and address knowledge and capacity gaps in food and nutrition security programming. In line with the QMII initiatives, Monitoring and Evaluation (M&E) staff received remote training from an IDEAL consultant. The training's objectives were to develop, test, validate, and integrate a qualitative monitoring approach incorporating the Most Significant Change (MSC), Outcome Mapping (OM), and Outcome Harvesting (OH) approaches into the routine monitoring processes of SHOUHARDO III, along with Hamzari, a USAID-funded program implemented by CARE in Niger. Following the qualitative monitoring improvement training, the SHOUHARDO team designed a pilot study to acquire practical knowledge on the monitoring approaches. Following the pilot, the program will adopt qualitative monitoring, including OM, OH, and MSC, parallel to its regular quantitative monitoring, for improved insights on program outcomes and learning.

## 2 Purpose of the Study

The qualitative outcome monitoring was designed to strengthen program learning, adaptation, and reporting by assessing changes and outcomes in systems supporting and providing critical services in hard-to-reach areas. The pilot focused on whether and how progress was achieved during the program's extension phase in improving access to and quality of on-farm, off-farm, health and nutrition, and water, sanitation, and hygiene (WASH) services delivered by the [nine types of Local Service Providers \(LSPs\)](#)<sup>1</sup> promoted by SHOUHARDO III, who ensure quality, accessible, and affordable services at the community level. The exercise also evaluated the sustainability of improvements and the challenges and opportunities for further improvements to services.

## 3 Key Monitoring Questions

Monitoring questions were identified through several discussions with the outcome sources, including the project management team, project technical team, M&E team, project cross-cutting team, and implementing partners (IPs). The following seven questions were agreed upon for this activity:

1. What changes have LSPs experienced regarding whether and how they are providing services, including improved accessibility, prices, and quality of services provided by LSPs?
2. What is the significance of those changes to LSPs and the community?
3. How has the project contributed to those changes?
4. Whether, how, and to what extent have other actors contributed to the changes?
5. Whether and to what extent are the changes sustainable?

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<sup>1</sup> The nine LSP types are: (1) community-based livestock and poultry Vaccinators (Vaccinators), (2) micro-seed retailers and dealers, (3) fish fry hawkers, (4) produce collectors, (5) Sanchay Sathi (savings group village agents), (6) private community skilled birth attendants, (7) Blue Star Providers (health promoters), (8) water quality testers, and (9) latrine producers.

6. What are the main challenges and opportunities for LSPs to continue or further develop and sustain services? What kind of support, capacity, or resources will they need from SHOUHARDO III and other stakeholders for improved quality and sustainability?
7. To what negative or unexpected changes has the project contributed?

## 4 Methodology

The pilot monitoring activity blended OH and MSC methods to assess the changes LSPs experienced and to which changes the program contributed. The SHOUHARDO team conducted in-depth interviews (IDIs) with four types of LSPs (private community skilled birth attendants [PCSBAs], Sanchay Sathi, Seed Agents, and Vaccinators) to formulate outcome statements. The team also conducted eight focus group discussions (FGDs) with community members to inform changes in, or progress towards, improved accessibility, affordability, and quality of critical services provided by LSPs to harvest demand-side outcomes.

### 4.1 Methodology of Outcome Harvesting

The study teams followed five distinct steps for outcome harvesting. The following flowchart displays the steps:

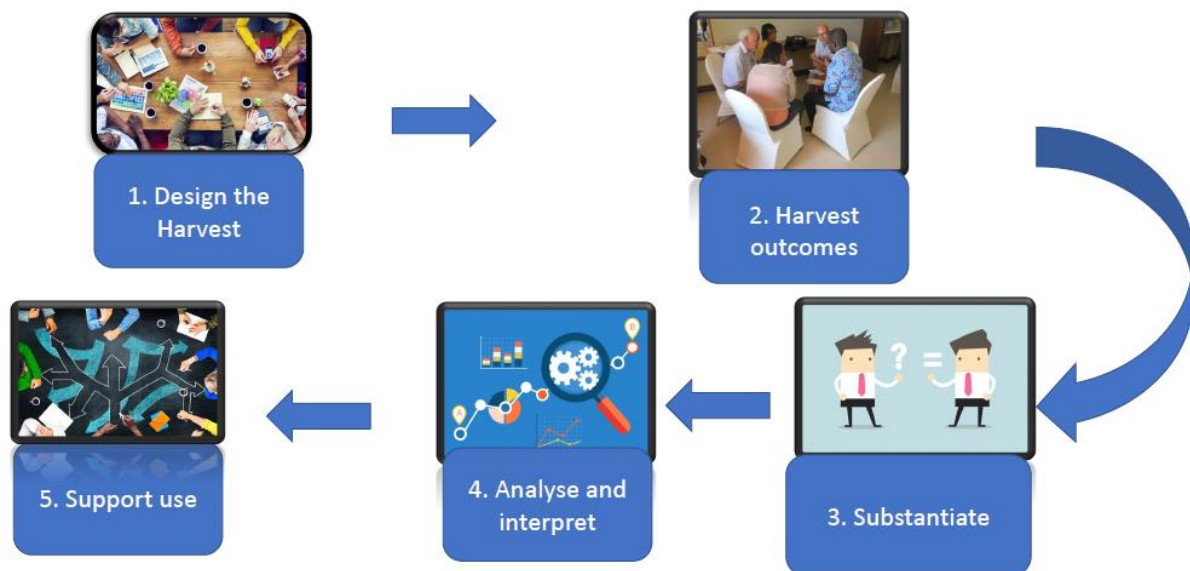


Figure 1. Outcome harvesting steps

#### 4.1.1 Designing the outcome harvest

In designing the harvest, the study team first identified the users and uses of the information.

**Users and Uses of Information:** Harvesters suggested topics for discussion to harvest users, including how the users could use discoveries, based on the evidence-based and actionable answers to the ‘useable’ questions.<sup>2</sup> Considering each primary user, the harvesters (QMII trainees) and the harvest users (SHOUHARDO III technical team members) agreed on the uses and users for the piloting purpose, as outlined in Table 1. The harvest users and harvesters identified monitoring questions to direct the harvest in this first step. Both the user and the harvester agreed on the information to be focused on during data collection and the methods that would be used to answer each monitoring question.

<sup>2</sup> Useable questions are questions that guide the Outcome Harvest because the answers to these questions will be especially useful to the harvest users. See [Wilson-Grau \(2012\)](#).

Table 1: Agreed upon uses and users of information for piloting purposes.

Uses	Primary Users					
	Community	IPs	SHOUHARDO III	CARE Country Office	CARE International	USAID/ Donor
Program learning	X	X	X	X		
Program adaptations		X	X	X		
Learning from outcomes to inform adaptation/ design of the new extension phase			X			
Program reporting			X	X	X	X

The results of this exercise were shared with the community through representatives from Village Development Committees (VDCs). SHOUHARDO arranged meetings with the VDCs at the community level to share the results, specifically about the importance of developing linkages with different actors; challenges identified in getting services from the LSPs and from other market actors and revision to program strategies; how community accelerates the demand and supply mechanisms; and the observed community-level benefits of the services provided by the LSPs. It is crucial for community members to continue to have their needs and voices heard and to participate in the improvements in service delivery so that services available align with their needs.

### Monitoring Questions and Methods of Data Collection:

Table 2: Key monitoring questions by sources of information and data collection methods

	Key Monitoring Questions	Sources of information and Data Collection Methods		
		LSP		Community
		IDI	MSC	FGD
1.	What changes have LSPs experienced regarding whether and how they are providing services, including improved accessibility, prices, and quality of services?	X	X	
2.	What is the significance of those changes to LSPs and the community?	X	X	
3.	How has the project contributed to those changes?	X	X	
4.	Whether, how, and to what extent have other actors contributed to the changes?	X	X	
5.	Whether and to what extent are the changes sustainable?	X	X	
6.	To what negative or unexpected changes has the project contributed?	X	X	
7.	What are the main challenges and opportunities for LSPs to continue or further develop and sustain services? What kind of support, capacity, or resources they will need from SHOUHARDO III and other stakeholders for improved quality and sustainability?			X

The harvesters identified and developed border-level questions/topical outlines in the tools in line with the monitoring questions for this piloting purpose (see Annex 2). As part of the OH, questions

were structured to identify who changed and what, when, and where the change occurred. They also identified how the change agent contributed to the changes in outcome. A short description of the activities and outputs of the program that plausibly contributed to the change in the LSPs as well as community was also harvested. The contribution could be partial, indirect, and even unintentional. From the collected data, the harvester then developed outcome statements, including the significance of changes and the program contribution.

When selecting the sources and techniques for gathering data, the harvesters took great care to assure the validity of the results. The authenticity of the outcome descriptions depended on sources of data that were real, trustworthy, and believable. The most knowledgeable sources were those who had the most in-depth understanding of what changed and how it changed. For this monitoring purpose, the study team engaged with the sources from the supply side (LSPs) and demand side (community members) for relevant services. The study team used the community as sources of outcomes (the changes taken place for introducing the service provisioning model by SHOUHARDO III) as well as for substantiating the outcomes of LSPs since they were direct beneficiaries of the LSPs' services.

Credibility depends on how much the primary intended users believe the data, the method used to generate data, and the data harvester. How specific the description of each outcome must be – that is, how concrete, tangible, and verifiable these descriptions must be – is determined by the intended applications of the monitoring findings. Therefore, it was crucial to come to an early agreement on the information and sources that would provide the conclusions enough credibility for the main intended users and their uses.

In the piloting phase, the study team intended to use the MSC approach partially with the OH approach. More information on the methodology of MSC can be found in Section 4.2.

The study team selected the sources and methods applied in the piloting phase and administered the survey in four SHOUHARDO III working Upazilas (two from each region). The survey scope was adjusted depending on the availability of SHOUHARDO III program staff, which was impacted by the upcoming closeout and project restructuring. Among the planned sample of 28 IDIs, eight FDGs, and eight MSC interviews, the study team was unable to conduct one IDI, one MSC interview, and one FGD.

Table 3: Sources, methods, and planned sample of the survey.

Sources	Methods and Survey (Executed)			Planned Sample
	IDI	FGD	MSC	
LSP on-farm (Vaccinator)	7		4	IDIs from each type of LSP covering four Upazilas in two regions (Char and Haor). MSC stories from Vaccinators and four from PCSBAs, covering four Upazilas. The MSC participants were distinct from the IDI participants.
LSP off-farm (Sanchay Sathi)	6			
LSP on-farm (Seed Agent)	7			
LSP H&N (PCSBA)	7		3	
Community members		7		FGD for substantiating the results/outcomes of each type of LSP, covering four Upazilas. The harvesters also harvested outcomes from the community through the FGDs after completing the substantiation process.
<b>TOTAL</b>	<b>27</b>	<b>7</b>	<b>7</b>	

Before conducting main data collection activities, the team first did a field test to test the survey tools in a “real world” environment. The field test supported the team in gathering valuable information that helped to improve survey instruments. Adjustments resulting from the initial field test were integrated prior to starting the final data collection for the pilot.

#### 4.1.2 Harvest outcomes

Harvesters gleaned information about the changes in LSPs' life and community level and how the change agent (SHOUHARDO III staff and partners) contributed to these changes. Information about outcomes was collected through interviews, surveys, and other sources. For this activity, harvesters were the technical, thematic, and QMII-trained program staff. The QMII-trained staff subsequently trained staff who had not participated in the QMII training on the process of OH. Four teams of two harvesters conducted the data collection.

As detailed above, harvesters conducted IDIs with LSPs to document any changes LSPs had experienced (e.g., in behavior, relationships, actions, policies, or practices); the role the change agent played in bringing such changes (contribution); and the significance of each change. Harvesters audio-recorded the IDIs with LSPs after obtaining informed consent. This was done to avoid the risk of missing pertinent context and to save time during interviews and discussion groups. Additionally, harvesters took notes during the interviews.

Based on the content of the recordings and notes—which contained information about outcomes or changes, who changed, when it occurred, the significance of each change, and the contributor—harvesters drafted outcome statements. Specifically, one harvester listened to the recording immediately after the discussion session or interview to take detailed notes, and then using those notes, the harvesters generated outcome statements. The outcome statements were then discussed among the group of harvesters and reviewed against the SMART indicators, below, and further refined. The developed outcome descriptions were concise but thorough enough for anyone who is unfamiliar with the context to understand the change, its significance, and the contribution of the change agent. When needed, the harvesters went back to participants (via phone or in-person) as needed to further clarify the outcomes.

<b>Specific:</b> A primary intended user who lacks specialized topic or contextual expertise will be able to comprehend and appreciate who changed what, when and where it changed, and how the change agent contributed. The outcome will be formulated in sufficient detail to allow for this.
<b>Measurable:</b> Regardless of who is gathering the data, the description of the outcome includes objective and verifiable quantitative and qualitative information.
<b>Achieved:</b> The description creates a believable linkage and logical connection between the outcome and the actions taken by the change agent to impact it. In other words, how did the change agent affect the result – totally or partially, directly or indirectly, willfully or unintentionally?
<b>Relevant:</b> The result represents a significant advancement in the direction of the desired impact for the change agent. The people who define the outcome and the contribution must be qualified to evaluate both.
<b>Timely:</b> The change agent's contribution may have taken place months or even years earlier, even though the consequence happened during the time period being watched or evaluated.

After harvesting outcomes from LSPs, the study team conducted FGDs with community members to identify the changes in the community in terms of access, availability, quality, and impact of services on community members' lives (demand-side changes). During the FGDs, the harvesters also substantiated the outcomes harvested with LSPs. Harvesters recorded the FGDs in audio format to accompany the notes, after receiving consent from participants. Using the audio and notes, the harvesters drafted the outcomes. They also collated the substantiation results under each of the outcomes of LSPs.

An excel datasheet was used to collate the outcome statements and the substantiation results with the community. After drafting the outcomes, the harvesters categorized all outcomes for substantiation.



### 4.1.3 Substantiate

The harvesters solicited testimony and comments from impartial substantiators to support the outcome descriptions. These testimonies were crucial for providing a richer understanding of the outcome and the role of the change agent. Outside of the change agent organization, independent substantiators were knowledgeable about the outcome, the change agent's role in it, and other aspects of the outcome description.

Change agents suggested community members as substantiators who were knowledgeable about the results as well as the contribution of the change agent. The substantiation process was conducted after drafting the outcomes of the LSPs. The harvester used a questionnaire to substantiate the results/outcomes, illustrated below. The questionnaire included a comments section, which was useful when a substantiator disagreed or was in partial agreement with the outcome description because it enabled the harvester to decide whether to substantiate or revise the outcome.

<p><b>Outcome description:</b></p> <p>1. To what extent do you agree with the outcome description?</p> <ul style="list-style-type: none"><li><input type="radio"/> Fully agree</li><li><input type="radio"/> Partially agree</li><li><input type="radio"/> Disagree</li></ul> <p>Comments, if you like:</p> <p><b>Program contribution to the outcome:</b></p> <p>2. How much do you agree with the influence/contribution of the program?</p> <ul style="list-style-type: none"><li><input type="radio"/> Fully agree</li><li><input type="radio"/> Partially agree</li><li><input type="radio"/> Disagree</li></ul> <p>Comments, if you like:</p> <p>3. To what extent do you agree with the outcome description?</p> <ul style="list-style-type: none"><li><input type="radio"/> Fully agree</li><li><input type="radio"/> Partially agree</li><li><input type="radio"/> Disagree</li></ul> <p>Comments, if you like:</p> <p><b>Project/ program contribution to the outcome:</b></p> <p>4. How much do you agree with the influence/contribution of the program?</p> <ul style="list-style-type: none"><li><input type="radio"/> Fully agree</li><li><input type="radio"/> Partially agree</li><li><input type="radio"/> Disagree</li></ul> <p>Comments, if you like:</p>
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### 4.1.4 Analyze and interpret

After the outcome descriptions were finalized and substantiated, the harvester organized the outcomes so they could answer the key monitoring questions. The harvesters collated outcome descriptions into an excel dataset to facilitate data analysis and interpretation. The program M&E and technical units, who were involved in the harvesting process in its entirety, led the analysis. The program's technical and knowledge management teams assisted the harvesters in interpreting the results.

The harvester classified the outcomes according to the strategic objectives of the monitoring process. Users and harvesters agreed on how to categorize the data for analysis and interpretation through a workshop. Typically, the classifications came from practical monitoring or evaluation questions.

Classifications connected to the purposes and strategies of the change agent or other stakeholders, including donors.

Analysis involved the identification of patterns and processes among clusters of outcomes, and often focused on corresponding theories of change. Analyzing outcomes enabled a harvester to give evidence of achievements. The monitoring exercises and analysis of outcomes satisfied the users' needs.

"Making sense" of outcomes tied directly to how the findings would be used, which affected how the harvester answered monitoring questions. The interpretive lens focused exclusively on the harvest user's vision and mission, institutional goals, theory of change, or strategic or annual plans. In this respect, harvesters applied their theoretical knowledge or professional judgement and expertise to make sense of the outcomes.

#### **4.1.5 Support use of findings**

After the analysis and interpretation, the harvesters suggested topics for discussion to harvest users, including how the users could use discoveries per the evidence-based, actionable answers to the key monitoring questions. The harvesters shared the preliminary results and determined how the results applied, including refining the implications of the findings and the recommendations to the primary users of the results through a workshop. The harvesters concluded their contribution by accompanying or facilitating the discussion amongst harvest users. SHOUHARDO III then used the results as program learning and adaptation to design the new extension phase, as well as with program reporting to CARE International and the donor. The implementing partners used the learning and adaptation strategies in implementing activities in the community, the members of which ultimately benefitted from the services.

## **4.2 MSC Methodology**

### **4.2.1 Step 1: Participants selection**

SHOUHARDO III conducted the MSC process with two types of LSPs supported by SHOUHARDO III, Vaccinators and PCSBAs.

### **4.2.2 Step 2: Domain of changes**

The MSC focused on assessing changes in sustainability parameters achieved by the project. The following domain of changes were used to describe the changes experienced by LSPs:

- Changes in resources
- Changes in motivation
- Changes in capacity
- Changes in interpersonal relationship/linkage
- Any other significant changes

The study team provided the parameters on which occurrences would be reported in the case of the first four domain of changes, while the fifth was intentionally left undefined so that field-level employees could determine what was important and report accordingly.

### **4.2.3 Step 3: Develop action plan**

The MSC process was conducted at the same time as the main data collection for the OH from LSPs. There was no overlap among the participants of OH and MSC. The team planned to conduct four MSC stories from Vaccinators and four from PCSBAs, covering four Upazilas from two regions, Char and Haor. Two people (trained from the QMII session) collected each story, one facilitated the session,

and one took notes. The whole session was recorded to supplement detailed notes. Each session took one to two hours to capture a detailed story from the storytellers that considered the sustainability parameters (resources, motivation, capacity, and linkage).

#### 4.2.4 Step 4: Collect significant change stories

This study employed purposive sampling rather than random sampling. The team agreed to conduct the MSC study on LSPs who demonstrated the greatest likelihood of sustaining the service delivery supported by SHOUHARDO III. The team also conducted MSC with community members who received support from the LSPs. The study team first collected a short list of LSPs living in the study area from implementing partners, and to whom any of the first four domain of changes pertained. The team arranged a brief discussion with the participants (online or mobile) about the changes that took place in their life, after which they identified the final participants in accordance with the domain of changes. The finalists were visited in person to capture the MSC stories.

During the visits, the study team provided an introduction of the study to the participant, obtained their consent, and asked a simple question: *“In your opinion, what do you think of as the most significant change that took place in your lives or those you provide services to or work with after being involved with the SHOUHARDO III program?”*

The first section of the MSC was descriptive. The study team asked respondents to describe what change happened, who was involved in the change, where the change happened, and when the change happened. The intention was that there should be enough information written down so that an independent person could visit the area, find the people involved, and verify that the event took place as described.

The second section was intended to be explanatory. Respondents were asked questions so that they could explain why they thought the change was the most significant of all the changes that were documented. In particular, what difference did it make to their lives today and in the future?

The study team did not anticipate absolute significance; rather, significance was apparent when contrasting the numerous changes that were noted to have occurred over the same reporting period. The explanation of significance is not supposed to be impartial. Instead, it would be a subjective reflection of the ideas and issues respondents raised. The explanation’s goal was to elevate these ideas to become more widely known so that they can be evaluated, contrasted, and chosen.

The study team used the following form structure to capture significant stories:

<b>Story Title:</b>	
Domain of change:	<ul style="list-style-type: none"> <li>• Changes in resources</li> <li>• Changes in motivation</li> <li>• Changes in capacity</li> <li>• Changes in interpersonal relationship/linkage</li> <li>• Any other significant change (specify).....</li> </ul>
Story recorder:	
Region:	<ul style="list-style-type: none"> <li>• Char</li> <li>• Haor</li> </ul>
District:	
Upazila:	
LSP type:	
Date of narration:	

Looking back over the last year, what do you think was the most significant change in your life (in terms of resource/mobilization/motivation/capacity/linkage)?	
Where did the change happen?	
When did it happen?	____/____/____ Date
Interpret – how did it happen? What was the role of SHOUHARDO III?	
Why do you think this is a significant change?	
What difference has it made already/will make in the future?	
Recommend – What can program do to support this type of change moving forward?	

After collecting the participants' stories, the study team transcribed the eight stories. If any missing information was discovered while transcribing, the study team contacted participants either in person or over the phone to collect necessary information to fill any gaps.

#### 4.2.5 Step 5: Select the most significant change story

The study team circulated the eight stories to the program's senior management, technical, and knowledge management teams, which yielded useful discussions about which results were most valuable. Out of the eight stories, one was selected as the MSC story by scoring each story according to the degree of demonstrable evidence against the following criteria:

- Demonstrates the changes in resources.
- Demonstrates the motivation to continue activities.
- Demonstrates the capacity to run the activities.
- Demonstrates interpersonal relationship and linkage.
- Demonstrates sustainability.

#### 4.2.6 Step 6: Analysis and report-writing

In this pilot study, the study team used MSC as a partial approach to OH. The study team used the findings from the MSC to triangulate the OH report.

## 5 Ethical Guidelines

Ethical guidelines dictate that data collection and use processes and activities must protect the privacy and confidentiality of participants and protect them from potential harm. The following precautions were taken to ensure ethical guidelines were observed:

**Consent:** Participants provided verbal, voluntary, and informed consent. The study team told the participants why they were participating; why CARE was conducting the exercise; how the data would be used; and how the participants would be involved. Participants were provided with an opportunity to ask questions and were reminded that there would be no adverse consequences for opting out of participation.

**Participant name registry:** Names were recorded when necessary (after obtaining consent to do so) in case follow-up was needed.

**Recording:** Participants provided consent for recording information in audio format.

**Data security:** Data was stored using a secure system. Researchers had exclusive access to the information/data. The team ensured participants were aware of the data security safeguards and received participants' consent regarding the security of their information before recording any data.

**Study benefits:** Participants were informed about how they would benefit from the monitoring exercise and that they would not receive any monetary compensation in return for participating.

## 6 Study Limitations

Due to time constraints, SHOUHARDO III did not design OM for this pilot study. Additionally, due to other priorities like annual reporting, some QMII trainees were unable to reserve sufficient time to visit one the sampled districts in the second phase of data collection. As a result, the study team adjusted the study sample size

## 7 Outcomes of LSPs

The study team interviewed a total of 27 LSPs (seven PCSBAs, six Sanchay Sathis, seven Seed Agents, and seven Vaccinators) to observe changes in behavior, relationships, actions, policies, or practices under the OH approach. The harvesters observed six broad-level changes among the 27 LSPs (Figure 2). Those changes were further disaggregated by LSP type (Figure 3).

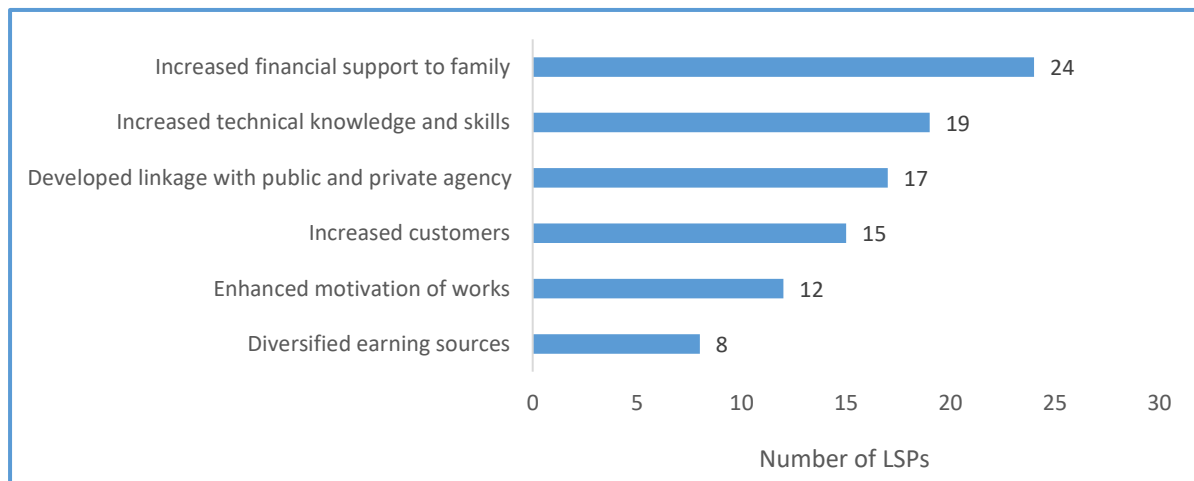


Figure 2: Changes observed by interviewed LSPs.

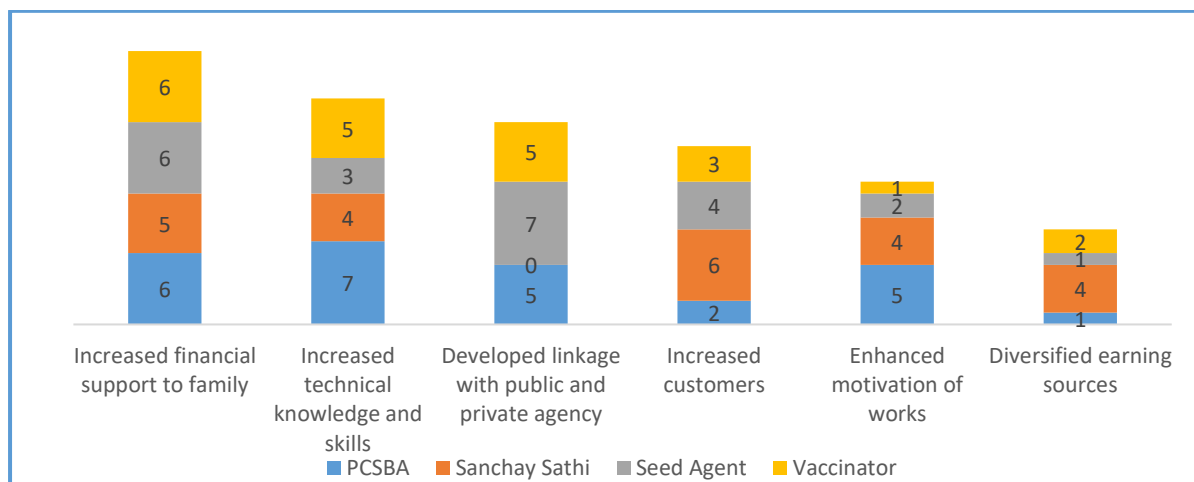


Figure 3: Changes reported by LSPs interviewed, disaggregated by type of LSP.

## **7.1 Outcome 1: LSPs' Increased Income Stimulated Their Financial Contribution to Family**

After engaging with the SHOUHARDO III program, the LSPs had earning opportunities from the specific services they provided in their communities. The communities in which the LSPs work are in remote areas where public and private services related to agriculture, livestock, health and nutrition, and financial services are scarce. The LSPs were given the responsibility of making these services available in their remote communities. Among the 27 interviewed LSPs, the harvesters found 24 who were able to increase their earnings by engaging in such activities, which allowed them to contribute to their families financially. Almost all the LSPs reported that they could change their earnings by providing these services.

## **7.2 Outcome 2: Enhanced Technical Knowledge and Skills Geared LSPs to Provide Their Services Effectively in the Communities**

The program created opportunities for the LSPs to gather technical knowledge and skills to run their specific activities effectively in their communities. Nineteen LSPs reported that their technical knowledge and skills increased with program assistance.

The PCSBAs underwent six months of basic training from February 2021 to August 2022, four days of growth monitoring promotion (GMP) training, and three days of training in social business entrepreneurship and life skills. Additionally, for their ongoing capacity building, the program set up bi-monthly skill lab meetings to discuss performance and share learnings at the Upazila Health Complex. Along with the initiative, Upazila Health and Family Welfare (H&FW) officials and clinical personnel informed communities about the many services they offer. As a result of their positive relationships with representatives from the Upazila government's H&FW department, several PCSBAs also had the chance to work in union-level government health facilities, providing safe delivery and maternal health services. The harvesters also observed that high-performing PCSBAs were able to work directly with union-level government health facilities.

All of Sanchay Sathis were members of a Village Savings and Loan Association (VSLA) group before being chosen as Sanchay Sathis. The program chose these individuals to provide technical skills to construct and run VSLAs successfully based on their strong performance in managing their groups, along with their capacity to learn quickly. Further, program staff gave them on-the-job training to start and lead new VSLA groups. Since there were a few instances of embezzlement, some of the Sanchay Sathis initially had difficulty obtaining confidence in handling financial services. By setting up meetings with local authorities, local Upazila members and the SHOUHARDO team were together able to eventually allay concerns. The harvesters observed the changes in technical knowledge and skill among four out of the six total Sanchay Sathis participating.

The harvesters observed how three out of seven Seed Agents' knowledge and abilities changed over time. Such changes were either entirely or partially due to their interaction with the program. Through the Village Entrepreneur Forum (VEF), they received mixed training from the SHOUHARDO III program, including acquiring information on identifying high-quality seeds and effective germination, as well as on the after-sale services typically offered using applications like Fosoli, Krishoker Janala, and Livestock Diary. The harvesters also noted that four out of seven Seed Agents had prior experience with seeds. However, because they were unfamiliar with the local areas, they were unable to build up a sizable consumer base. In community group (CG) meetings, SHOUHARDO III field staff gave Seed Agents an introduction and inspired them to sell improved vegetable seeds in response to community demand. The program raised community members' understanding of homestead gardening via courtyard sessions and Farmer Field Business School training, as well as the benefits of using improved seeds. In the end, this approach helped the Seed Agents grow their clientele.

Out of the seven Vaccinators, five observed major changes in their knowledge and skills with the assistance of SHOUHARDO III, through which they received formal training on vaccination.

Concurrently, the program worked with the community and motivated them to rear livestock for their livelihoods. Additionally, the Vaccinators were engaged in different meetings and committees that also increased access to the SHOUHARDO III communities. The remaining two Vaccinators were experienced with vaccination activities prior to engaging with the program, although they acknowledged the program's contribution in increasing their customer base by introducing them to different networks in the community.

### **7.3 Outcome 3: Enhanced Linkage with Public and Private Agencies Created Opportunities to Work Collaboratively in the Communities**

The harvesters documented changes in 17 LSPs' improved linkages with public and commercial organizations. With the help of the program, all Seed Agents interviewed were able to establish or strengthen such links, while five PCSBAs and five Vaccinators also reported enhanced linkages. The study indicated that none of the six Sanchay Sathis interviewed created links with public or private organizations.

The program helped PCSBAs connect with the community clinic and the local government's health department. Three of the seven PCSBAs worked at a community clinic where they offered customers antenatal and post-natal care and counseling services. The initiative enabled the civil surgeon to issue a document authorizing them to give services in the community and ensured their placement in the community clinic, which gave them legitimacy and a legal basis for their service delivery. The Upazila Health Complex's bi-monthly skill lab meetings for their ongoing capacity building served to strengthen ties with public and private officials. The program promoted the PCSBAs in VDC meetings, CG meetings, and other platforms when relevant. One of the interviewed PCSBAs remained close to her fellow PCSBAs so they could support one another. The training offered by SHOUHARDO III also assisted PCSBAs in establishing connections with Ministry of H&FW representatives, promoting information exchange and mutual technical support.

The harvesters discovered that all the interviewed seed agents maintained a strong connection to both public and private organizations. The program's personnel connected Seed Agents with local government agencies, subdistrict-level seed dealers, and the Department of Agriculture Extension's Sub-Assistant Agriculture Office, enabling them to collect seeds as needed and acquire technical expertise. Additionally, the program introduced them to the community through a variety of gatherings, such as CG group meetings and VDC meetings, so that program participants could benefit from their support.

To foster relationships with Upazila livestock officials, the Department of Livestock Services, and private firm workers, SHOUHARDO III conducted vaccination training at the Upazila level, where officials transferred technical support and guidance. Along with the training, SHOUHARDO III planned a vaccination campaign in the neighborhood to introduce vaccines to the community. The program also introduced Vaccinators through VDC and CG meetings to ensure community members were aware of their services. The Vaccinators also met Upazila livestock officials during their VEF training, which further contributed to establishing and strengthening linkages.

### **7.4 Outcome 4: Increased Customers Created Opportunities to Earn More or Diversify Earning Sources**

The harvesters observed that the LSPs were able to increase their customer base with the assistance of SHOUHARDO III, along with their service quality. The program's initiative of introducing LSPs to the community helped them to boost their services to a larger group of potential clients. Moreover, the program worked in the community to create service demand by raising awareness about the opportunities for and benefits of LSP services. Fifteen LSPs indicated that their customer base increased while providing services to the communities. Additionally, eight LSPs were able to diversify their earning sources due to an increased customer base or by utilizing specific skills and capacities gained through providing their services in the communities. The sources of earning diversification

were found to be higher among the Sanchay Sathis, as they created new groups and introduced new services among the group members.

### 7.5 Outcome 5: Increased Popularity and Social Status Accelerated LSPs' Motivation to Work

Twelve LSPs reported earning popularity and a higher social status during their service, which served as further motivation for them. Five of seven PCSBAs and four of six Sanchay Sathi were found to have greater levels of motivation, which developed while offering their services with the support of SHOUHARDO III. As many of the Seed agents and Vaccinators were providing services prior to SHOUHARDO III, the program did not significantly impact their motivation. Only two Seed Agents and one Vaccinator claimed that the program contributed to their motivation, stating instead that the program contributed more to an increase in their customer base. The major factors in their increased motivation were their popularity and social status within the communities. Their positive changes in service quality, availability, and accessibility created this increased social value.

### 7.6 Outcome 6: Diversified Earning Sources for Sustained Livelihoods

The harvesters observed a total of eight LSPs who diversified their earnings sources. The rate was highest among the Sanchay Sathis, who could offer other services through the VSLA groups. Only one PSCBA, one Seed Agent, and two Vaccinators reported diversifying their earnings.

## 8 Changes Observed in Program's Sustainability Parameters

SHOUHARDO III's approach to sustainability and long-term impact is predicated on sustained resources, capacity, motivation, and linkages. The MSC was designed to document changes in and to these sustainability parameters. Table 4 shows the changes observed in line with the domain of changes for the interviewed PCSBAs and Vaccinators.

Table 4: Issues observed in MSC under the sustainable parameters.

LSP Type	Domain of change	Observed Issues in MSC Under the Domain of Change
PCSBA	Changes in capacity	<ul style="list-style-type: none"> <li>Extended service to other communities</li> <li>Successful delivery</li> <li>Technical support from community clinic</li> <li>Training skill</li> </ul>
	Changes in interpersonal relationship/linkage	<ul style="list-style-type: none"> <li>Community, pregnant and lactating mothers</li> <li>Local government</li> <li>Community clinic</li> <li>Upazila health service providers</li> </ul>
	Changes in motivation	<ul style="list-style-type: none"> <li>Legal certification from respected authority</li> <li>Social recognition and popularity</li> </ul>
	Changes in resources	<ul style="list-style-type: none"> <li>Increased income</li> <li>Having necessary equipment</li> </ul>
Vaccinator	Changes in capacity	<ul style="list-style-type: none"> <li>Extend services to large communities through camps</li> <li>Increased number of customers</li> <li>Marketing strategy</li> <li>Technical skill on vaccine preservation system</li> <li>Training skill</li> </ul>
	Changes in interpersonal	<ul style="list-style-type: none"> <li>Agriculture extension and livestock department officials</li> <li>Communities</li> <li>Private company representatives</li> </ul>



LSP Type	Domain of change	Observed Issues in MSC Under the Domain of Change
	relationship/ linkage	<ul style="list-style-type: none"> <li>Other LSPs-seed agents, vaccinators</li> </ul>
	Changes in motivation	<ul style="list-style-type: none"> <li>Increased customer base</li> <li>Other LSPs promoted services</li> <li>Social recognition and popularity</li> <li>SHOUHARDO III's ways of motivation and awareness development within community</li> </ul>
	Changes in resources	<ul style="list-style-type: none"> <li>Increased income</li> </ul>

The study team critically analyzed the issues observed under each domain of change in the LSPs' MSC stories. The issues observed in LSPs' MSC stories were categorized into three levels of change - High, Medium, and Low. If the study team observed three or more issues (on average) under each domain of change, it was categorized as a 'High' level change. If there were more than one but less than three issues, it was categorized it a 'Medium' level of change. If the study team found an average of zero to one issue, it was considered a 'Low' level change. Table 5 summarizes the average level of changes observed from October 2021 to September 2022 (FY22) in each LSP domain of change after engaging with SHOUHARDO III.

Table 5: Change status in the sustainability parameters.

LSP Type	Domain of Change	Change Status
PCSBA	Changes in capacity	High
	Changes in interpersonal relationship/ linkage	High
	Changes in motivation	High
	Changes in resources	Medium
Vaccinator	Changes in capacity	Medium
	Changes in interpersonal relationship/linkage	High
	Changes in motivation	Medium
	Changes in resources	Medium

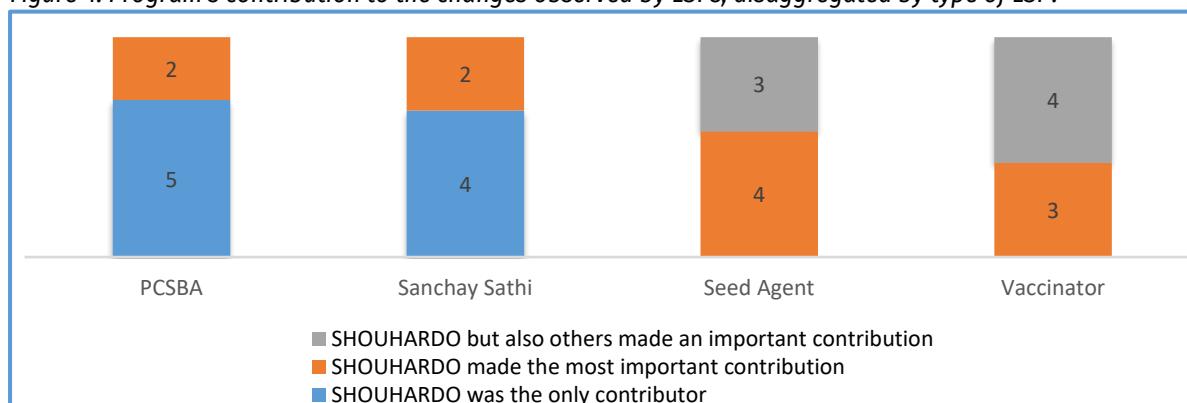
## 9 Program's Contribution

The harvesters recorded the changes described by LSPs throughout FY22, along with the actors and/or program attributed to leading the changes. The harvesters organized the program or other actors' contribution into three categories:

- The program was the only contributor.
- The program made the most important contribution.
- The program, but also others, made an important contribution.

The harvesters observed that SHOUHARDO III's contribution impacted PCSBAs and Sanchay Sathis more than Seed Agents and Vaccinators. Conversely, Seed Agents and Vaccinators indicated that there were other contributors impacting their changes in practice, policies, and actions more than SHOUHARDO III.

Figure 4: Program's contribution to the changes observed by LSPs, disaggregated by type of LSP.



## 10 LSPs' Service Quality

While analyzing the OH statements, the study team categorized the LSPs' services into accessibility, affordability, and quality. This study considered all direct and implied expressions, such as LSPs' service demand, expanding services to non-SHOUHARDO III villages, and services that were previously scarcely available in the communities. All LSPs interviewed made their critical services available in the communities in which services were previously scarce (Figure 5).

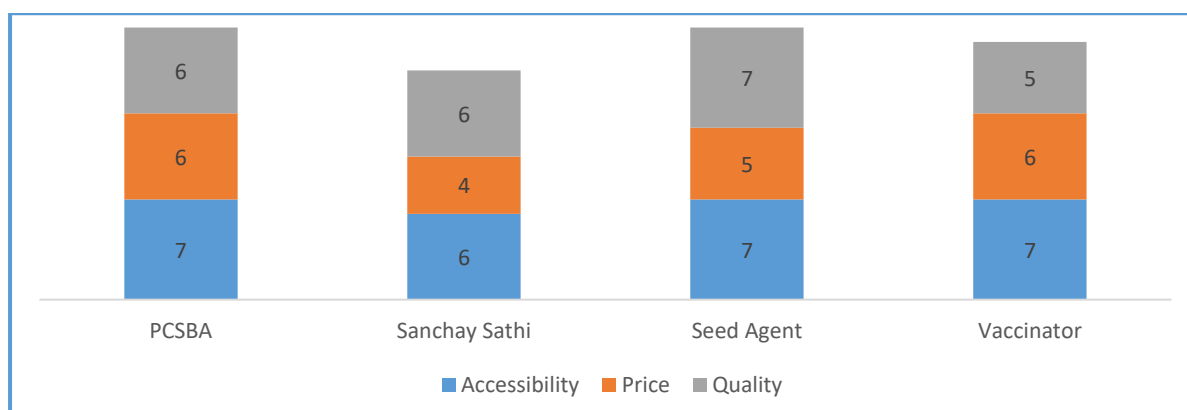


Figure 5: Implied LSP service quality, disaggregated by type of LSP.

New customer creation, LSPs' popularity, and willingness to pay for services were metrics used to measure the affordability of LSP services. Among the seven interviewed PCSBAs, six responded that their service fees were affordable, measured indirectly through their customer flow and popularity in the community. The same result was found for the Vaccinators. In contrast, five out of seven Seed Agents and four out of six Sanchay Sathis indirectly reported their service fees were affordable. A majority of the interviewed LSPs across all LSP types maintained their services were of high quality, as implied by their popularity in their communities.

Table 6: LSPs' service quality measured by implied impression embedded in OH statements.

Criteria	PCSBA (7 total)	Sanchay Sathi (6 total)	Seed Agent (7 total)	Vaccinator (7 total)
Accessibility (implied): demand	3	5	3	6
Accessibility: non-SHOUHARDO	5	0	7	3
Accessibility: previously scarce	4	4	1	4
<b>Accessibility</b>	<b>7</b>	<b>6</b>	<b>7</b>	<b>7</b>
Price (implied): new customers	0	0	1	0

Criteria	PCSBA (7 total)	Sanchay Sathi (6 total)	Seed Agent (7 total)	Vaccinator (7 total)
Price (implied): popularity	2	0	0	1
Price (implied): willingness to pay	4	4	4	5
<b>Pricing</b>	<b>6</b>	<b>4</b>	<b>5</b>	<b>6</b>
quality (implied): popularity	5	4	0	3
quality: improved service	1	0	7	1
quality: women friendly service	0	2	0	0
<b>Quality</b>	<b>6</b>	<b>6</b>	<b>7</b>	<b>4</b>

The study team also conducted FGDs with community members to better understand the changes in the LSPs' service provisioning and the changes they experienced in their livelihoods as a result of LSP services. The following provides a synopsis of feedback received during the FGDs:

**PCSBA:** Community members usually want maternal and child health, antenatal care, postpartum care, essential newborn care, GMP, counselling for pregnant and lactating mothers, and safe birth delivery services available to their community. The FGD participants acknowledged that they could receive these services at home as a result of the PCSBAs. Additionally, PCSBAs provided iron and folic acid supplements to adolescents in the community. Before PCSBA services were established, community members sought maternal and childcare from government or private health service providers at the Upazila level. Community members expressed a preference to receive these services from PCSBAs, as they are available within their community, allowing for prompt health services and contributing to reduced maternal and child health complications. Moreover, FGD participants indicated that the PCSBA services were affordable and of high quality.

**Sanchay Sathis:** FGD participants said the Sanchay Sathis advised the community members on their savings and provided instruction on how to receive loans from VSLAs. Participants preferred Sanchay Sathis' assistance, as they believed the financial and group management skills offered were better than those of other group members. They noted that Sanchay Sathis constantly engaged VSLA group members, significantly contributing to increased savings, which could be used during emergencies.

**Seed Agents:** Community members noted they often require technical guidance on seeds, fertilizer, pesticides, and irrigation for cultivation, which was now available through Seeds Agents introduced to the community by SHOUHARDO III. When compared to other available services, participants noted that Seed Agents' service, price, and input quality was favorable. Previously, seeds were exclusively available at Upazila-level markets. After the introduction of the Seed Agents, seeds were more readily available in the community. The increased accessibility of quality seeds contributed to increased agricultural production as well as increased earnings. To earn additional income, a majority of Seed Agents provided services for fertilizer and pesticides in addition to their seed business.

**Vaccinators:** FGD participants stated their interest in and need for livestock rearing services, including feed, livestock medicine, vaccine, and technical suggestions. While the community received almost all these services from Vaccinators, there were limited opportunities for livestock feed. Prior to the LSPs' intervention, community members received livestock rearing suggestions and treatment from the Upazila medicine seller. Participants acknowledged that vaccinators provided accessible and affordable services, attributed to vaccinators being located within the community. Ease of access to vaccinator services contributed to reduced livestock disease and subsequently reduced livestock mortality.

Based on discussions, participants were pleased with the services provided by LSPs, especially the PCSBAs, and did not have difficulty accessing the LSPs' services. However, participants suggested additional training should be provided for vaccinators and seed agents to strengthen their technical skills.

## 11 Challenges and Opportunities

Based on the results and evidence generated by the monitoring activity, the SHOUHARDO III team identified the following challenges and opportunities for the program moving forward.

**PCSBAs:** By providing services for mothers and children in the community, PCSBAs were able to gain respect and social acceptance. This social capital served as their motivation to continue serving the community. Additionally, the financial compensation earned from providing services led to their financial independence and enabled them to help with household expenses. When a situation called for immediate attention, they directed patients to Upazila and district hospitals. Some patients found it challenging to get to the hospital on time due to inadequate transportation options available to them in their rural communities. To mitigate these challenges, a few PCSBAs felt that receiving paramedic training would be useful in order to provide treatment to patients in emergency situations. The PCSBAs who collaborated with the government in a community clinic performed better, as they had more opportunities to market themselves through this platform, leading to a higher regard for their services.

**Sanchay Sathis:** SHOUHARDO III observed increased VSLA membership in the community as a result of VSLA activities, as well as increased popularity, respect, and mobility for Sanchay Sathis. Along with receiving compensation for administering groups, the Sanchay Sathis also had opportunities to launch new businesses with group members. Some Sanchay Sathis noted difficulty in recruiting males for VLSA groups, as males reportedly did not have time during the day to sit in for a group meeting. Another challenge described relating to the sustainability of VSLA groups was household migration. Additionally, some group members felt their VSLAs could run independently and no longer required a Sanchay Sathi to manage the group. Therefore, to sustain their livelihoods, Sanchay Sathis may need to seek out additional opportunities or open new businesses with existing group members. The group arrangements may be impacted by workload during pick season. In these circumstances, group members should be consulted to determine a convenient time to meet and develop a plan accordingly.

**Seed Agents:** Seed Agents were motivated to continue their work based on the social capital and financial return they received by providing better services to their community. Because of how cyclical this business is, it did well primarily throughout the growing season. Therefore, Seed Agents may find it challenging to support themselves with just one business throughout the year. The lack of seed during monsoon season was another issue discussed. This was particularly the case for Seed Agents in Haor, as company representatives are often disinterested in visiting this region. A possible solution would be to properly store seeds prior to the monsoon to increase stocks during seed shortages.

**Vaccinators:** The Vaccinators were most motivated by increased popularity, customers, and earnings. Vaccinators feared losing customers once SHOUHARDO III phased out. Arranging a periodic livestock vaccination camp at a fixed location in the community might be the best option to keep services in the community. Even so, there were still members of the community who were unaware of the importance of vaccinating livestock and poultry.

## 12 Conclusion

This pilot study revealed significant improvements among LSPs in terms of income, technical knowledge and skills, linkages with public and private agencies, customer base, popularity and social status, and earnings for sustained livelihoods. It assessed SHOUHARDO III's impact on sustainability parameters, such as resources, capacity, motivation, and linkages. The study found that the program positively influenced LSPs' behavior, relationships, actions, policies, and practices.

Notably, LSPs saw increased income, improved service provision in remote areas, and expressed gratitude for program opportunities. Training enhanced their technical expertise, and collaborations

with public and private agencies improved their service delivery. The study revealed an increase in their customer base, leading to higher earnings and income diversification. The program played a crucial role in introducing LSPs to minimize the service gap in the community, raising awareness, and improving their popularity and social status, all of which motivated them to excel in their work.

In terms of sustainability, the program had a significant impact on capacity, interpersonal relationships/linkages, and motivation for some LSPs, contributing to their sustained engagement and effectiveness. The study concluded that the program is the most important contributor for certain LSPs, while other non-SHOUHARDO actors had a greater influence on other LSP groups. Regarding service quality, LSPs successfully made critical services accessible and affordable, maintaining a high standard of service delivery. The study emphasized the positive impact of SHOUHARDO III on LSPs' income, technical knowledge, linkages, customer base, motivation, and sustainability.

Overall, the pilot study provided valuable insights into the positive changes observed among LSPs in various domains, highlighting the significance of SHOUHARDO III. Additionally, it recognized the importance of service quality in terms of accessibility, affordability, and maintaining standards.

## Annexes

### Annex 1: IDI checklist for LSPs

#### Date of data collection:

#### Introduction and Consent:

My name is \_\_\_\_\_ and I am currently working for/with CARE Bangladesh SHOUHARDO III program.

We are going to conduct a survey with you to know your improvements/success in your life as an LSP. The survey is voluntary and confidential. We will not disclose your information to any other entity not directly related to this program. No compensation, monetary or otherwise, can be offered for your participation as this may be seen as coercing your participation.

If you decide not to participate in this survey, your decision will not affect future relations with the SHOUHARDO III program or its personnel. If you decide not to participate, you are free to withdraw your consent and to discontinue participation at any time.

These questions in total will take approximately one and half hours to complete.

Could you please spare the time for the interview? Yes  No

SL	Questions	Response	Instruction
<b>A</b>	<b>Demographic Information</b>		
1.	District	[List of district]	
2.	Upazila	[List of upazila]	
3.	Union	[List of union]	
4.	Village	[List of village]	
5.	Name of the LSP		
6.	Gender	1. Male 2. Female 3. Transgender	
7.	Age (in year)		
8.	Type of LSP	1. On-farm - Vaccinator 2. Off-farm - Sanchay Sathi 3. LSP WASH 4. LSP H&N- PCSBA	
9.	Service coverage areas [Identify the SHOUHARDO and non-SHOUHARDO areas]	[union(s), village(s)]	
10.	Contact number		
<b>B</b>	<b>Basic Research on Respondent</b>		
1.	What activities does SHOUHARDO III program do in your community?		
2.	How have you been involved with or in contact with the program?		
3.	How long have you been involved with this program as an LSP (in years)?		
4.	Do you know any other LSPs (same type) work in your community?	1. Yes 2. No	

SL	Questions	Response	Instruction
5.	What services are they providing in your community, according to your knowledge?		Ask for each type of LSP that s/he mentioned in B8
<b>C</b>	<b>Harvesting Outcomes</b> [for the period of October 2021 – September 2022]		
1.	In the last year, what changes have you observed in your life after becoming an LSP (behavior, relationships, actions, policies, or practices)?  [Note: The harvesters will identify the outcomes, not outputs, over the discussion period. An output is under the control of the project, but the project influences an outcome. After the <b>first question</b> , you may find that the interviewee shares information or talks about multiple possible outcomes. As you listen, you need to determine which results are clear and which need to be investigated further to see if there are any outcomes. To qualify as outcomes, attitudinal changes such as increases in awareness, knowledge, and commitment or dedication require evidence of associated changes in behavior, relationships, actions, policies, or practices.]		Ask the following questions for each outcome you identified
	<b>[Circle these questions from C2 to C12 for each outcome identified in the above discussion]</b>		
2.	Please mention the outcome (changes in behavior/ relationships/actions/policies/practices) we are now talking about.  [Note: Interviewer records the outcome here]		
3.	As you mentioned that there were changes in your behavior/relationships/actions/policies/practices, would you please tell me when the change(s) took place? [Probe to get a specific month and year if possible]		
4.	How have you benefitted from the change (changes in what you do, who you work with, how you work with others)? [Please probe to make a better relation with changes and benefits. Also try to get the status of the participant before making such changes]		
5.	Who else benefited from your change and how? How many persons (approximately) have benefited from your services within the last year?  [Please probe to get a relation how his/her activities benefited others]		

SL	Questions	Response	Instruction
6.	<p>What are the factors that motivate you to continue your activities?</p> <p>[Please try to get if there have any sustainable catalyst that motivated him/her in continuing the activities]</p>		
7.	<p>Have there been any effects/benefits that the program helped to bring this change? Or how did the program contribute to making this change?</p> <p>[Please probe to learn the type of contribution - indirect or direct, partial or whole, indented or not]</p>		
8.	<p>To what extent did the program contribute to make this change?</p> <p>[Please try to establish a link between the cause and effect. Also record the stories of providing "0" score]</p>	<p>0-----1-----2-----3-----4-----5</p> <p>[Where '0' stands for no contribution and '5' stands for full contribution]</p>	
9.	<p>How is the change significant to you in accordance with your justification?</p>		
10.	<p>Please rate the significance of the change - to what extent do you think this change is significant to you?</p> <p>[Check relevance the response with C9]</p>	<p>0-----1-----2-----3-----4-----5</p> <p>[Where '0' stands for 'No significance' and '5' stands for 'Highly significant']</p>	
11.	<p>Have there been any effects/benefits from others that helped you to bring this change in your behavior, relationships, actions, policies, or practices, even in a small way?</p>		
12.	<p>To what extent did the other actors contribute to make this change?</p> <p>[Check relevance in the response with C11]</p>	<p>0-----1-----2-----3-----4-----5</p> <p>[Where '0' stands for 'No contribution' and '5' stands for 'Full contribution']</p>	
<b>D Challenges and Opportunities</b>			
1.	<p>What are the challenges you are facing to continue or further develop and sustain your services?</p>		
2.	<p>Do you perceive that you will be able to generate sufficient revenue from this activity to provide you with adequate income? How?</p>		
3.	<p>How could you make your services affordable to participants?</p> <p>[Record the potential challenges and overcoming strategies (if any)]</p>		
4.	<p>Would you please like to share any negative effects to you of the program (if any)?</p>		
<b>E Comments and Suggestions</b>			
1.	<p>Would you please like to share any comments or suggestions?</p>		



## Annex 2: Topical outline/ FGD Checklist for Community People

### A. Identification:

Date:	# of participants - Total:	Male:	Female:	Region:
District:	Upazila:	Union:	Village:	

**B. Introduction:** Introduce the study team and the purpose of the monitoring to the participants.

### C. Participants' Profile:

SL	Name	HH Name	Gender (M/F)	Age (in years)	Schooling Year(s)	WBA Category (Poor and Extreme Poor (PEP)/Non-PEP)	Main Occupation	Service recipient of LSP [Yes/ No]
1								
2								
3								
4								
5								
6								
7								
8								

### D. Key Discussion Issues (collect some of the best quotations from the discussion session):

1. Describe the types of services do you usually need related to agriculture/health/WASH/women's empowerment/governance issues. [Specify services by sector]
2. When you need the services you describe above, **who** are the service providers/entity that comes to your mind first? Why? [Categorize responses by service areas]
3. What do you know about LSPs that are working in your community? What type of services are they providing?
4. What types of services did you receive from LSPs in the last year? If received, why from the LSPs? [Categorize the responses by type of LSPs and services]
5. Describe the changes you observed in the services provided by LSPs over the last year.
6. Describe changes you have experienced because of the services provided by LSPs in the last year. (Changes in what you do, who you work with, how you work with others, your income, etc.)
7. To what extent have the LSPs contributed to the changes/outcomes: (a) small (other factors more important); (b) medium (other factors equally important); or (c) large (the LSP's contribution was the most important)? [Capture the LSPs' service quality, availability, and accessibility to the services]
8. How would you think the changes are significant for your livelihoods? [Categorize the response by areas of changes that occurred]
9. In your opinion, what changes (if any) would you recommend that SHOUHARDO III make to the service provisioning model to make it even more effective in the future?

**Annex 3: Scoring template for selecting the MCS stories**

<b>Scoring system</b>								
<b>0 - No Evidence, 1 - Some Evidence, 2 - Strong Evidence, 3 - Very Strong Evidence</b>								
SL	Criteria contain in each story	Score-Story 1	Score-Story 2	Score-Story 3	Score-Story 4	Score-Story 5	Score-Story 6	Score-Story 7
1.	Demonstrates the changes in resources							
2.	Demonstrates the motivation to continue activities							
3.	Demonstrates the capacity to run the activities							
4.	Demonstrates the interpersonal relationship and linkage							
5.	Demonstrates the sustainability							
<b>Total Score</b>								

## Annex 4: Top MSC story for PCSBA

### ***Building trust helped Rehana become a successful birth attendant.***

Mosammat Rehana Begum, 32, has been serving her village, Saghata, and three other villages, namely Gobindi, Bashata and Uttar Sathalia, in the Saghata sub-district of Gaibanda as a PCSBA since September 2021. Prior to this role, she received a six-month training from BRAC, an international development organization in Bangladesh, in 2015 and subsequently began working as a birth attendant. Unfortunately, following this training, Rehana was not tasked with any attending to births, as she lacked formal recognition from the government. She started selling a few medicines, from which she did not earn enough to make a living.

In August 2021, she received another training from the SHOHARDO III program. She was very motivated after completing this six-month training, as she received her a certificate to work legally as a birth attendant upon completion. However, the additional training and certification were just the beginning for Rehana. She needed to access the community to promote herself as a PCSBA. SHOUHARDO III distributed materials that were required for normal delivery and introduced Rehana to the community, local government, and community clinics.

Soon, she started receiving calls from pregnant women in her community. She maintained a strong relationship with all pregnant women by providing them with important information about nutrition while pregnant. She now receives three to four delivery cases each month and completes them skillfully. She earns 6,000 to 8,000 BDT (about USD \$54 to \$72) per month. Every so often, depending on her caseload, she can earn up to 12,000 BDT (~USD \$108) in a month. Understanding her limitations, she also knows to refer pregnant women to the hospital for complicated issues that may necessitate delivery by C-section.

Rehana received praise and recognition from her community after she successfully delivered a baby in a roadside house while en route to the hospital with her patient. On the way to the hospital, Rehana concluded that they would not make it on time, and she decided to pull over and deliver the baby in a nearby house, whose owners were kind enough to lend Rehana their space for the delivery. After the successful birth of a healthy baby, the mother and newborn were sent to the hospital, where the doctor found everyone to be in good health.

Rehana's story quickly went viral throughout the village, along with other villages in the Saghata sub-district, and she quickly gained popularity among mothers. But Rehana remains strict about home delivery and has created and maintained a good rapport with area hospitals. As such, whenever she has an urgent case that requires a hospital visit, the hospital authority, trusting her instinct, takes the matter seriously and arranges necessary precautions for the patient. The unavailability of skilled birth attendants was a major problem for people living in this remote part of the country. There were instances of maternal and child deaths in Saghata village. Thankfully, the situation has since changed, as attendants such as Rehana are now providing their vital services.

## Annex 5: Top MSC story for Vaccinator

### ***Livestock vaccination service available for poor households***

Md. Akber Alli Nazim, from Mazer Hati village (Haor area), serves as a vaccinator in Austagram Sadar Union under the Austagram Upazila of Kishoreganj District. When Nazim was a child, he participated in duck farming with his father. In 2012, he received para-vet training from the Department of Youth Development of Bangladesh in Kishoreganj District. Following this training, he began treating livestock. He also started a duck vaccination firm and gradually started administering vaccinations for farm-based ducks. He now has a pharmacy in Mazer Hati village, where he earns 25,000 to 30,000 BDT (about USD \$225 to \$270) per month from the business and veterinary services.

In November 2020, SHOUHARDO III enlisted Nazim as a vaccinator for his social welfare activities. He attended SHOUHARDO III's vaccination training in March 2021, where he had the opportunity to meet the Upazila Livestock Officer, who attended the training as a resource person. This forum helped him collect livestock vaccines from government sources at a reasonable price. Additionally, Nazim gained insight into SHOUHARDO III's activities in his area, which grew his interest in the program.

During livestock treatment, Nazim closely observed SHOUHARDO III activities in his village and other nearby villages, which motivated him to provide livestock vaccination services to under-privileged members of the communities. (Prior to this, he was only providing his services to farm holders.) Now he provides service to all members of the community, especially PEP households. Moreover, the program staff invited him to CG meetings for him to raise awareness on the importance of livestock vaccination. With the help of program staff, he organized livestock vaccination campaigns in six communities, providing more than 500 households with hen, duck, goat, and cow vaccinations at affordable prices. Nazim provides regular vaccination services to the community, earning an additional 1,500 to 2,000 BDT (about USD \$14 to \$18) per month. While the additional income is welcome, it was not Nazim's sole motivation for extending his livestock vaccination services. He serves the community because of his strong sense of social responsibility. He said, "I earn a lot from my business, farm, and para-vet service, but I am happy for serving the poor people." He is proud to serve the community and be a positive force in social development.