



# CARE Bangladesh

## SHOUHARDO Program: Mid-Term Review (MTR)



Final Main Report  
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**Human Development Research Centre**

## Table of Contents

List of Figures .....	iii
List of Tables .....	iii
Acronyms .....	iv
Executive Summary .....	vii
1.0 Introduction.....	1
2.0 Methodology of the Review.....	2
3.0 The SHOUHARDO Program .....	3
3.1 Program Goal .....	3
3.2 The Institutional Collectivization of Poor People’s Rights .....	4
3.3 The Targeting of the Poorest Households.....	4
3.4 SHOUHARDO Partnerships.....	4
4.0 Program Effectiveness .....	6
4.1 Program Progress: Evaluation of the Intervention Sets .....	9
4.2 SO1 Intervention Set.....	9
4.3 SO2 Intervention Set.....	21
4.4 SO3 Intervention Set.....	30
4.5 SO4 Intervention Set.....	35
4.6 Program Progress toward Goals and Achievement Projections until 2009 .....	47
5.0 Program Management .....	56
5.1 Staffing.....	56
5.2 Training.....	62
5.3 Partnerships.....	64
5.4 Monitoring and Evaluation .....	72
5.5 Gender Empowerment and Awareness.....	74
5.6 Collaboration within CARE Bangladesh Units .....	77
6.0 Commodities Management .....	79
7.0 Environmental Compliance .....	81
8.0 Priority Findings and Program Recommendations .....	83
8.1 Core Recommendations .....	85
8.2 Conclusions.....	90
8.3 Final Recommendation .....	91
APPENDIX 1: Analysis of IPPT Targets and Projections for Achievement by 2009 .....	92
APPENDIX 2: Proposed Organizational model and technical expertise .....	105
APPENDIX 3: Persons and Villages consulted.....	106
APPENDIX 4: PNGOs Consulted.....	112

## List of Figures

Figure 1: The SHOUHARDO "Message" .....	7
Figure 2: Projection for Target Achievement in SO 1 .....	53
Figure 3: Projections for Target Achievements in SO 2.....	54
Figure 4: Projections for Achievement of SO 3.....	55
Figure 5: Projections to Achieve Targets in SO 4 .....	55
Figure 6: Distribution of PNGO Staff Including SHOUHARDO .....	67
Figure 7: Distribution of PNGO SHOUHARDO Staff in relation to total staff.....	68
Figure 8: Self assessment of PNGO.....	69

## List of Tables

Table 1: Level of Achievement and Projected Achievability by 2009.....	50
Table 2: Status of target achievement, projection of achievement, and additional time (after 2009) required to achieve targets .....	92

## Acronyms

ADPC	Asian Disaster Preparedness Center
ANC	Ante Natal Care
BBS	Bangladesh Bureau of Statistics
BCC	Behavior Change and Communication
BLAST	Bangladesh Legal Aid and Services Trust
BRDTI	Bangladesh Rural Development Training Institute
CAP	Community Action Plan
CAV	Community Agriculture Volunteer
CBDRM	Community Based Disaster Risk Management
CED	Chronic Energy Deficiency
CEGIS	Center for Environmental and Geographic Information Services
CF	Community Facilitator
CFW	Cash For Work
CHD	Comprehensive Homestead Development
CHV	Community Health Volunteer
CLTS	Community-Led Total Sanitation
CRC	Community Resources Center
DAP	Development Activity Project
DD	Direct Delivery
DH	District Hospital
DPHE	Department of Public Health Engineering
DV	Disaster Volunteer
EBF	Exclusive Breast Feeding
ECCD	Early Child Care for Development
EDU	Economic Development Unit
EKATA	Empowerment, Knowledge and Transformative Action
EMP	Emergency Management Plan
EOC	Emergency Obstetric Care
EPI	Expanded Program of Immunization
EU	Education Unit
EWS	Early Warning System
FANTA	Food and Nutrition Technical Assistance
FDP	Food Distribution Point
FF	Field Facilitator
FFP	Food For Peace
FFW	Food For Work
FP	Family Planning
FWV	Family Welfare Visitor
GMP	Growth Monitoring Promotion
GoB	Government of Bangladesh
HA	Humanitarian Assistance
HDRC	Human Development Research Centre
HH	Household
HHN	Health Hygiene and Nutrition

ICDDR,B	International Centre for Diarrhoeal Disease Research, Bangladesh
IDA	Iron Deficiency Anemia
IDD	Iodine Deficiency Disorder
IDSL	Institutional Development Services Limited
IFSP	Integrated Food Security Program
IGA	Income Generating Activities
IPTT	Indicator Performance Tracking Table
IR	Intermediate Result
IUCN	International Union for the Conservation of Nature and Natural Resources
LCS	Labor Contracting Society
LEB	Locally Elected Bodies
LGD	Local Government Division
LGED	Local Government Engineering Department
LGSP	Local Government Support Program
LOA	Life of Activity
LPS	Local Project Societies
LRSP	Long Range Strategic Plan
MCHN	Maternal and Child Health and Nutrition
MCWC	Maternal and Child Welfare Clinic
MOU	Memorandum of Understanding
MTR	Mid-Term Review
NBD	Nation Building Department
NILG	National Institution of Local Government
NIRAPAD	Network for Information, Response and Preparedness Activities on Disaster
NSDP	NGO Service Delivery Program
OCAT	Organizational Capacity Assessment Tools
OFDA	Office of U.S. Foreign Disaster Assistance
PACC	Program Advisory Coordinating Committee
PDMC	Pourashava Disaster Management Committee
PEP	Poor and Extreme Poor
PERSUAP	Pesticide Evaluation Report and Safer Use Action Plan
PIC	Program Implementation Committee
PKSF	Palli Karmo Sahayak Foundation
PMP	Program Monitoring Plan
PNC	Post Natal Care
PNGO	Partner NGO
PSIEE	Pourashava Specific Initial Environmental Examination
PSO	Program Support Officer
PTA	Parent Teacher Association
REFLECT	Regenerated Freirean Literacy through Empowering Community Techniques
RLP	Rural Livelihoods Programme
RPM	Regional Program Manager
SBA	Skilled Birth Attendant
SDC	Slum Development Committee
SHOUHARDO	Strengthening Household Ability to Respond to Development Opportunities
SIC	Scheme Implementation Committee

SMC	School Management Committee
SO	Strategic Objective
SSC	Scheme Supervision Committee
SVAW	Stop Violence Against Women
TANGO	Technical Assistance to Non-Government Organizations
TBA	Traditional Birth Attendants
TOTS	Training of Trainers
UDM	Urban Disaster Management
UDMC	Union Disaster Management Committees
UHC	Upazila Health Complex
UHFPO	Upazila Health and Family Planning Office
UNO	Upazila Nirbahi Officer
UP	Union Parishad
USAID	United States Agency for International Development
VAD	Vitamin A Deficiency
VDC	Village Development Committee
VGf	Vulnerable Group Feeding
VSIEE	Village Specific Initial Environmental Examination
WHO	World Health Organization

## **Executive Summary**

The SHOUHARDO program is perhaps the largest and most ambitious ongoing development effort in Bangladesh. Given its scope and reach, SHOUHARDO represents a major shift in CARE/Bangladesh program strategy. It has built upon the success of the former Integrated Food Security Project (IFSP) by developing regionally-specific, multi-sector programs tailored to diverse beneficiary populations, and has adopted a rights-based approach to programming.

The purpose of this Midterm Review (MTR) is to assess the progress made in implementing SHOUHARDO activities, as well as their effectiveness in reducing chronic and transitory food insecurity among poor households in Bangladesh. Based on these findings, the MTR offers recommendations for adapting programming strategies in order to meet each of SHOUHARDO's strategic objectives.

This MTR has revealed that SHOUHARDO has been largely successful in its attempt to address fundamental constraints to food security in Bangladesh. It has done so by seeking to create conditions that enable the transformation of traditional power structures which marginalize and exploit the poorest segments of society. The program has also been effective in promoting inclusive and participatory approaches to improving the status of women as well as the transformation of governance at the local level to enable greater access to elected government officials and essential public services.

While SHOUHARDO senior management and implementing partners fully realize that widespread transformative change is not likely to be achieved with the life of the program, they have made significant progress in establishing the institutional mechanisms necessary for enabling positive social change over the longer-term. Program recommendations included in this evaluation are intended to provide guidance for building on the success of previously implemented SHOUHARDO activities.

### ***Methodology of the Review***

The MTR was conducted during the period May 20-June 25. Review activities entailed visits to all four program regions (Chittagong, Kishoreganj, Tangail, and Rangpur) during which MTR team members interviewed senior regional management and program staff, frontline facilitators, partner NGO staff, technical partners, community volunteers, program participants, local government officials and SHOUHARDO coordinating committees. In all, the MTR team visited twenty-two villages and seven slums. The team also met with the USAID Mission Director and FFP staff.

### ***SHOUHARDO Goal and Objectives***

The overall goal of the SHOUHARDO program is “to sustainably reduce chronic and transitory food insecurity” among 400,000 households by September 2009. SHOUHARDO will also address the “underlying causes” of food insecurity in the poorest regions of Bangladesh by explicitly emphasizing the importance of entitlement,



empowerment, and a rights-based focus for all program activities. The Strategic Objectives (SOs) of SHOUHARDO are:

- SO1: Improved availability/economic access to food through strengthening livelihoods, entitlements and enhancing accountability of service providers.
- SO2: Sustainable improvement in the health and nutrition of project participants.
- SO3: Enhanced empowerment of 400,000 women and girls from targeted vulnerable HHs.
- SO4: Targeted communities and institutions are better able to prepare for, mitigate and respond to natural disasters.

### ***SHOUHARDO Program Strategy and Targeting***

Ultimately, SHOUHARDO seeks to create the conditions for a transformation in the traditional power structures that have marginalized and exploited the poorest segments of society. As such, the program has adopted a program strategy aimed at providing effective representation of poor households throughout the country. By supporting the formation of local institutions referred to as Village Development Committees (VDC – rural areas) or Slum Development Committees (SDC – urban areas), SHOUHARDO aims to empower local communities to develop and implement plans for community-driven development.

Targeting of the SHOUHARDO program is based on widely-accepted poverty maps that identify the poorest and most vulnerable regions of the country—the exposed southeast coastal areas (Chittagong), the haor areas of north central Bangladesh (Kishoreganj), the north char areas (Rangpur), and the mid-char areas (Tangail). Within these regions, project staff conducted surveys to determine the poorest districts, upazilas, unions, villages, slums and pourashavas. A well-being analysis used PRA techniques to establish household wealth rankings, and the two bottom categories—the poor and extreme poor (PEP)—were targeted as program participants. As a result of this very systematic process, SHOUHARDO has succeeded in establishing a presence in some of the most difficult and remote regions of the country and has effectively defined a target population that is among the most vulnerable in Bangladesh.

### ***Implementation Progress and Effectiveness***

SHOUHARDO effectively reached full implementation only in 2007, approximately a year and half later than originally intended. Reasons for the delayed start-up include an unanticipated change in senior management and an underestimation of the time required for targeting of the participant population, the selection of PNGOs, and the necessary “orientation” of the participant villages and slums. While the MTR team feels that administrative delays in project implementation were regrettable, the time devoted to early community-level planning processes was justified given the novelty and scope of the SHOUHARDO program.

- **Strategic Objective 1 (SO1)**

SO1 is perhaps the broadest and most far-reaching of SHOUHARDO's strategic objectives in that it is aimed at enhancing the availability and economic access to food while addressing the underlying causes of food insecurity among poor households.

*Establishing Community-based Institutions*

The principal SO1 interventions – the formation of community institutions (VDC/SDCs) and their integration into a vertical power structure – represent a fundamentally rights-based approach to community-led development. Under SHOUHARDO, each participating VDC/SDC is responsible for facilitating the creation of a Community Action Plan (CAP) which effectively serves as a blueprint for community-led development.

The MTR found that many VDCs/SDCs were extremely dynamic and competent regarding their representation of poor community members, though some are unduly influenced by local elites. Relatively homogenous communities were more likely to have formed effective committees. In contrast, communities with sharp economic stratification tended to experience more challenges in achieving effective representation for the poor. In addition to promoting a sense of identity among the poor, VDC/SDC serve as an important flow of information to the community. However, time and resource issues also constrain the participation of poor and extremely poor individuals in VDC/SDC and in some cases, underlying sources of conflict may compromise the sustainability of these community institutions.

The integration of the VDC/SDCs into formal power structures requires effort given that the majority of UP/Pourshavas demonstrate a minimal commitment to the SHOUHARDO program and few seem to understand the underlying message and approach to pro-poor development. The MTR found little indication that capacity-building efforts aimed at Program Advisory Coordinating Committees (PACC) have been effective in promoting a change in attitude or behavior regarding the rights and responsibilities of the poor.

*Food and Livelihood Security Interventions*

The SHOUHARDO program compiled a broad “menu” of interventions from which activities could be selected according to a range of occupational categories. In addition to trainings in improved agricultural techniques, livestock management, and numerous IGA activities, SO1 interventions included food for work (FFW) and cash for work (CFW) activities which provided temporary employment for participating households and resulted in infrastructural improvements which benefit entire communities.

To date, the most successful interventions carried out under SO1 have been the establishment of community savings groups and comprehensive homestead development. In the urban slums, IGA interventions have also had a significant impact, particularly for women. On the other hand, interventions based on the distribution of assets without

complementary empowerment messages were found to be counterproductive and inconsistent with program goals.

Pressure on field staff to accelerate resource allocation over the past year has in some cases contributed to a shift away from the intended focus on community-level problem-solving. Rather than being driven by careful community analysis embodied in the CAP, intervention decisions have often been made on a supply-side basis according to what is “available”.

- **Strategic Objective 2 (SO2)**

SO2 seeks sustainable improvements in the health, hygiene and nutrition of the program participants. The delivery of these interventions depends upon complex vertical linkages between headquarters and the field staff as well those between other non-governmental agencies working in the program region. Meanwhile, SHOUHARDO has also sought to create opportunities to access to information and services provided by government and non-government actors by improving horizontal linkages within the program.

The distribution of MCHN rations, the courtyard sessions and related message delivery, and the sanitation and hygiene component are the most visible SO2 interventions. The MTR determined that the MCHN ration had effectively uplifted/empowered the pregnant and lactating women within their own and communities, and had enhanced knowledge of the food requirements of mothers and children. 70% of women have adopted safe practices related to hand washing, ANC and PNC, exclusive breastfeeding, EPI coverage, and vitamin A intake. Similarly, at the time of the review, the MTR team found that 68,000 families are using latrines (65% of expected at this point in the program), and 22% of the communities have achieved a targeted standard of community-led total sanitation (CLTS). The program is ahead of schedule with regard to assuring community access to arsenic-free water, but the number of sewage drainage schemes is behind schedule (46%).

The delivery of messages and distribution of rations has been the most successful output of SO2. For pregnant and lactating women, ANC, safe delivery, PNC and emergency obstetric care (EOC) services are still very much needed. The horizontal linkages component does not yet seem to have expanded access to MCH care services at union and upazila health complexes. The most commonly cited problem was the shortage of qualified staff at upazila and union health service complexes.

The MTR team identified a range of issues pertinent to the future implementation of activities under SO2. First among these is the inconsistent technical capacity of front line staff and CHVs. Regional SHOUHARDO offices lack a HHN focal person capable of providing technical backstopping. At the same time, there is a lack of clarity in terms of responsibility for strengthening horizontal linkages between the severely limited number of government and non-government health service providers, particularly in rural areas. While SHOUHARDO has made efforts to identify and support access to a number of referral hospitals, the MTR team found that the cost of transportation to such facilities is beyond the means of many beneficiary households.

- **Strategic Objective 3 (SO3)**

SO3 is designed to empower 400,000 girls and women in targeted communities. Based on a model developed with the Education Unit (EU) in CARE/Bangladesh, activities focus on early childhood education, adult informal literacy, consciousness-building and dialogue around important social issues, group planning, participation of female participants in the formal educational structure, and the integration of poor women into the educational and political committees of the UP/Pourashava.

The EU model seeks to empower women and girls through objectives such as the establishment of Early Childhood Development Centers (ECCD) designed to provide pre-school education for girls under 6 years of age. As of April 2007, 860 ECCDs had been established, more than half the program goal. The MTR team observed a significant number of these centers and found them to be one of the most successful of the SHOUHARDO SO3 interventions.

Interventions carried out under SO3 are integrated under a single approach that combines efforts in early education (ECCDs) with support for continued schooling and formation of community-based groups such as Empowerment, Knowledge and Transformative Action (EKATA), Parent-Teachers Associations (PTAs), and School Management Committees (SMC). Implementation of SO3 interventions is made more difficult by the fact that currently, no regional staff are exclusively dedicated to this strategic objective and no technical support is available at the hub-office level.

Activities carried out under SO3 appear to be among the most successful in the SHOUHARDO program. The MTR team found very impressive results in both the early childhood development groups (ECCD) and EKATA groups. The two most compelling features of ECCD interventions are the early childhood access to learning and social play and the open (and lively) discussion of sensitive issues. It is clear that the EKATA model achieved major success in terms of the establishment of public forums in which women can freely and openly express themselves, and the development of female leadership.

SO3 interventions have been less successful in integrating PEP groups into wider formal institutions, such as PTAs and schools. The MTR team could not find clear evidence that the poor were participating more effectively in the formal education of their children or even gaining greater access to formal education of the UP. Participation of the poor on SMCs seems extremely scarce and, if realized, would be an unambiguous positive indicator of change. Also, the attempt to integrate these women's groups into wider national advocacy networks has not yielded much success. The relative lack of progress in creating horizontal linkages with is attributable to the excessive burden placed on field staff.

*SETUP Component*

The SETUP component of the EU model accompanies girls into the formal education system and seeks to establish a systematic role for parents (especially mothers) in the management of formal education from classes I through VI. This intervention is

progressing at a slow pace. Work with the PTAs and SMCs has been limited, and it appears that the poor do not yet have significant input into the formal education of their children as they themselves are illiterate.

- **Strategic Objective 4 (SO4)**

The purpose of SO4 is to enable adequate warning of impending natural disasters and promote development of plans and structures to mitigate their impact. Priority activities include training in early warning and disaster preparedness and response for Union Disaster Management Committees (UDMC), Pourashava Disaster Management Committees (PDMC), and volunteers at the ward and community level. SO4 also continues to support the Network for Information, Response and Preparedness Activities on Disaster (NIRAPAD) established under the IFSP.

Implementation of SO4 activities has lagged behind other interventions due to the absence of effective leadership and uncertainty among staff regarding integration of HA activities into ongoing interventions. The reformation and training of UDMCs and PDMCs, as well as the development of disaster contingency plans was well below intended targets for the period between October 2006 and March 2007.

Alternatively, the program exceeded targets for infrastructure development over the same period and has piloted promising early warning systems (EWS) with the Asian Disaster Preparedness Centre (ADPC) and various subcontractors. SHOUHARDO has also partnered with ADPC to enhance Urban Disaster Management (UDM). The UDM component largely focuses on providing training to SHOUHARDO, City Corporation and municipality staff on both structural and non-structural methods of reducing vulnerability to earthquakes and/or tsunami disasters. Finally, the MTR team found that SHOUHARDO's annual provision of funds for regional emergency stockpiles of relief materials has proven effective in eliminating common procurement and administrative delays that often constrain responses to rapid-onset disasters.

In an effort to account for the slow start-up in SO4 activities, SHOUHARDO has established an ambitious schedule for FY 2008 which includes an increase in community-level disaster mitigation interventions, risk and resource mapping, and disaster contingency planning.

### ***Overall Progress Towards Goals And Achievement Projections***

The progress of the SHOUHARDO program was analyzed in terms of the targets for the IPTT indicators (also some PMP indicators) over the last 18 months (October 2005-September 2006, and October 2006-March 2007). In terms of current progress it is also important to note that quantitative achievements are encouraging given aforementioned delays in implementation and that the MTR team feels that progress made thus far has set a solid foundation for the future success of SHOUHARDO.

The most dramatic achievements were seen in the number of trainings provided on good governance, human rights, leadership development, an increase in awareness of service

providers, and the number of savings programs established and rural markets developed. Significant progress was also noted in the number of children enrolled in fully functioning ECDs, the number of completed irrigation and drainage projects, the number of pro-poor community groups established, and number of community volunteers trained in disaster preparedness.

Alternatively, IPTT indicators significantly lagging behind targets include the number of operational networks between various stakeholders, the number of community-led FFW and LCS infrastructure projects completed, the number of households practicing alternative IGAs, and the number of children between 0-24 months participating in monthly growth monitoring.

### ***Program Management***

Due to the scope and coverage of SHOUHARDO, efficient and effective management of program activities has been both complex and challenging. Five critical aspects of SHOUHARDO program management are summarized below.

#### ***Staffing and Training***

Staffing issues were among the most urgent and complex faced by SHOUHARDO program management. Staffing at all levels, from headquarters to participating villages, is inadequate for achieving each of the program's stated objectives. Staff turnover is exceedingly high, and is likely due to the remoteness of project sites, isolated living conditions, considerable workload, and competition for staff from other agencies.

Field Facilitators have largely responded to the pressure to increase resource allocation by decreasing the amount of time and effort expended on conveying the core SHOUHARDO message of collective problem solving and community-led development.

There is a heavy reliance on village-level volunteers for the implementation of specific activities. Yet, the provision of adequate technical support is commonly lacking at the community level. As a result, volunteers and Field Facilitators often do not have the technical capacity to address issues and technical support must be solicited at (or above) the regional level, far away from the community where the problem-solving takes place.

Training is typically outsourced to technical partners (important exceptions include HHN). The review identified several aspects of SHOUHARDO's approach to training that warrant improvement. For example, the MTR revealed that an inordinate number of training activities appear to be supply-driven from program staff rather than demand-driven from the community as part of a broader problem-solving process. Likewise, regional staff expressed concern that training is too often concentrated at the headquarters level and favors the use of central technical advisors over available regional resources of support. Respondents also suggested that trainings are often based on standardized content rather than context-based, regionally appropriate content. Finally, the MTR team observed the need for follow-up on the quality and effectiveness of much of the training.

### Partnerships and Collaboration

As a principal feature of its implementation strategy, SHOUHARDO has established partnerships with three types of groups—implementing partners (PNGOs), technical partners, and Government of Bangladesh partners. Following a rigorous review process, CARE/Bangladesh selected 45 regional and local NGOs as implementing partners. Meanwhile, 16 external partners were selected to provide technical training. SHOUHARDO works closely with 124 PACCs, the Local Government Division (LGD) and the National Institute for Local Government (NILG) to coordinate trainings for locally-elected bodies (LEB).

There is a wide measure of variation in the size, experience and capacity of NGO partners, a fact which presents significant challenges in achieving uniform quality of project implementation. The perception of one-sided decision making, staff turnover, and limited amount of time allowed for achieving program goals were also identified as important constraints to the formation of effective partnerships under SHOUHARDO.

SHOUHARDO has a formal agreement with the Education Unit and Economic Development Unit within CARE Bangladesh to provide valuable services to program activities. However, the roles and responsibilities of the EDU as part of SHOUHARDO are often unclear, or underappreciated by frontline staff.

### Gender Empowerment

SHOUHARDO has made significant progress in advancing the gender agenda with regard to active female participation in program activities. For example, the EKATA intervention has given women space (not just physical but social) for expression and could help produce a generation of women leaders. The MTR determined that SHOUHARDO has very effectively targeted women and has practiced a positive “affirmative action” not only its SO3 activities but in all the SOs. In some areas, opportunities for women under SO1 have broken traditional boundaries and provided women access to IGA activities once dominated by males (e.g. professional driver training). In SO2, the majority of participants are females, and several interventions are specifically designed to enhance the health and nutrition of women (and children). However, despite these gains, the MTR team feels that CARE/Bangladesh in general (and SHOUHARDO in particular) must continue to increase the number of female staff and enhance their ability to directly contribute to project implementation.

### Monitoring and Evaluation

Due in large part to the delayed start-up of the program, M&E efforts have primarily been focused on the monitoring of quantitative indicators drawn from indicator performance tracking table (IPTT) and the Program Monitoring Plan (PMP). The delayed start-up has also led to a preliminary emphasis on output-level indicators rather than those that reflect outcome or ‘effect-level’ changes.

Staff shortages are perhaps felt most acutely in the areas of program monitoring and evaluation as evidenced by the fact that the M&E unit at headquarters has only two staff.

In effect, the M&E system has thus far been limited to the compilation of quantitative indicators that are often incapable of providing critical feedback on intervention impacts, operational constraints and successes, or even participant perspectives on the program.

### ***Commodities Management and Environmental Compliance***

The primary challenges in distributing food assistance for program include multiple modes of transport required to deliver commodities to remote areas, program staff who must fulfill multiple responsibilities in addition to commodity management, and breaks in the supply pipeline that are not under the control of the program. Improvements resulting from a 2006 restructuring of the commodity management chain have reduced the level of problems in transferring, storing and distributing commodities to a minimum. A pipeline break resulted from the delay of multiple call forwards forced SHOUHARDO to reduce rations for FFW and MCHN activities in early 2007.

SHOUHARDO has taken deliberate steps to ensure that construction, use and maintenance of infrastructure does not destroy land forms, negatively affect bio-diversity, or contribute to air or water pollution. It has also established procedures for verifying the safe application of pesticides used in agricultural activities as well as the safe storage of food for distribution. The Environmental and GIS Unit of CARE-Bangladesh has developed comprehensive Environmental Compliance Management Guidelines. Overall, the team found environmental compliance awareness to be high, and procedures well understood and integrated into activities, particularly among staff responsible for infrastructure. The MTR team also applauds the linkages created with the IUCN in the haor areas to develop the floating garden intervention (the *baira*) that enhances both economic income and the environment. The system appears to function with professional competence and efficiency.

### ***Priority Findings and Program Recommendations***

#### ***Findings***

As stated above, the MTR team is highly supportive of SHOUHARDO and the progress made toward achieving its transformative goals over the past year. Nonetheless, the team feels that the previous acceleration of project implementation combined with the lack of commensurate increases in qualified staff has limited the effectiveness of the 'SHOUHARDO message' and that all staff, from senior management to field facilitators, would benefit from rededicating themselves to the fundamental objectives laid out in the DAP. Specific findings from the comprehensive analysis of SHOUHARDO interventions to date include the following:

- The major threat to the sustainability of the program is the dilution of the 'SHOUHARDO message'. This is largely due to the perception arising from the acceleration period that the program has concentrated on the distribution of inputs rather than maintaining a focus on community empowerment. Especially in the face of resource cuts, there should be fewer interventions, more staff, and a re-allocation of resources.



- As a result of under-staffing, SHOUHARDO and PNGO staff are excessively overburdened with de facto job responsibilities that have shifted away from promotion of the ‘SHOUHARDO message’.
- Technical support at the regional, sub-regional, and field level is inadequate and the dependence on volunteers to implement the program has not been reflected in their technical backstopping.
- The strategy to mobilize government services to provide technical support and to adopt pro-poor stances has not materialized in practice, and the effort to integrate communities to locally-elected bodies at different levels of government suffers for lack of a consistent methodology and for lack of staff time.
- Training has become mistaken for learning; and as a result, it is assumed that a person once-trained will have assimilated and applied the message. Limited performance assessment or follow-up of training is built into the implementation strategy.
- Quality is being sacrificed for quantity. Adequate quality control mechanisms are not in place. The necessary monitoring and evaluation unit was never fully staffed at the regional or headquarter level. The current documentation of program quality and impact is limited to reporting indicators and sporadic anecdotal evidence, and there is no system of feedback that could systematically inform management adjustments to program content or implementation.
- Learning is not adequately shared throughout the program, though work on this is underway. Field staff have little opportunity to share with regional staff; PNGO staff have little opportunity to share among themselves or with CARE staff; VDC/SDCs do not share with one another; UP/Pourashava do not share SHOUHARDO experiences; and so on.
- The advocacy component in SHOUHARDO has been under-emphasized and, thus, under-utilized in the field. The Advocacy Unit in CBHQ has trained staff and established national-level working relationships, but advocacy efforts in the field are extremely limited mainly due to limited staff time.

### Core Programming Recommendations

The MTR feels the following actions are critical for ensuring the sustainability of SHOUHARDO’s efforts to: 1) promote social change by addressing underlying causes of food insecurity; 2) empower vulnerable individuals, households and communities; 3) promote proper health and nutrition; and 4) reduce the risk of disaster.

1. Management must reassert the SHOUHARDO message by prioritizing support for local community institutions (VDCs/SDCs) that legitimize local community development plans (CAPs) and effectively advocate for the integration of representatives of the poor into community power structures.
2. In order to achieve this, it will be necessary to reorient regional and field staff toward their roles as “development/change agents” and the principles of social

change, informal learning, and awareness-building that form the basis of the 'SHOUHARDO message'. The MTR recommends that PNGOs convene a series of regional workshops aimed at affecting staff re-orientation.

3. Both of the previous recommendations are contingent upon future adjustments in program staffing. The MTR suggests that staff adjustments could be informed by uniform assessments of VDC/SDCs and the progress made toward SHOUHARDO goals in their individual constituencies. Using progress as the metric, SHOUHARDO would be well-positioned to increase or decrease its efforts in specific communities and refocus on the communities where the likelihood of effective positive change is greater. This does not mean that weaker, more marginalized or non-progressing communities would be abandoned. It does suggest, however, that scarce resources should be allocated to areas where core interventions have been, or have the potential to be most successful.
4. Critical needs for technical backstopping at the field level must be met with an increase in technical staff capacity at the regional and sub-regional levels. The mobilization of technical assistance will in turn require the strengthening of horizontal and vertical linkages to provide technical assistance in priority areas including agriculture, HHN, disaster preparedness, empowerment, and advocacy.
5. The need for reinforcement of monitoring and evaluation capacity is urgent in all regions and at all levels of the SHOUHARDO program. A minimum of two M&E specialists in each region should be given responsibility for ensuring that qualitative and quantitative M&E measures support accurate documentation of program impact. The MTR team also recommends initiation of a participatory M&E system (on a pilot basis) with the intent of reinforcing linkages between VDC/SDCs and UP/Pourashavas. Likewise, the MTR recommends that SHOUHARDO management explore a collaboration with the new Program Quality Unit in CARE with the goal of developing a systematic strategy for identifying the critical lessons from SHOUHARDO.
6. The MTR team proposes two critical sets of workshops aimed at enhancing opportunities for institutional learning. Priority should be given to the determination of the extent to which decision-making and management can be decentralized toward the regions. Discussions should include the capacity of the region to assume greater decision authority from headquarters, and identification of resource and management decisions that can be appropriately delegated to the regional level. A second set of regional workshops should focus on lines of authority in key programming decisions, the potential role of PNGOs in training and M&E functions, quality control of the interventions and the clarification of frontline staff and technical staff roles.
7. Opportunities should be sought to increase the ability of regional and PNGO staff to actively engage in dialogue and decision-making related to philosophy of the program, quality control, implementation options, staff training needs, and more

efficient and effective forms of sharing implementation responsibilities. In this spirit, the MTR team has recommended the formation of a working group/task force comprised of regional CARE and PNGO staff to aimed at enhancing the bi-directional flow of critical program information.

8. Mobilization of advocacy campaigns and groups is critical to the sustainability of the program. The SHOUHARDO program is encouraged to work closely with regional offices to prioritize advocacy efforts in light of time and staffing constraints.

*Final Recommendation*

The MTR team recommends that the SHOUHARDO program be granted a six-month extension at the end of the current LOA to enable the implementation of the proposed programmatic recommendations and consolidate gains made in two full years of program implementation. The need for this extension is primarily due to pipeline breaks, the amount of time it took to identify and recruit qualified PNGOs, and problems associated with staff retention resulting from the difficult working environment. Based on the lessons learned from the implementation of SHOUHARDO, the successful transformative processes should be promoted in the next five-year program supported by USAID.

## 1.0 Introduction

The SHOUHARDO program of CARE/Bangladesh was approved for implementation in October of 2004 and will last until September of 2009. It is the largest development program in the CARE/Bangladesh project portfolio and in the USAID Bangladesh mission. The program is funded via the P.L. 480 Food for Peace Development Assistance Program and the Government of Bangladesh (GoB) and is valued at over USD 131 million. The program currently operates in four regions, 18 districts, 493 Unions, 16 Pourashavas and one city corporation of Bangladesh in both rural and urban settings. Currently 2,211 villages and 137 urban slums, reaching over 412,000 households and two million individuals, are attended by SHOUHARDO activities. For reasons explored below, SHOUHARDO experienced a slow start and several components of the program have not yet achieved a full implementation schedule. This Midterm Review (MTR) was contracted with the intention of documenting the effectiveness and progress of the program at this point in time (given the delay), and to recommend realistic adjustments to program strategy and goals for the remaining life of the program (Annex A: TOR). Specifically, the objectives of the MTR are as follows:

- a) To assess the progress of the SHOUHARDO Program to date, noting that full implementation began in mid CY 2006.
- b) To assess the effectiveness of strategies and implementation of interventions and provide recommendations to further improve the Program.
- c) To project, with its current momentum, how effectively SHOUHARDO will reach its targets and objectives by the end of the program.

This report presents the findings and recommendations of the MTR team, comprised of nine external consultants from TANGO International (Arizona, USA) and the Dhaka-based Human Development Research Centre (HDRC). The team expertise areas included livelihoods systems, poverty reduction, humanitarian assistance and disaster management, partnerships and community development, governance and democracy, and gender. Because of the significant variability among regional contexts, the report contains region-specific sections with findings and recommendations that apply directly to each region.

## 2.0 Methodology of the Review

After review of available program and background documents, the in-country phase of the MTR was conducted during the period May 20-June 25. A work plan was developed by the team and approved by SHOUHARDO management, and the MTR team carried out intensive visits of all four program regions (Chittagong, Kishoregonj, Tangail, and Rangpur). In each region, the team (or sub-team) interviewed regional program staff from senior regional management to the frontline facilitators, partner NGO staff from management to frontline, community volunteers, program participants in villages and slums, locally-elected body (LEB) officials including Union Parishad and Pourashava members, Upazila administrators and SHOUHARDO program advisory coordinating committees (Upazila PACCs), and technical partners. The MTR team worked closely with senior management at CARE headquarters, including the Acting Country Director, the Assistant Country Directors, the SHOUHARDO Program Coordinator, and the managers of other CARE programs that collaborate with SHOUHARDO. In addition, the team interviewed PNGO management, relevant technical partners both in government and non-government and PACC representatives at the national level. Finally, the team had several interactions with the Food for Peace staff at the USAID mission as well as with the Mission Director and other technical staff. In all, the MTR team visited twenty-two villages and seven slums (see Appendix 3).

In each visit, the MTR team relied on key informant interviews and focus group discussions. The results of these interviews were compiled by team members and analyzed—often in a team context to assure consistency across the different sub-teams. In each region, the team conducted an exit meeting with the regional staff in order to share preliminary findings and elicit feedback. In addition, a pre-fieldwork survey of the PNGO partners was completed to establish comparative profiles of the implementing partners with regards to size, areas of operation and capacities. These results are also incorporated into the report.

The MTR team made a major effort to cover the range of stakeholders in the SHOUHARDO program, and this report seeks to address all the major issues identified in the course of the fieldwork. As is common in the review of major programs, more time would have been preferable, and it is possible that all the components of this complex program are not evenly covered. The MTR team feels confident, however, that the priority issues are adequately discussed and that the accompanying recommendations reflect an understanding of the program realities and implementation constraints at this point.

### **3.0 The SHOUHARDO Program**

The SHOUHARDO program is one of the most unique development efforts in Bangladesh, perhaps unprecedented in terms of the ambition of its scope and reach. Within CARE/Bangladesh, SHOUHARDO embodies a major shift in the organization's program strategy and approach that was initiated at the end of its predecessor, the Integrated Food Security Project (IFSP). At that time, CARE/Bangladesh decided to regionalize its program, creating multi-sectoral regional offices that provided a suite of different interventions to beneficiary populations. Furthermore, the organization has attempted to adopt a systematic rights-based approach to its programming, as reflected in the current Long-Range Strategic Plan (LRSP). These organizational policy changes are fully operationalized in SHOUHARDO. In addition to the rights focus and the sheer magnitude of the program (412,000 households), the uniqueness of SHOUHARDO is further defined by four differentiating characteristics.

#### **3.1 Program Goal**

The overall goal of the SHOUHARDO program is “to sustainably reduce chronic and transitory food insecurity” among 400,000 households by September 2009. The program goal further states, however, that SHOUHARDO will not only seek to enhance the availability, access, and utilization of food resources, but will also address the “underlying causes” of food insecurity in the poorest regions of Bangladesh. In this regard, SHOUHARDO explicitly locates the emphasis of its program interventions in entitlement, empowerment, and the rights-based focus.

The Strategic Objectives (SOs) of SHOUHARDO demonstrate an intention to promote major change in local Bangladesh society:

- SO1: Improved availability/economic access to food through strengthening livelihoods, entitlements and enhancing accountability of service providers.
- SO2: Sustainable improvement in the health and nutrition of project participants.
- SO3: Enhanced empowerment of 400,000 women and girls from targeted vulnerable HHs.
- SO4: Targeted communities and institutions are better able to prepare for, mitigate and respond to natural disasters.

Ultimately, SHOUHARDO seeks to create the conditions for a transformation in the traditional power structures that have marginalized and exploited the poorest segments of society. This change cannot occur, of course, over the life of the program, a reality that is recognized in SHOUHARDO philosophy and design; however, the institutional mechanisms of such change can be established and supported in a sustainable manner. It

is this specific focus on long term, transformative change that helps define the uniqueness and the ambition of SHOUHARDO.

### **3.2 The Institutional Collectivization of Poor People’s Rights**

Related to the program goal is the program methodology. SHOUHARDO’s principal strategy of program implementation has introduced local level collective institutions that coalesce power and provide effective representation for the poor and extreme poor of local society. These institutions, called Village Development Committees (VDCs) in rural areas and Slum Development Committees (SDCs) in urban areas, are meant to be comprised of representatives of the poor and extreme poor, authorized and legitimized by the local community and commissioned as leaders to develop and operationalize a community-driven development plan. Around the world, this is perhaps one of the most ambitious and systematic attempts to design and employ a comprehensive community-driven development model.

### **3.3 The Targeting of the Poorest Households**



The SHOUHARDO program is committed to reaching and prioritizing the poorest households in Bangladesh. As many development practitioners understand, it is very challenging to systematically identify the poor and to design a strategy for specific targeting of this group. To achieve this targeting goal, SHOUHARDO used widely-accepted poverty maps to identify the poorest and most vulnerable regions of the country—the exposed southeast coastal areas

(Chittagong), the haor areas of north central Bangladesh (Kishoregonj), the north char areas (Rangpur), and the mid-char areas (Tangail). Within these regions, project staff then surveyed the region to determine the poorest districts, upazilas, and unions. With the assistance of local government and other leaders, the poorest villages were then identified in each union. A well-being analysis used PRA techniques to establish household wealth rankings, and the two bottom categories—the poor and extreme poor (PEP)—were targeted as program participants. As a result of this very systematic process, SHOUHARDO has succeeded in establishing a presence in some of the most difficult and remote regions of the country and has effectively defined a target population that is among the most vulnerable in Bangladesh. In this sense, SHOUHARDO can lay claim to “going where others do not go.”

### **3.4 SHOUHARDO Partnerships**

The final characteristic that defines the uniqueness of the SHOUHARDO program is its mode of implementation. In contrast to the predecessor IFSP project, the vast majority of the SHOUHARDO intervention set is implemented through different forms of partnership with NGOs, government organizations, and other sources of technical support and training. The principal delivery channel of program interventions is through 46 partner NGOs that provide field, technical support and administrative support staff to the

program. There are around 1300 PNGO staff contracted under the SHOUHARDO facilitation arrangement, and they are responsible for 95% of the program implementation activities. In addition, government technical expertise located in the Nation-Building Department (NBD) and elsewhere is contracted for technical support and training, while public and private partnerships have been formed to provide training and technical assistance. Thus, SHOUHARDO provides a prime testing ground for the organization's strategic shift to the facilitation of program implementation through the partnership model.



## 4.0 Program Effectiveness

This section will review the interventions that are associated with the SHOUHARDO program. It is critical to note here that SHOUHARDO effectively reached full implementation in most villages and slums only in 2007, about a year and half later than designed. In the direct-delivery sites (the five percent implemented by CARE staff), implementation began much earlier. The reasons for this delay in start-up are associated with an unanticipated change in senior management at the headquarters level and an underestimation of the time required for targeting of the participant population, the selection of PNGOs, and the necessary “orientation” of the participant villages and slums. The departure of the SHOUHARDO program coordinator from CARE/Bangladesh left an unfortunate gap in leadership that was only filled permanently in 2006. On the other hand, the ambitious magnitude of the program in both scope of activity and geographical reach required, and rightly so, a long period of time to identify and train partners and set up program sites. Furthermore, the rights-based approach that inspires SHOUHARDO explicitly places “software” ahead of “hardware,” which means that a significant amount of interaction (around six months) with selected communities was necessary to prepare the participants for program interventions. The MTR team feels that the management changes were regrettable, but that the time consumed in the overall setup of the program was indeed justified from an implementation perspective.

The MTR team is fully aware that concrete and measurable program impacts are not realistic at this point, particularly those that would reflect changes in behavior or in local power relationships. The team prefers to focus on whether the current intervention set, as being implemented, promises to move in the direction of program success.

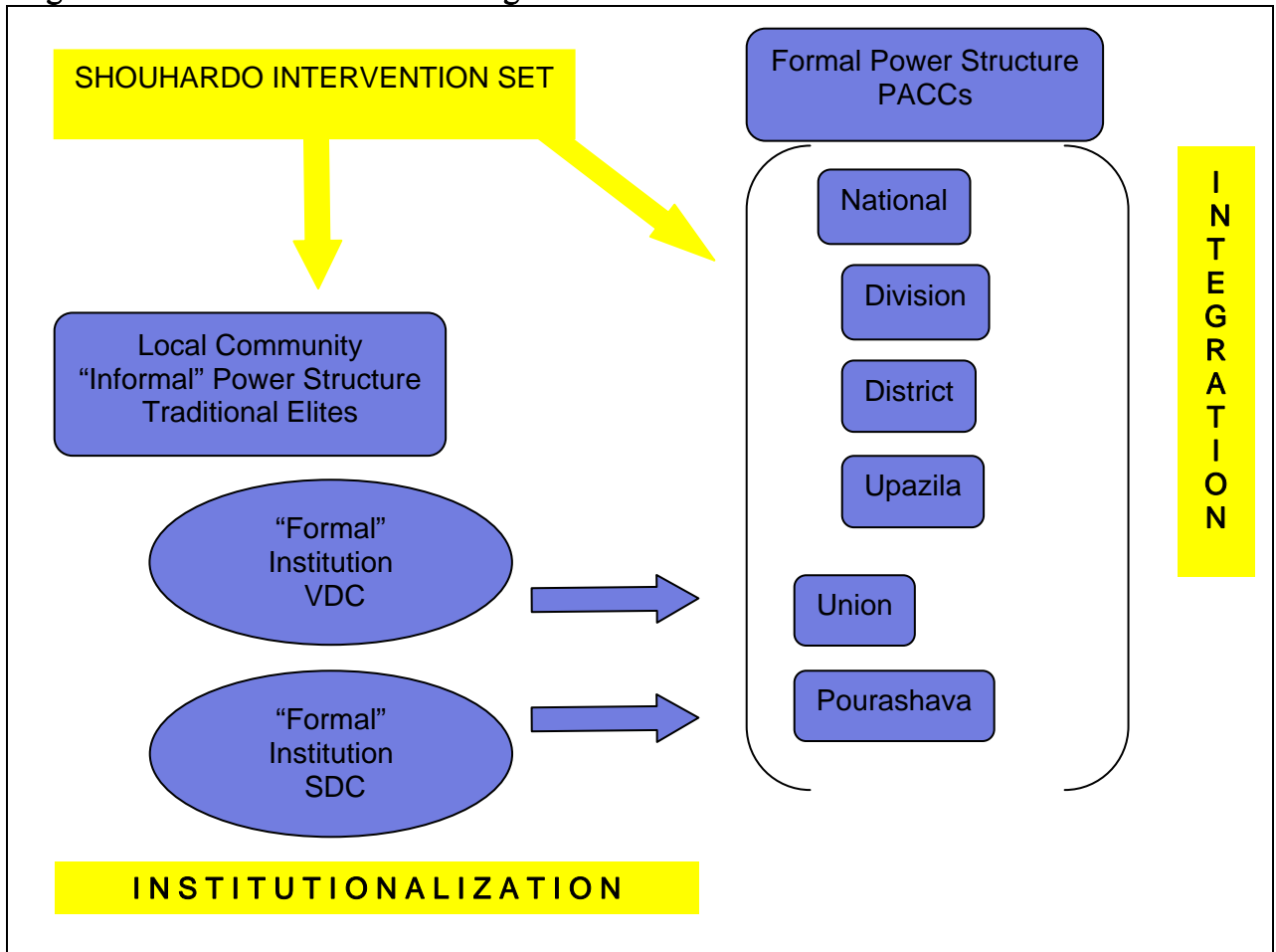
### 4.0.1 The SHOUHARDO “Message”

The MTR report will make frequent reference to the SHOUHARDO “message,” a term that summarizes both the philosophy and the principal strategy of this community-owned, transformative development approach. Also, the team has attributed specific significance to the term SHOUHARDO *program* rather than project, as a means of underlining the transformative nature of this effort. Meaningfully, then, while projects have beneficiaries (who receive project benefits), a program like SHOUHARDO has *participants*, who manage program resources. SHOUHARDO is a special program and an extremely important experiment in development and social change.

As the SHOUHARDO DAP so directly states, the most fundamental reason for persistent food insecurity in Bangladesh has been the unequal and exploitative structure of power in local society—both rural and urban. As Figure 1 depicts, local traditional elites have—for centuries—controlled access to resources through many subtle and less subtle mechanisms such as land ownership and control of water bodies, influence over the justice system, preferential political access, and even thuggery. Poverty and food insecurity, as the program rightly indicates, are intimately related to the inequities inherent in this informal power structure in local community. To address this preeminent “underlying cause” of food insecurity, SHOUHARDO’s fundamental strategy is to create

a new “formal” institution at local level that represents the target population of poor and extreme poor. This institution is the VDC in rural communities and the SDC in urban communities.<sup>1</sup> The VDC/SDC is comprised of representatives of the PEP who have been selected through a consensus process, and these members are meant to be informal “natural” leaders, persons interested in the well-being of the community—those with a development “vision.” The VDC/SDC members, as representatives of a class within local society, are responsible for managing local resources for the common good and for defending the interests of the PEP whom they represent.

**Figure 1: The SHOUHARDO "Message"**



The core of the SHOUHARDO message—as shown in Figure 1—is the creation of a new formal institution in local society that can negotiate new power relationships on behalf of the interests of the poor and extreme poor. The VDC/SDC is a formal institution in the sense that it is locally established by a constituent public, and it has been granted decision-making and problem-solving authority that involves the management of resources. At the same time, the SHOUHARDO message focuses on how to legitimize

<sup>1</sup> SHOUHARDO senior staff has commented that the use of the term “committee” is not desirable in the cultural context of Bangladesh, because of its association with elite political groups, precisely those that the VDC/SDC seeks to counterbalance.

and “incubate” the VDC/SDC by integrating it into the existing political and formal power structure of government at the different levels of administration—union, upazila, district, division, and nation. As part of this integration process, SHOUHARDO works with the Union Parishad and the Pourashava administrations to instill a proactive, pro-poor commitment, to inform LEB members of their responsibilities to their constituencies, including the poor, and to promote channels of access whereby the poor can avail themselves of the public services to which they have rights. SHOUHARDO has interventions, such as capacity-building training and disaster management training for union level officials, and in some cases, SHOUHARDO funds are used to construct union level infrastructure such as the Union Parishad complex and marketplaces. At higher administrative levels, SHOUHARDO has constituted PACCs comprised of government representatives and technical service providers (e.g., the Nation-Building Department) in order to further this integration and to grant further legitimacy and recognition to the VDC/SDCs. At the national level, the PACC consists of all the representatives of the nine line ministries involved in the SHOUHARDO program, and it is designed to play a major advocacy role on behalf of the poor and the VDC/SDCs.

Thus, the essence of the SHOUHARDO message and the mechanism by which social transformation can occur is the creation of a representative institution for the poor at the local level and the integration of that institution into the legitimate and formal power structure. It is intended that a legitimate VDC/SDC will be in a position to exercise the rights of citizenship on behalf of the PEP and to make demands for the resources and services to which the poor and extreme poor are legally entitled. The intervention set that comprises SHOUHARDO—both software and hardware—is designed to support the critical

“message.” The MTR accepts the message as the defining strategy of the SHOUHARDO program and has focused on ways in which this message can be reinforced, the institutions and the formal linkages strengthened.

#### The SHOUHARDO Message

- 1. The creation of a formal institution comprised of peers from the poor and extreme poor in the local community that is legitimately recognized as the representative group of that class and is charged to defend their interests.*
- 2. The integration of these village/slum institutions into the formal power structure of the country through participation of the PEP in the affairs of local government and through the public recognition of the responsibilities of the locally-elected bodies their poor and extreme poor constituents.*
- 3. Program resources designed to promote sustainable food security are used to strengthen the problem-solving capacity of these village/slum institutions and to promote pro-poor support from locally-elected governmental bodies.*

## 4.1 Program Progress: Evaluation of the Intervention Sets

This section analyzes the intervention sets that constitute the content of the SHOUHARDO program with an eye toward the effectiveness of the interventions themselves and the progress made in implementing them. First, the core interventions of the VDC/SDC and the linkages with LEBs are examined. These are, in fact, the core interventions of SO1 (see below), but they also pervade all the other program components either directly or indirectly. The analysis then shifts to the specific SO activities. The analysis takes into consideration that the delay in start-up will be reflected in the achievement of quantitative targets for some indicators, and in the case of some indicators, LOA progress is projected out using current implementation rates. Specific recommendations for the next two years are presented where relevant.

## 4.2 SO1 Intervention Set

The SO1 is perhaps the broadest and far-reaching of the interventions sets. These interventions are intended to enhance the availability and economic access to food and address the underlying causes of food insecurity. The principal SO1 interventions—the formation of community institutions (VDC/SDCs) and their integration into a vertical power structure—have been thoroughly analyzed above and critical concrete recommendations have been discussed in detail.



These interventions are those that form the core of the rights-based approach and are the ones that address the “underlying causes of food insecurity” mentioned in the DAP.

### 4.2.1 The Community Action Plan (CAP)

The core feature of the SHOUHARDO program, the VDC/SDC, is meant to manage a development program in favor of the PEP with the facilitation of program field staff. The blueprint for this development is encoded in the Community Action Plan. In each rural and urban community, SHOUHARDO staff<sup>2</sup> have worked with the local participants to develop a community social map as part of the well-being analysis, a prioritized problem list, a problem analysis (usually, a problem tree), then a community action plan that includes the prioritized problems, consequences, actions to be taken, sources of support (including SHOUHARDO), and different roles. Some CAPs have numerical targets and current achievement levels. The purpose of the CAP is not only to design a community development blueprint, but also to enhance the capacity of the VDC/SDC as a problem-solving group, so that interventions are specifically tied to the solution of a recognized problem. In this way, the CAP seeks to minimize the perspective that the distribution of program inputs is a “relief” operation to assist the poor. On the contrary, the CAP seeks to establish the priority of the problem-solving process to which the interventions are meant to be derivative.

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<sup>2</sup> SHOUHARDO staff refers to CARE and PNGO staff responsible for the implementation of the program.

#### 4.2.2 The VDC/SDCs and the Community Action Plans



The MTR team visited around 30 VDCs and SDCs in the four regions. The program approach requires that committees are to be comprised of the poor and extreme poor members of the community and to have a strong gender balance. The team sought to verify this in the communities visited. It found that in some places, such as Rangpur, a poor/non-poor formula was implemented (75% poor and extreme poor and 25% non-poor) using the argument that a sprinkling of “sympathetic” pro-poor elite members would act as emissaries arguing the interests of the poor to their kindred elite and the existing power structure.

It is clear that a range of variability exists across the program participant group. On the one hand, there are VDC/SDCs that are dominated or influenced by local community elites and have little awareness of their role as representatives of the interests of the PEP. This happens directly when the non-poor who sit on the VDC/SDC make decisions for the group; or indirectly where local elites who control land or fishing access exert influence over the VDC, even though they do not live in the village. There are other ways in which the “ownership” of the group can be co-opted, such as the case of one SDC that requested a non-poor landowner to join the committee because he was more aware of local affairs. Pro-poor members who are elected by the poor to a VDC/SDC can be a significant asset, particularly if they can provide the confidence and linkages that enable them to act as emissaries on issues of rights and access. They can be especially valuable if they are able to facilitate the committee’s own growth in confidence and ability to undertake such initiatives on their own. Obviously, the success of including non-poor depends on the judgment of the community in who they select and the skills and motivation of the non-poor individual and is something that the program should monitor closely.

On the other hand, the MTR team identified VDC/SDCs that were extremely dynamic and had a refined sense of their responsibility as representatives of the poor. In these cases, the VDC/SDCs had successfully found solutions to community problems, had advocated among Locally Elected Bodies (LEBs) in the name of community members, and had a sense of community development. As the team sought to understand the patterns of success and failure of the VDC/SDCs, it became clear that the more homogeneous communities (i.e. uniformly poor or a minority ethnic group) were more likely to develop effective committees. The existence of “natural” leadership (in SHOUHARDO language), was also a factor that promoted success. In contrast, communities with sharp economic stratification tended to experience more challenges in achieving effective representation for the poor. Ironically, some communities with a history of intense NGO activity seemed to have VDC/SDCs that perceived their role more as mini-relief agencies.

The MTR team was able to identify clear but indirect benefits to the SHOUHARDO participant communities from the VDC/SDC committees, even where a given committee is not particularly strong or effective. The VDC/SDC encourages the emergence of a concrete sense of identity among the poor and extreme poor. It becomes an important and active symbol of action in the community and creates opportunities for social reflection allowing the poor and extreme poor to “think about” themselves and to “care about” themselves. Another indirect benefit of the VDC/SDC has been that it channels a flow of information into the community. Particularly in the isolated haor, char, and island communities, there is no regular source of information—no print media, no radio or television, no marketplace. In these rural areas, the VDC provides a regular stream of information, much of which is new, regarding society, government and public responsibility, citizenship, technology, markets, and so forth.

The suggested design of the VDC/SDC (from a SHOUHARDO perspective) was to achieve a certain gender balance. Of eleven members, five were to be women, and a woman was to occupy one of the directorate positions. In the observed VDCs, there was in fact a substantial representation of female members, and in some cases, the females appear to be active and dynamic participants. In the SDCs, women are usually in the majority, since husbands are often working or away. In effect, the VDC/SDC significantly reinforces a broader and historical development effort in Bangladesh to increase the participation of women in public affairs, to enhance their mobility, and to elevate their visibility and status.

The VDC/SDC, as the community-level institution, is the centerpiece of the SHOUHARDO philosophy and development strategy, and it is important to gauge its sustainability and to anticipate potential pitfalls that might compromise its success. One such issue is the fact that the VDC/SDC members are drawn poor (in most cases) from the pool of poor and extreme poor and are themselves subject to precarious livelihoods. Committee members volunteer their time, but they must also work, fish, and cultivate. Many men in poor communities migrate regularly and are often absent, thus unavailable for participation in community affairs. Such livelihood demands limit who can participate in the committee and how much time can be dedicated. Without financial incentive, the poor face binding constraints to their participation in such community service.

Another area of potential concern is local conflict. VDC/SDCs exist in traditional power systems dominated by the non-poor. It is to be expected that in some communities the local elites will resent the attempt by its marginalized residents to exercise their rights and demand their entitlements, especially when project resources flow to the poor. The non-poor could begin to feel threats to the status quo of privilege and could seek to undermine the influence of the VDC/SDC. While only scattered examples of tension or conflict have been reported, it is an issue that deserves proactive attention by SHOUHARDO management. Where the non-poor dominate the community committees either through economic and political influence or through direct membership, the risk of conflict is slight. But these are not the effective committees envisioned in the SHOUHARDO approach. The MTR team acknowledges the need for the Poor and Extreme Poor (PEP) to generate alliances with the non-poor (on an equal footing) and to

find ground for mutual collaboration. The ability to promote these alliances is a challenge that SHOUHARDO is sure to face as the VDC/SDCs gain more visibility.

It is important to recognize that there are important differences between the VDCs and SDCs in terms of progress and maturation. Throughout all the regions, the SDCs tended to be more homogeneous, better organized, and to have a much larger representation of women. The reasons for this faster rate of institutional development are related to the fact that urban areas have more access to both information and services in contrast to the rural areas, where VDCs are often in isolated villages with little access to the outside context. Most of the SDC members appeared to have more formal education and to draw from a larger pool of “natural” leadership. In the urban slums, contrary to the village situation, the community members have a more diverse livelihood range to choose from and more opportunities to develop effective strategies of income distribution. In sum, the SDC tends to represent a community that is less poor, more aware, and with better access to economic opportunities, when compared to its rural homologue. Adaptive programming would, of course, reflect these differences.

The Community Action Plans (CAPs), as the master development blueprint for the community, are often not attributed the importance and significance they inherently command. The CAP, in the philosophy of SHOUHARDO, should be the organic document, similar to a Charter that embodies a community consensus regarding its change priorities and the development path it wishes to pursue. There is, however, a great deal of variability in the quality of the CAPs. In some communities, the CAP appears to be a wish list that apes the “available” menu of interventions in the SHOUHARDO program; while in others it suggests a process of careful reflection and consensus-building. Since the CAP is the instrument that defines community participation in SHOUHARDO, specifically, the flow of annual resources in the form of hardware and software inputs, some field staff facilitate the CAP as if it were the annual menu for interventions at the time when budgets are compiled. While management recognizes that the effectiveness of the CAP is directly related to the effectiveness of the VDC/SDC, more work is to be done.

#### ***4.2.2.1 Recommendations for the VDC/SDC Intervention***

The MTR team considers the VDC/SDC to be the fundamental intervention of the SHOUHARDO approach. This community institution must be made both sustainable and legitimate in order for SHOUHARDO to succeed as a transformative development experiment. Thus the team offers the following recommendations designed to strengthen the VDC/SDC.

- (1) The MTR team recommends that the progress status of the VDC/SDCs be systematically analyzed in terms of such indicators as the assimilation of the SHOUHARDO message, the degree to which the group represents the interests of the poor, and the effectiveness of the group in managing its own development agenda. This assessment, best carried out by an external national consultant, should classify the VDC/SDCs into three categories of institutional progress,

- suggest indicators for “graduation” or success, and identify the underlying factors that result in success or failure.
- (2) Based on the outcome of the assessment described above, it is recommended that the program seek to strengthen the VDC/SDCs by adapting interventions to the respective stage of institutional maturation. For those VDC/SDCs that have not yet successfully assimilated the SHOUHARDO message, the intervention set should focus on basic leadership and problem-solving skills and awareness about rights and entitlements. Every effort should be made to discourage the perception that SHOUHARDO provides inputs and the responsibility of the committee is to allocate them. For the more advanced and effective committees, the intervention set should emphasize proposal design, accounting, project management, and monitoring and evaluation. This implies the establishment of a “ranking” of VDC/SDCs according to criteria of institutional capability development. This recommendation will imply changes in the distribution of staffing and job descriptions as discussed below.
  - (3) The more advanced VDCs/SDCs should be allocated, on a pilot basis (perhaps 100 committees—75 VDCs and 25 SDCs), an annual budget that they themselves manage to implement their respective CAP priorities. The pilot committees would be carefully selected and oriented, and standards of transparency and resources accountability would be strictly maintained. The purpose of this “pilot” is to strengthen those institutions that appear to be more advanced and to demonstrate that the VDC/SDC institutions are indeed sustainable. If necessary, the VDC/SDC can be registered as an official entity in order to open a bank account and to operate as a collective body. Program staff at the frontline and regional levels would regularly monitor this pilot effort. There is a certain amount of risk involved in such a pilot, since it essentially tests the capacity of the local group to manage its own affairs, which must be an ultimate goal of SHOUHARDO. It also requires a re-orientation of the field staff toward the role of development advisor to the community.
  - (4) The importance of the CAPs has to be reinforced throughout all staff levels and at the community level. The number of items on the CAP should be reduced to a level of 5-10, and it should reflect a comprehensive assessment of community priorities, not just those that match SHOUHARDO interventions. In the facilitation process, the community should be aware that the CAP is not a wish list, but a set of planned activities that are realistic and achievable and may or may not involve SHOUHARDO resources. The CAP should be made visible at some public place in the community (most have one such gathering place)—it should be displayed and made understandable by all. *Everyone in the community should know what the CAP priorities are.*
  - (5) In the spirit of positive deviance, the exemplary VDC/SDCs and CAPs should be disseminated among other SHOUHARDO villages and slums. A process of cross-sharing and cross-dissemination within the respective unions, upazilas, and



regions should be initiated not only to share “best practices” but also to create a forum of interaction among VDC/SDCs that share a common mission and responsibility. This would require logistical support for travel to a central locale and effective facilitation on the part of the staff.

- (6) The potential for conflict between the non-poor and the SHOUHARDO participants in a given community is always present. To the extent that VDC/SDCs become more successful and prominent, this conflict could increase. It is recommended that SHOUHARDO management address this issue and identify strategies for alliances with the non-poor in ways that might bring mutual benefit.

#### **4.2.3 Integration and Linkages with LEBs and the PACCs**

Senior management at headquarters rightly argues that the sustainability of the VDC/SDCs ultimately depends on their integration into the formal structures of governance. In the program, the integration strategy is pursued through the capacity-building of the UP/Pourashava chairman and members and through the formation of a PACC at all levels of government. In addition, there are other interventions meant to strengthen UP/Pourashava linkages such as the training of the union disaster management committees (UDMCs) and the construction of Union Parishad complexes. The training interventions focus on promoting a “pro-poor” position on the part of the Union Parishad and creating greater awareness of the responsibilities of UP members to their poorer constituents. At the community level, the program informs members of their right to access the services offered through the UP/Pourashava. Specifically, the program has sought to place VDC/SDC members on the 13 formal standing committees of the UP/Pourashava as a means of linking the two institutions.

The integration of the VDC/SDCs into a formal power structure is a SHOUHARDO program component that requires further elaboration and effort. There is, as expected, a great deal of variation in how the UP/Pourashavas interpret and respond to SHOUHARDO and to the VDC/SDCs. It appears, however, that the majority of UP/Pourashavas feel little ownership or effective partnership with the SHOUHARDO program and goals, and few understand the SHOUHARDO message. Most LEBs do not see the poor as a “proper” constituency, but rather a group that requires occasional “relief,” such as the distribution of Vulnerable Group Feeding (VGF) program cards. In effect, the development vision elaborated at the UP/Pourashava level does not usually include the poorer segments of the population. The MTR team did, however, document some cases in which the UP/Pourashava asserted that they have begun to address the issues of their poor constituents more systematically because of their involvement with SHOUHARDO. In general, however, much more can be done at field level to create better linkages between the VDC/SDCs and the LEBs. The MTR could find little indication that the capacity-building training—by itself—was an effective intervention for promoting a change in attitude or behavior, and in fact there is little follow-up or evaluation of the impact of this training. At the same time, the effort to incorporate VDC/SDC members into standing committees has not yet yielded positive results, since

these committees are mostly inactive and of little value from the perspective of the UP chairmen.

The PACCs have met with limited success at the upazila and national levels only. The upazila PACC is comprised of the UP chairmen from the unions where SHOUHARDO operates, the technical staff of the different line ministries (NBD) who are responsible for delivering services to the Upazila population, the Upazila Nirbahi Officer (UNO), and representatives from the participating NGOs. In some of the upazilas, pro-poor UNOs have supported SHOUHARDO and promoted its activities. Generally, however, the PACCs meet infrequently and have little sense of their roles. At the national level, the PACC is made up of representatives of the line ministries, PNGOs, and CARE. The national PACC is still in the stage of development, and the SHOUHARDO message is still not fully understood. The PACCs do not yet function effectively at the district and division levels.

Currently, public resources in Bangladesh are heavily concentrated at the national level, and the meager flow of public revenues to local levels of government (Union Parishad and upazila) severely constrains the provision of services. Simply stated, the call on public resources at the UP level is far greater than the available pool of resources. Interviews with officials from the Local Government Division (LGD) of the Ministry of Local Government, Rural Development, and Cooperatives (the principal SHOUHARDO government partner) revealed that the Government of Bangladesh has initiated the Local Government Support Program (LGSP) in an effort to channel resources to the Union level. A strong presence of the VDC/SDCs will provide an obvious development platform for deciding the allocation of these funds, which will be overseen by Union-level committees (Scheme Implementation Committee and the Scheme Supervision Committee). By the end of 2008, approximately 30% of the SHOUHARDO targeted Unions will be participating in the LGSP.

#### ***4.2.3.1 Recommendations for LEB Integration***

The MTR team agrees with senior management that the sustainability of the community-level institutions will depend on the strength of linkages with government bodies. The current effort is not adequate to achieve the desired level of integration in part because the SHOUHARDO message needs greater reinforcement at the LEB level. In effect, the effort should be redoubled at both the national level downward and from the VDC/SDC level upward. In this spirit, the following recommendations are offered:

- (1) The VDC/SDCs should intensify their level of communication with the UP/Pourashava—both their ward members and the chairmen. Specifically, copies of the CAPs should be made available to the UP/Pourashava for both display and discussion. This recommendation requires a shift in emphasis on the part of the field facilitators to focus more on creating regular opportunities for information-sharing with UP/Pourashava officials.
- (2) An oft-cited problem is the rapid turnover of officials at the upazila and district level administrations. SHOUHARDO staff often strive to orient the UNO and

NBD staff about the program only to see them re-posted to another area. Many incoming UNOs are interested in SHOUHARDO but do not really understand the program. It is recommended that SHOUHARDO compile an information packet, specific for each upazila, that explains SHOUHARDO and its message, outlines its objectives and vision, summarizes past and current activities, and describes the nature of its interaction with the administration.

- (3) The MTR team recommends the creation of a union level committee of VDC/SDC members, PNGO/CARE staff, and LEB members that can directly address a development agenda for the poor and extreme poor. This recommendation would be implemented on an experimental pilot basis in around 50 Unions where LEB members appear more attuned to the SHOUHARDO message. Three representatives elected from every VDC/SDC in the Union together with three PNGO/CARE staff, LEB ward members from the SHOUHARDO areas, and the chairman would constitute a committee of around 20-25 members that could meet every quarter to share information and enact a pro-poor development strategy for the Union. The elected members would have a political incentive to work with such a larger, homogeneous constituency, and the community members would have a place at the table for union level decision-making.
- (4) The MTR team strongly recommends that VDC/SDC representatives be added to the Upazila level PACC. The Upazila already has a development committee, which has little or no representation from the poor and extreme poor, and the PACC, with its pro-poor focus, could eventually mature into a broader development committee or be integrated into the existing one. But the MTR team feels that the Upazila PACC has to include representation from the VDC/SDCs in order to enhance the legitimacy of the community level institutions and to provide the forum for effective problem-solving.
- (5) PACC meetings at the Upazila level should be held regularly, and travel costs should for VDC members should be covered by Upazila resources. District-level PACC meetings should be held every three months with prior circulation of a concrete agenda.
- (6) The MTR team endorses LGD recommendation that letters be sent by LGD to UP/Pourashava chairmen urging representation of the PEP in standing committees in the Scheme Implementing Committee (SIC) and Scheme Supervision Committee (SSC) that oversee the allocation of union-level resource funds. It is important to involve the LGD and the national level PACC in promoting linkages between government bodies and the VDC/SDCs.
- (5) The current training strategy for LEB stakeholders could be improved by developing training sessions that bring together LEB members, PNGOs, CARE and VDC/SDC members. One such training might focus on the provisioning of services by the local government and how to obtain them. Trainings with

multiple stakeholders assembled together in a concrete problem-solving context would seem to achieve greater interaction and learning.

#### 4.2.4 Food and Livelihood Security Interventions

The following discussion focuses on the SHOUHARDO interventions designed to enhance the availability and access to food through increased production and expanded economic activity. In 2006-07, after the delayed start-up, SHOUHARDO dramatically intensified the rate of rate of program implementation, including many of the SO1 interventions. The participant households were classified in terms of their dominant occupations—agriculture, fishing, comprehensive homestead gardening, and income generating activities (IGAs). The



program then compiled a broad “menu” of intervention activities—mostly trainings and inputs—and eligibility for participation in these activities was determined by the occupational category. There were trainings in paddy production and improved agricultural techniques, fishpond construction and management, livestock management, para-veterinary capacity-building, vaccination techniques, and numerous IGA activities (handicraft production, bag-making, poultry-raising, professional driving, candle-making, beautician skills, etc.). Inputs included livestock (goats, poultry, and cows), seeds for home gardens, sewing machines, rice-husking machines, rickshaw, vans, and others. Other SO1 interventions included food for work (FFW) and cash for work (CFW) that provided temporary employment for PEP households and resulted in infrastructural improvements for which the entire community benefited. This infrastructure intervention was mostly focused on earth works, such as roads, protective walls, plinths, etc. More complicated infrastructural schemes were also implemented to support SO1, such as mound protection, market centers and Union Parishad complexes.

Under SO1 implementation strategies, the frontline staff facilitate a community dynamic whereby the VDC/SDCs presented their priority decisions for SHOUHARDO assistance. These priorities—expressed in terms of trainings, inputs, and infrastructure—are then negotiated with PNGO staff so that they are consistent with budgetary limits. The staff then compile all the agreed-upon interventions into a single PNGO budget to be presented to regional management and ultimately to headquarters. The VDC/SDCs then allocate the inputs and trainings according to preset criteria. It was clear to the MTR team, from field observations and discussions, that the process of intervention selection had been reversed in many communities. Instead of the intervention decision being driven by careful community analysis and reflected in the CAP, it was determined on the supply side by the list of interventions that “were available” as one might choose one’s preferences in a restaurant. For example, in one char community in Rangpur, four fishponds were on the CAP, even though no one in the community had ever had a fishpond, worked in a fishpond, nor currently had space for a fishpond. The MTR team has concluded that the pressures on field staff to accelerate the burn rate resulted in a

shifting of the SHOUHARDO message away from its focus on community-level problem-solving designed to enhance food security.

During site visits, the MTR team systematically documented the SO1 interventions, and more detailed descriptions can be found in the regional chapters. The team found great variation in the impact, sustainability, and acceptance of these interventions. The most successful ones across the regions were the savings groups, which enjoyed ready acceptance and appeared to stimulate other forms of economic activity. Some savings groups actually contributed to the wider community welfare. Another very successful intervention has been the homestead garden, which is also widely disseminated and particularly appropriate for land-scarce households. The mound-protection walls and the flood centers are examples of successful infrastructure interventions. In the urban slums, the IGA interventions have had a significant impact, particularly those adapted to the needs of women who also must care for children and cannot easily leave home. On the other hand, there are interventions that seem to have little lasting value and were inconsistent with local livelihoods as well as program goals. The distribution of assets all at once, such as rickshaws, sewing machines, goats, etc. without the complementary empowerment message is counterproductive. It forces difficult targeting decisions on the part of the community and reinforces a relief mentality among participants. The team documented cases in which the extreme poor women didn't even know they were being "given" goats and didn't particularly know how to maintain them. In another village, cows were provided to non-poor households because they had the means to feed them.

In this SO, the effort to find the right balance between "hardware" and "software" interventions is most challenging. The MTR team considered the hardware interventions to include input distribution, food distribution (FFW), and infrastructure, such as road-building and mound protection. These are the more straightforward interventions in the sense that the community sees the immediate value, the burn rate is high, and the output is easy to measure. The team has documented valuable SO1 impacts of hardware interventions in providing immediate benefits to food security (e.g. through the distribution of sewing machines in the slums) and in increasing more long-term opportunities that enhance access to food (e.g. construction of market places, submersible roads, and others). On the other hand, the success of SHOUHARDO in correcting the underlying causes of food security is intimately tied to the success of the software interventions. In those communities where the hardware interventions are perceived as the "real" value of the program, the empowerment message is lost. In those communities where hardware interventions are the result of a conscious and reflective problem-solving process, SHOUHARDO is seen as a development program and the VDC/SDCs as development committees. In all, the MTR team identified the following issues:

- ***The balancing and sequencing of hardware and software.*** The program has tended to treat the software and hardware more as independent interventions, when in fact they need to be consciously integrated under a framework of community problem solving. Communities seem to be given an option to select some interventions from "Column 1" (goats and roads) and some interventions from "Column 2" (trainings). It would be more effective if both software and

hardware interventions are presented together as interrelated parts of a problem-solving process. The program has sought to introduce the software components prior to the hardware, but the sequencing of interventions—software and hardware—is determined by the nature of the problem and the region. In the haor region, for example, the integration of mound-building (hardware) with community participation (software) has vastly enhanced the problem-solving capacity of local communities. This model of problem-solving should be applied to all intervention delivery.

- ***Livelihood specialization vs. livelihood diversification:*** The program currently restricts the menu of potential trainings to the occupational group to which one is “assigned.” Current thinking on the management of risk would suggest that households are better buffered from economic or environmental stress if they have diversified livelihood strategies. It would be better for the program to offer agricultural households an IGA opportunity as a means of diversifying their livelihood, especially when occupations are highly seasonal, as is the case in the SHOUHARDO communities. Despite CARE’s long history of livelihoods programming, the livelihood perspective is not as prevalent in SHOUHARDO as it should be, particularly in SO1 activities.
- ***Targeting of inputs is problematic in some communities:*** The targeting of some of the inputs under SO1 seems inconsistent with the program goal of prioritizing the needs of the most vulnerable in the community. It appears that some of the interventions are inappropriate for the PEP under certain conditions, so that cattle are distributed to those able to maintain them (i.e. the non-poor). In some urban communities, the MTR team could not identify the logic of who received sewing machines, for example, or in a rural community, who got the rickshaw or van. In some communities, in fact, the extreme poor seem to be excluded from some input interventions because they don’t have access to animal feed, homestead land, etc. This should not be read as a criticism of the SHOUHARDO targeting approach but as part of the challenge of operationalizing the approach at the community level.
- ***Taking advantage of the positive deviant households:*** Currently there is a limited attempt on the part of implementing partners to identify positive deviant households as models for the various interventions being promoted. This is very much related to the fact that the frontline staff are overburdened and have little time to do more than provide training in practices related to the four technical areas supported by the program (agriculture, comprehensive homestead development, fish culture, IGA). Because there is no attempt to identify participant role models that could provide lessons for others, the multiplier effect is not there. In addition, there is no effective follow-up, so the opportunity to have farmer groups to share experiences with other groups and with service providers is not happening.

- ***Gender impacts of SO1:*** The MTR team noted that the SO1 interventions, including the critical formation of the VDCs and SDCs, have achieved an impressive gender representation. In almost all of the VDCs, there are at least five women among the 11-13 members, and there is a woman representative in at least one of the three principal positions of the committee leadership. On the VDCs that most closely adhere to the SHOUHARDO message, the women are active and effective participants. On the SDCs, there is often a majority of women, and women occupy leadership positions. The MTR team identified many instances where female SDC members demonstrated tremendous skill as development agents in their communities. With regard to the other SO1 interventions, women are the majority participants in domestic gardens and in many of the IGA training activities. Women also received goats and chickens, sewing machines, as well as entrepreneurship training. The women also received reserved spaces in the market places built by the program. The team has no doubt that the SO1 interventions have promoted the economic activity of women in an effective manner. When it was determined that the FFW requirements created a disadvantage for women, particularly the elderly who could not meet their daily quotas, SHOUHARDO management made the necessary adjustments so that women could continue to receive the benefit of the FFW activities. The team also found that the women in the urban slums were able to take greater advantage of the SO1 activities because of the broader range of opportunities in the urban context. In the urban areas, SHOUHARDO has also introduced non-traditional professions, such as professional driving, to women.

#### **4.2.5 Recommendations for SO1**

- (1) The program staff overseeing each region should ensure that a synthesis of the livelihood context is embedded in the training provided on the various interventions promoted by the project. If such a synthesis does not exist, then steps should be taken to create such a synthesis as soon as possible. For example, no systematic livelihood assessment has been conducted in the Haor region in the last five years. The MTR team did consult the work of Kamal et. al, and of the IUCN, but these fall far short of a livelihood assessment that is (1) systematic and comprehensive and (2) adequate to inform regional programming of intervention sets. Management might consult some of the Rural Livelihoods Program assessments in the CARE document library for appropriate models.
- (2) To enable households participating in the program to manage risk more effectively, the procedure used to determine the type of training each participant receives should be re-examined. Participants should be given the option to be trained in alternative livelihood options, not just the strategy they are already pursuing.
- (3) The program should create the space to enable frontline staff to identify positive deviant households in the technical areas being promoted. This means that more time will be needed within communities to discover who these households are that could serve as role models for other households in that community and other

nearby villages. Spending more time in fewer communities could also enable frontline staff to encourage the formation of farmer learning groups to facilitate sharing and better linking to service providers. This recommendation, as others in this report, argues that a uniform implementation strategy across communities—rural and urban—is less productive than an adaptive strategy that adjusts to the particular characteristics and dynamics of individual communities.

- (4) The urban results from SO1 are particularly encouraging. The MTR team believes that the empowerment of women through the SDCs, the lesser impact of conservatism in the urban areas, and the more expansive “opportunity range” in the urban economic environment are responsible for achieving very positive outcomes in enhancing food security. Because of the significant potential, the MTR team recommends that the Economic Development Unit strengthen their efforts in the urban IGA activities to integrate the small-scale production of handicrafts, etc. into the larger national and international markets.
- (5) The program should incorporate the lessons learned from other saving group’s initiatives being implemented by CARE and other organizations in other parts of the world so that the participants can make more informed decisions. This will enable the program to tap the potential of these savings groups to achieve greater impact and to encourage better risk management strategies. In addition, efforts should be made to explore the potential of making these savings groups more multi-functional. In addition to savings, these groups can be entry points for other development initiatives. These savings groups could also be linked to play a greater advocacy role for their constituency.

### 4.3 SO2 Intervention Set

Nutritional well-being is not only a basic right but is also an important element for development through the creation of human capital. Malnutrition (under-nutrition) arises from various nutritional, biological, social and economic deprivations. The “complex multi-dimensional factors” that cause malnutrition includes three classes of underlying causes at the household and family levels, which are known simply as food (i.e. insufficient access to food), health (i.e. poor water/ sanitation and inadequate health services) and care (i.e. inadequate maternal and child care practices). Ultimately, malnutrition directly damages people’s productivity by undermining their physical and mental abilities and indirectly by making them more susceptible to illness.



This SO seeks sustainable improvement in the health, hygiene and nutrition (HHN) of the program participants. The health component focuses on pregnancy related care including pre- and post-natal care (ANC, PNC), TT vaccination, iron/ vitamins supplementation,



vitamin A supplementation for lactating mothers, and birth preparedness using skilled birth attendants and emergency obstetric care services to ensure safe motherhood practices. This component also includes family planning, and expanded program of immunization (EPI, i.e. vaccinations for children less than 12 months of age), diarrhea prevention and management and referral systems for complex and emergency cases. The hygienic component includes sanitation, safe water supply in terms of microbial and arsenic contamination. It addresses hygienic behavior and environment by promoting behavioral changes, especially sanitation related behavior at the household and community level, through a multi-channel community-led process to reduce and prevent disease transmission. The nutrition component supports the sustainable improvement of food utilization at the household level and overall health. It provides supplementary feeding for pregnant and lactating mothers with children under two years of age, growth monitoring (GM) and promotion by counseling, behavioral change and communication (BCC) activities to promote behavioral and systemic changes in care practices, exclusive breast feeding (EBF), and weaning food for the children more than six months of age. Special emphasis is given to the HHN related behavior and practices of women and children in order to address the most vulnerable section of the population. This is a comprehensive intervention set that has a multi-tiered delivery strategy.

The delivery of these interventions depends upon complex vertical linkages between headquarters and the field as well as horizontal linkages between SHOUHARDO staff and government services. Health, hygiene, and nutrition have highly technical content, which is provided through these linkages. Thus, at the field level, the principal delivery person is the Community Health Volunteer (CHV). The CHV is selected from the village/slum, usually by the VDC/SDC, and is selected for reasons of experience, preparedness, or willingness and availability, as the MTR team was able to ascertain. The CHVs tend to be very young and with little formal preparation, although important exceptions were observed. The CHVs undergo a four-day training in which they receive 20 core messages as well as orientation in conducting courtyard sessions and individual visits for GMP, birth preparedness, identification and selection of new participants for updating the list of participants for MCHN ration, etc. These messages focus on BCC and cover the range of nutrition, health, and hygiene issues. SHOUHARDO frontline staff are also trained in HHN, and they are tasked with monitoring and backstopping the CHVs.

The horizontal linkages are designed to create opportunities to access the information and the services which government and other non-governmental groups provide, particularly the health complexes at the union and upazila levels. In theory, government services provide pre-natal care, post-natal care, vaccines, diarrhea prevention and treatment, family planning orientation, and emergency services for difficult pregnancies and the management of severely malnourished children. It is the goal of SO2 to make these services systematically available to the SHOUHARDO participants. Vertical linkages are with other non-governmental agencies working in the program region, such as the USAID-funded NGO service delivery program (NSDP), Helen Keller International, UNICEF, and others.

### 4.3.1 Progress toward Goals and Effectiveness

During site visits to the communities, it was evident to the MTR team that the most visible components of the SO2 are the distribution of maternal and child health and nutrition (MCHN) rations, the courtyard sessions and related message delivery, and the sanitation and hygiene.<sup>3</sup>

**MCHN Ration:** The supplementary feeding intervention targets lactating and pregnant women and provides a monthly ration of wheat (12 kg), pulses (0.5 kg), and soybean oil (1.5 kg), which provides approximately 1900 Kcal energy per household per day. As supplementary feeding, the MCHN ration is designed to supply and fulfill a woman's extra requirement during pregnancy and lactation. It is also designed to fulfill the energy/protein requirement of the children from six months to two years of age in order to promote proper growth (the additional requirement is: 550 Kcal for lactation; 350 Kcal for pregnancy; the recommended daily energy requirement: for <1 years children is 820 Kcal, and for 1-3 years 1360 Kcal ).\*

For example, in Bangladesh, the average family size is 5. According to the Bangladesh Bureau of Statistics (BBS)\*\* , the total dietary energy consumption in 2000 was 2240 Kcal/person/day. Assuming a five member family consists of one couple with a lactating mother, one child under 2 years, and a mother in law and father in law:

The energy intake of four adult member	2240Kcal X 4	=	8960 Kcal
Energy requirement of 1-3 years children	1360 X 1	=	1360 Kcal
Excess requirement for lactating	550 X 1	=	550 Kcal
<hr/>			
Total energy intake by household of five member family		=	10870 Kcal
Energy given through MCHN ration		=	1899 Kcal
<hr/>			
The household should be food secure in a manner to provide		=	8981 Kcal

If a household already has food equivalent to approximately 9000 Kcal energy per day, then the distributed ration could be considered as supplementary food. Otherwise, that supplied ration would be utilized to fill up the existing food gap of HH. So, the gradual achievement of the sustainable reduction of chronic and transitory food insecurity of the HHs targeted by SO1 would be to reduce the existing food gap/ complement to the MCHN ration.

It was observed in the field that the MCHN ration uplifted/empowered the pregnant and lactating women within family and also in the community. Simultaneously, it carries a message to the participants and surroundings that pregnant and lactating women needs extra foods/supplementary food for the adequate growth of the fetus to give birth to a healthy child with normal weight.

<sup>3</sup> In the DAP and the internal reporting system, the early child development centers are listed under this SO2; however, the MTR team has included it in the empowerment (SO3) analysis.

This intervention is supported by the commodity distribution team at the regional and warehouse level. The food monitor prepares a beneficiary list with the assistance of the VDC/SDC committee and the CHV. The distribution occurs openly on a predetermined day at one of the local food distribution points. A program implementation committee (PIC) made up of community members oversees the weighing of portions and the distribution. A food monitor is also present and periodically monitors if the intended person is actually consuming the supplementary food. As of May 2007 80,000 lactating mothers and 23,000 pregnant women have received these rations.

***Knowledge promotion:*** MCHN is not only the transfer of food but is also a range of other activities that includes knowledge promotion, growth monitoring, caring practices, etc. Currently knowledge is being transferred to the pregnant and lactating women and their husbands during food distribution, during growth monitoring and during different meetings and sessions. The courtyard sessions were actively implemented and HHN messages disseminated using visual materials prepared at headquarters. The CHVs conduct these sessions with groups of around 20 women per batch and hold 2 sessions per batch per month. There appears to be active participation. These courtyard sessions cover pregnancy care, food and nutrition during pregnancy, birth preparedness, safe delivery, good mothering practices such as exclusive breastfeeding up to six months, proper foods at weaning, nutritional value of different foods, EPI, diarrhea prevention and treatment, acute respiratory infection, family planning, safe water and hygienic practices. The internal reports though May 2007 assert that 106,000 mothers have adopted safe practices (70% of goal), which appears to be determined through indicators which track whether behavioral change has actually occurred, including the adoption of hand washing practices, ANC and PNC, exclusive breastfeeding, EPI coverage, and vitamin A intake.

For knowledge promotion, training is a continuing process for the NGO workers at different levels and the volunteers in village and slums. There are 2052 CHVs. Training of the CHVs, the LEBs (UP and Pourashava) and LSPs is being rolled out slowly by the National Institute of Local Government (NILG) and the Bangladesh Rural Development Training Institute (BRDTI).

Traditional birth attendant (TBA) training has been suspended in the hope that the program can arrange Skilled Birth Attendants (SBA) training for women or girls with a class ten education. In reality, though, almost all deliveries are being attended by TBAs in the remote areas of Bangladesh. It is therefore recommended that a short training of TBAs be arranged on what not to do during delivery; diet and care before and after delivery; neonatal care, identification of obstetric and neonatal emergencies; and when and where to refer women for different obstetric and neonatal emergencies. Interested CHVs can be trained as SBAs for this purpose, where women for SBA training cannot be found.

Knowledge and practice of a healthy diet for pregnant and lactating mothers requires more attention and the knowledge of CHVs is not adequate. More information on this

subject should be provided to CHVs during refresher training, and afterwards monitored by the FFs.

***Growth monitoring:*** A related and most vital component to the supplementary feeding is the growth monitoring of mothers and children receiving rations, as GM is an important impact indicator of the effective utilization of supplementary feeding. It also provides an assessment of the percentage reduction of stunting, wasting and underweight among children of 6-24 months of age and the percentage reduction of chronic energy deficiency (CED) among mothers with children between 0-24 months of age. GM was being introduced at the time of the MTR so it is too early to assess its effectiveness. The program does have baseline information on the participants, but in the opinion of the MTR team the growth monitoring system should have preceded the distribution of supplementary rations so that any deficiency in the operational process/system could be taken care of immediately.

***Sanitation:*** The sanitation component of SO2 has both a behavioral dimension (using latrines, hand-washing behavior) and an infrastructural dimension (the construction of latrines, sanitation drains in slums, and deep tube wells for safe water). One such intervention is to create community-wide awareness on sanitation, resulting in action to achieve community-led total sanitation (CLTS). At this point, 68,000 families are using latrines (65% of expected at this point in the program), and 22% of the communities have achieved CLTS. The program is ahead of schedule with regard to assuring community access to arsenic-free water, but the number of sewage drainage schemes is behind schedule (46%).

***Caring Practice:*** For pregnant and lactating women, ANC, safe delivery, PNC and emergency obstetric care (EOC) services are still very much needed. These services are not available in most of the remote villages and as noted, deliveries are mostly conducted by local TBAs. In only a few villages ‘satellite clinics’ are attended by the family welfare visitor (FWV) or trained nurses for ANC and PNC. Comprehensive EOC services are sometimes not available at some of the district hospitals and not available at most of the upazilas, due to non-availability of trained doctor on gynecology-obstetrics or on anesthesiology. For this reason, the EOC patients are referred to district level or Medical College Hospitals for Comprehensive EOC services. This requires a good amount of funds for referral and management of EOC cases. Some VDCs have already started or plan to start savings funds specifically for medical emergencies, and the program should encourage others to do the same. Loan funds can be arranged from these savings groups for referral and management of EOCs by the formation of a Referral Linkage Committee. This would be complemented by the training in obstetric and neonatal emergencies for TBAs and SBAs suggested above.

From the site visits, it appears that the delivery of messages and distribution of rations has been the most successful output of SO2. The horizontal linkages component does not yet seem to have expanded access to MCH care services at union and upazila health complexes. According to the report of “Health Facility Mapping” 99% of the villages/slum were linked with an EPI center and 90% with satellite clinics. However,

the MTR found that EPI coverage was consistent with report, but in the case of satellite clinics, the existing situation in slums and remote areas was poor. One oft-cited problem is that the upazila and union services complexes are poorly staffed and medical personnel are often absent. This is an endemic problem in remote areas of Bangladesh where a posting to some upazilas is seen as professional exile. The MTR team could find little evidence from the field of increased access to and use of these health and nutrition resources. The program should undertake advocacy efforts at the local and central level to promote the posting of doctors and FWVs at upazila and union level, and for establishing satellite clinics at village level. A Civil Surgeon at district level and Upazila Health and Family Planning Officers (UHFPO) at upazila level should be contacted for posting, training and other MCH activities.

The overall strategy used in SO 2 was found to be appropriate. In terms of gender, the interventions are targeted primarily to women, with some more inclusive community efforts such as CLTS. The interest and involvement of men were observed in instances such as meetings where UP and VDC members emphasized the need for better emergency obstetric care, related transportation problems, and the VDCs' own contingency funds for such emergencies. Given the available data and the observations of the MTR team, the following issues are germane to SO2:

- ***Significant variability in the quality of the CHV:*** There is a high level of inconsistency in the quality of the community volunteers. The MTR team encountered some who could not even state which types of food provide appropriate nutrition, while others had a very sophisticated understanding of HHN issues. The frontline staff do not have more expertise or training than the volunteers and cannot provide the appropriate backstopping. The primary training for CHVs was completed in March 2007 and refresher training is planned for November 2007. During the refresher training, the program should review whether the initial selection and/or training needs revision, and assess the performance of volunteers with a view towards additional training or replacement, as appropriate.
- ***Better HHN technical support is needed at frontline and at the region:*** The regional offices do not have a HHN focal person, despite the complexity of the activities (growth monitoring, for example). Only two highly trained staff are posted at the headquarters level, and they cannot be expected to cover all trainings and follow-up.
- ***The process of accessing provider services is not clear:*** It was not obvious from the field observations who is actually responsible to generate and mobilize the horizontal linkages with union and upazila health providers or with other NGOs and agencies that offer health services. The CHVs are not prepared to perform this role and the field facilitators do not have the time to do so.
- ***The composition of the ration lacks iodine:*** The target areas of the SHOUHARDO program are noted for the incidence of iodine deficiency, which

ranges between 60-87% of women of reproductive age (14-45 years). Iodine deficiency is associated with a number of negative outcomes (still birth, miscarriage, poor physical development, impaired mental function of child) in lactating and pregnant women. The ration lacks iodine or iodized salt, and FFP resources cannot provide this type of commodity.

**Reason for Iodine:** *The prevailing major public health problems related to malnutrition includes protein energy malnutrition especially, CED, iron deficiency anemia (IDA), iodine deficiency disorders (IDD) and vitamin A deficiency (VAD). The MCHN ration supplies approximately 1900 Kcal energy per day as well as, protein through peas, essential fatty acid through oils and other nutrients as a supplement to household consumption. Government health programs include pregnancy related care (iron /folic acid supplementation) and Vitamin A supplementation.*

*In Bangladesh iodized salt is the only source of iodine due to the depleted soil content. Though Government has a universal salt iodization program, according to the recent evaluation report only 4-5% of salts are adequately iodized at the industrial level. Simultaneously, the most recent survey identified the areas included in the program as IDD pockets ( i.e. high incidence of iodine deficiency. The absence of iodine in the daily diet can adversely affect the proper utilization of nutrients consumed as food during pregnancy and lactation by limiting the biosynthesis of the thyroid hormone, which has an important role in growth and maturation of almost all organ systems, especially brain development and bone growth. Therefore, the scientific evidences strongly suggest that the absence of adequate iodine might inhibit the optimum impact of supplementary feeding for the proper growth of the fetus ( i.e., the pregnancy outcome).*

- ***There is little assurance that the targeted women actually consume the supplementary rations:*** Despite the efforts of the food monitors, there is little guarantee that the supplementary rations are actually consumed by the targeted individuals rather than by all household members. The MTR team was informed that in the most critically food insecure households or during times of crisis (e.g. flood/*monga*), the extra food might be shared among all household members.
- ***Lack of government health services at upazila and district level:*** Although every upazila has a health center and posts for health care providers, in fact many of the posts are not filled. Consequently, such interventions as facilities mapping and referrals cannot achieve their desired impact of expanding government health care for the poor. This is a widespread problem in the isolated regions, and it is especially precarious for pregnant and new mothers (PNC/ANC) who have no medical access in the community. TBAs handle most of the deliveries in communities, but do not have adequate skills to deal with problem pregnancies and difficult births.
- ***Transportation facilities and cost to Referral hospitals:*** The referral hospitals include: the upazila health complex (UHC), District Hospitals (DH), and Maternal and Child Welfare Clinic (MCWC). Others health facilities include the upazila and district level NGO clinics, Medical College hospitals, Missionary hospitals

and different welfare hospitals. According to the Health Facility Mapping report, a total of 93 UHC, 19 DH, 17 MCWC and 23 other referral hospitals are available in the four regions of the SHOUHARDO program area. However, the reported transport cost up to UHC/District level hospital does not coincide with the reality in most remote areas. The MTR team was informed that the rent of a boat from a char to the UHC in the north char region is TK1200, which is beyond the capacity of an extremely poor person.

- ***Availability of adequate health service providers at the local level and quality of health services:*** The availability of health service providers at the local level, especially the remote villages, is abysmal. There are only a few villages where there are ‘Satellite Clinics’ attended by the FWVs or trained nurses for ANC and PNC. For deliveries the women are dependent on the home delivery services of TBAs. Comprehensive EOC services, although available at the district level hospitals, are still not available at most of the upazilas due to the absence of trained doctors in gynecology and obstetrics and anesthesiology. The management of third degree malnutrition needs a specialized hospital with a special nutrition care unit, such as that of the ICDDR, B, and Chinnamukul at Kurigram.

It is very difficult to overcome such constraints as non-availability of health services by trained providers. Some actions have been suggested above, including advocacy for adequate staffing, training of TBAs and SBAs for proper referrals of emergencies to the district and upazila levels, encouragement of VDCs to set up emergency loan funds from the savings groups. The program can advocate with government providers at upazila level to arrange satellite clinics at local level, and ask district authorities to take care of the referred emergency cases.

- ***Considering other general caring practices including ‘weaning food’ for the child over 6 months:*** The program has considered the general caring practices and ‘weaning food’ for the child over 6 months as it is very much related to the general health of the children. For this purpose the MCHN ration provides an amount beyond the strict requirements of the mother as it recognizes that some of these rations will be shared when there is not adequate food in the household. As noted, the extent to which the mother is able to consume what she needs is related to the availability of food in the household and the effectiveness of the HHN messages that emphasize the special nutritional requirements for a healthy mother and newborn.
- ***Effectiveness of unrolling of 20 core messages on HHN:*** The CHVs are provided training on 20 core messages which have several branches and sub-branches. Rolling out these 20 core messages on HHN by the CHVs after this short training of three days is sometimes difficult, as the CHVs are mostly from limited educational and poor socio-economic backgrounds. They should be followed up with support and plans for refresher training should address topics they find

challenging, such as the demonstration of types of healthy food and their examples.

- ***Enrollment of new mothers and exit of graduated mothers:*** It appears that the new mothers are being enrolled and graduated mothers are exiting on a regular basis in the register of CHVs. As CHVs are from the local community, they are well informed about the local population and enrollment is up to the mark in most the places. Since it is associated with MCHN ration, the exit of mothers when their children reach 2 years of age also appears to be regular, though in some locations it could be improved through stronger links between TBAs who provide delivery care and CHVs.

As noted, the SO 2 strategy is appropriate but could be more effective if the CHVs are provided the type of training given SBAs for safe delivery services, as women with class ten education are not available or do not volunteer themselves for the profession of SBAs in many of the remote villages.

#### **4.3.2 Recommendations for SO2**

- (1) The immediate and most critical recommendation is to assure the quality of the HHN messages that is being presented to mothers and other SO2 participant. The program should immediately initiate an assessment of the performance and level of understanding of the CHVs (and FFs on that issue) to ensure a minimum quality standard for understanding and delivery of the messages.
- (2) The MTR team recommends follow-up training and better supervision of the CHVs in order to meet minimal performance standards. For those CHVs with experience and preparation, the program should consider more advanced training opportunities (and higher salaries) and a broader set of responsibilities, including working with the TBAs and promoting horizontal linkages.
- (3) Inclusion of new participants for the impact assessment through growth monitoring needs base line data. So, growth monitoring should include new participants at the beginning of the identification of pregnancy by CHVs before giving MCHN ration. As a result, weight measured before receiving ration would be considered as baseline information to assess the effectiveness of the interventions.
- (4) It is absolutely critical to reinforce the technical staffing for this component. There should be an HHN assistant technical coordinator in each region and more technical backstopping from Program Support Officers (PSOs) posted at the hub-office level. The program lacks technical capacity to assure the quality of the field activities and to promote the horizontal linkages important to the success of this SO. Food managers are often overseeing the HHN activities because of the emphasis on commodities.



- (5) The mapping of the health facilities providing different categories of Maternal Health, Child Health and Family Planning (FP) services in the “Health Facility Mapping in Four Regions of SHOUHARDO program of CARE Bangladesh” should be utilized for referral linkages. The mapping should be updated regularly for availability of the trained service providers in those facilities, communication, costing and time of availability of service. The existing health facility mapping was not seen in the field to be responsive for provisioning services to the target groups, i.e., poor and very poor. In order to strengthen the referral linkages with the GOB health service facilities an effective representation of VDC/SDCs into a UHCC committee would proactively create demand and explore the possibilities at the local level to take necessary initiatives for improvement of prevailing situation. Every effort should be there to maintain good liaison with the referral facilities. The report on “Health Facility Mapping” also recommended alternative options which may includes private-public partnership, community health insurance like group savings, and collaboration with other agencies working on public health issues
- (6) SHOUHARDO and partner NGOs should support efforts to make the available outreach H & FP facilities more functional and responsive to the poor community through appropriate advocacy initiatives at local, district and national level.
- (7) SHOUHARDO can work with WHO and GOB to promote demand-side financing to support the timely use of EOC services for the extreme poor. They can also make an effective linkage with the NGOs working on health/sanitation/safe water at the local level.

#### 4.4 SO3 Intervention Set

The third SO is designed to achieve the enhanced empowerment of 400,000 girls and women in the SHOUHARDO targeted communities.<sup>4</sup> The implementation strategy of this SO is based on an intra-institutional collaboration with the Education Unit (EU) in CARE/Bangladesh. SHOUHARDO has an agreement with the EU to develop the empowerment model used in the SO and to train the staff needed to implement it in the field. This model consists of a set of activities that focus on early childhood



education, adult informal literacy, consciousness-building and dialogue around a set of important social issues, group planning, the participation of female participants in the formal educational structure (i.e. PTAs), and the integration of poor women into the educational and political committees of the UP/Pourashava. As part of the rights-based

<sup>4</sup> The MTR team focused on this component solely in terms of SO and its intent. There are broader gender issues with regard to SHOUHARDO which are integrated into the discussion points under each SO.

emphasis of CARE/Bangladesh, this SO is completely consistent with the SHOUHARDO message and promotes a type of social change that is truly transformational.

The EU model is based on group formation around a set of concrete set of objectives and the participants are all female—girls and women including children. The theoretical model is comprehensive and seeks to empower through education and learning (in the wide sense). Thus, in each community, groups are formed for different age categories and ever more sophisticated learning opportunities are developed for each category. The Early Child Care for Development center (ECCD) is a pre-school that introduces a learning process and flow of information traditionally denied of girls at these ages (0-6 years). The MTR team feels, consistent with findings from around the developing world that exposure to a flow of public information is one of the most powerful and sustainable experiences that women can use to effect social change. Through April 2007, 860 of these ECCDs had been established, more than half the program goal, and above 25,000 girls and boys were enrolled in programs that train basic social skills and prepare children for formal schooling. The MTR team observed a significant number of these centers and found them to be one of the most successful of the SHOUHARDO SO3 interventions. The ultimate purpose of the ECCD is to propel young girls and boys into a formal educational system. Unfortunately, the program does not monitor this robust indicator, but the MTR team found several cases where the girls from the ECCD had in fact begun classes 1-2 in formal public schools or the BRAC schools.

### **Quality of ECCD Program**

The interventions of SO3 focus on early childhood education, rights awareness, and linkages with formal institutions (e.g. schools) and advocacy networks. These interventions are integrated under a single approach that has been adopted from the Education Unit of CARE. As this approach has been adapted, young girls are exposed to a learning environment at a very early age (4-5 years) in an ECCD center and from this experience then pass into the formal educational system for years 1-2. The schools have formed School Management Committees (SMC) with participants drawn from the poor and extreme poor. The program continues to promote education and awareness through SETUP, an activity in which parents become involved in their children's formal education through class four and form Parent-Teachers Associations (PTAs) with active agendas. These along with EKATA interventions are implemented through ECCD teachers, EKATA volunteers, and front-line staff (one-third females) called “change agents” who monitor the empowerment activities.

There is no person exclusively dedicated to this SO3 at the regional office, and there is no specific technical support for this at the hub-office level. Thus, the program support officers (and PNGO technical staff) are responsible for the empowerment activities (SO3) as well as the demands of the other SOs.

The progress in the SO3 interventions maintains a different pace when compared with the input-based activities. Since the SO3 interventions are almost exclusively software and are embedded in the activities of the EKATA groups and the ECCDs, it is to be expected

that most of these goals will be achieved through the dynamics of the groups themselves. In all villages of the regions, the EKATA groups and ECCDs have not been fully established. The most difficult goal to meet here is the presence of the poor children in the formal schooling system.

The ECCD is administered through a SMC (for this indicator, goal achieved), and only few PNGO frontline staff have been trained in management skills; however, only five percent of the SMCs had received any problem analysis training. With regard to the PTA formation, only half of the goal has been achieved, but less than ten percent have received any training. It is possible that in the formal UP or NGO schools, there is resistance to such integration of the poor parents in the PTAs.

The MTR team was uniformly impressed with the success of the ECCD interventions. The two most compelling features of this approach are the early childhood access to learning and social play and the open (and lively) discussion of sensitive issues. In the more remote areas, it is unlikely that the poorest of children would have opportunities for pre-school learning and interaction in a formal public setting.

The weakest area of this SO is in the linkages to the formal school system and more broadly to the public structures that protect rights and entitlements of the poor. Community-level empowerment efforts have been successful, and at the central and district level SHOUHARDO has formed linkages with rights-based and legal aid organizations. However, more work needs to be done, as the MTR team found little evidence of a systematic advocacy effort in this area, despite the fact that staff have received advocacy training and orientation.

### **The SETUP component**

The SETUP component of the EU model accompanies girls into the formal education system and seeks to establish a systematic role for parents (especially mothers) in the management of formal education from classes I through VI. The indicator to measure the success of this component is the number of poor mothers who actually participate in the education of their daughters through the establishment and involvement in PTAs and SMCs. The internal reporting documents demonstrate that this intervention is on a very slow achievement pace. Work with the PTAs and SMCs has been very limited, and the MTR team is not quite sure who assumes the responsibility for this intervention, and it appears that the poor do not yet have input into the formal education of their children as they themselves are illiterate.

The most visible component of this implementation model is the group of women at adolescent and adult ages—the Empowerment, Knowledge and Transformative Action (EKATA) groups that meet regularly to discuss major social issues, such as dowry, early marriage, divorce, violence against women, etc., and to make local action plans. These groups, based on the site visits, are highly dynamic and have provided an important platform for female participation in the affairs of community. So far, 592 EKATA groups are functional, and the overall goal will be achieved in the next year. Over 2100 adolescent females have attended sessions on life skills and reproductive health. Most of

these groups have discussed issues of social import, engaged in a problem-solving process, and have formulated plans of action.

As stated above, the empowerment SO is supported through the EU unit at CARE headquarters. There are four technical staff at headquarters who have trained a core cadre of 55 training staff. These staffs are posted in the regions where they train and monitor the community “change agents,” also called EKATA volunteers. The MTR team applauds this approach and believes that all the volunteer delivery staff should be called “change agents”, a term SHOUHARDO curiously has avoided.

The SO3 focus is entirely on software, and it appears to be one of the most successful in the SHOUHARDO program. The MTR team found very impressive results in the EKATA groups and in the early childhood development groups. While the overall impacts on women’s status are yet to be manifest, it is clear that the EKATA model achieved three major successes:

- (1) It has involved pre-school age children in a learning process (not dissimilar to the famous Head-Start program in the US), which provides a steady flow of information into communities where information is a scarce good;
- (2) It has established a recognized and accepted forum for women to meet and to express themselves in a public role; and
- (3) It has provided a community “incubator” for the development and nurturing of female leadership. Many parts of Bangladesh, including the SHOUHARDO area of operation, continue to be highly conservative and to dissuade women (even using coercion) from assuming a public role. In the communities visited by the MTR team, however, it was evident that EKATA has created an opportunity for local female leadership to emerge and to flourish.

As with SO2, the empowerment component is most successful at the community level in communicating information and raising awareness. The program has been successful in promoting women’s rights in all regions, as reported by the participants themselves. EKATA group members related how they have taken action to prevent specific cases of early marriage and convince people not to demand dowry. They have interceded in cases of domestic violence and gone en masse to know gambling sites to discourage men from the practice. It has enjoyed less success in integrating the PEP groups into wider formal institutions, such as PTAs and schools. The MTR team could not find clear evidence that the poor were participating more effectively in the formal education of their children or even gaining greater access to formal education of the UP. Participation of the poor on SMCs seems extremely scarce and, if realized, would be an unambiguous positive indicator of change. Also, the attempt to integrate these women’s groups into wider national advocacy networks has not yielded much success (only two examples are reported).

The relative lack of progress in creating the important horizontal linkages with formal institutions, such as schools, LEBs, and national networks, is indicative, in the opinion of the MTR team, of the excessive burden placed on field staff. With 55 training staff servicing more than 500 EKATA groups, there is little time and opportunity to cultivate these important relationships and to disseminate the SHOUHARDO message among the relevant policy-makers and stakeholders. Simply stated, the linkages aspect of the SO3 job description has been under-emphasized in the field.

#### **4.4.1 Incorporating Gender in Risk Reduction and Disaster Preparedness**

Women and girls are more vulnerable to the effects of natural disaster as a result of their lower economic and social status within the household and their responsibilities for children and other family members. Migration for employment, particularly in the char and hoar regions, keeps men away from home for most of the year while women are confined to isolated communities; in some north char communities the men are at home only from June to September. Many women are left alone to cope with disaster preparations and repairs with few resources, and there are few men to assist with evacuation in the face of major storms. Women have different perceptions of risk than men, and focus first on the need to protect and provide for children. The disaster-related death of a husband often leaves women and children without an income; low (or no) educational achievement, poor skills, low social status and discrimination means many widows do not have the skills to earn a livelihood.

SHOUHARDO has begun to address gender issues in disaster management. The program has increased female representation on UDMC/PDMCs, though the knowledge and participation of female members varies widely, from active involvement to little understanding of member roles and responsibilities. The program also ensures that 50% of ward DVs are female and thus more aware of and able to talk to women about preparing for disasters. Gender needs are highlighted through the inclusion of pregnant and lactating women, female-headed households and elderly women among the most vulnerable during disasters, though specific contingency plans to assist them have not yet been developed by communities and the UDMC has little ability to reach isolated rural communities. Communities give priority to sheltering women, children, elderly and handicapped in disasters; for example, they are priority in entering the cyclone shelters in the coastal areas and the flood shelters in the char region while the men seek shelter in less secure buildings. Standard relief supplies include items specific to the needs of women. Program-supported celebrations of international and national women's day events include information for women on how to interpret early warning messages such as signal flags for cyclones, and actions to take to protect the household from natural and 'social' disasters.

**Recommendation:** The UDMC/PDMCs should be reviewed to ensure that female members are not token appointees but include interested and informed women who are given support and encouragement to contribute to committee activities.

Awareness-raising activities about risk reduction and disaster prevention at the community level should focus on the vulnerability of women. Risk mapping exercises

should specifically look at the needs of women, their current coping strategies, and support discussion among VDCs of measures they can take to better support the safety and security of women during the monsoon, especially during times of flood and flash flood when evacuation boats may be unavailable.

#### 4.4.2 Recommendations for SO3

- (1) The MTR strongly recommends that the collaboration with the Education Unit in the context of SO3 should be renewed and supported. It is a clear success of the program in achieving the goal of social transformation.
- (2) In order to reinforce the effort to create linkages with the UP power structure (and beyond) and education standing committees, it is recommended that the EKATA groups seek to create local alliances by working with the non-poor community members on specific education and empowerment goals and to involve the UP female member in the activities of EKATA. This is an important opportunity for the UP female members to establish their broader agendas and define their constituencies, and they could provide a valuable link to the UP chair and to UP decision-making.
- (3) There is not an adequate amount of cross-communication and interaction among the SO-based groups in a given community. The team feels that the savings groups, the EKATA groups, the HHN groups, and the VDC/SDC are all separate community entities, and there is little awareness of how these groups all represent the same mission of change. The MTR strongly recommends that the staff promote strategies of interaction among the groups. For example, the natural leaders identified in the EKATA groups should work with the VDC/SDC on common problem-solving projects, the CAP should be discussed at a mothers' group meeting, and so forth. Such integration will help foment a common development vision in the community.

#### 4.5 SO4 Intervention Set



The goal of SO4 is that '*Targeted communities and institutions are better able to prepare for, mitigate and respond to natural disasters*'. Its specific purpose is to ensure adequate warning of the natural disasters that continually undermine the livelihoods of the SHOUHARDO communities and to put in place plans and structures to help mitigate their impact. The intervention set builds on the approach used under the previous DAP, the IFSP, and other efforts of CARE to support the Government of Bangladesh's

Flood Action Plan of 1989, though in a manner more specifically targeted to the poor and the extreme poor. It relies on training in early warning and disaster preparedness and response for UDMC and Pourashava Disaster Management Committees (PDMC), the

training of large cadres of volunteers at the ward and community level, and at the community level, the identification and reinforcement of coping strategies as well as skills in disaster preparedness. The intent is to include community groups and the private sector, with specific disaster roles for government, PNGOs, and other organizations within a Union or Pourashava.

The program also intends to work towards developing local early warning systems, to identify and disseminate location-specific coping mechanisms for disaster preparedness, and to develop skills among a range of actors for coordinated and systematic response to emergencies. It continues its support to and activities with the Network for Information, Response and Preparedness Activities on Disaster (NIRAPAD), established under the IFSP. Finally, SHOUHARDO has provision in the annual budget to respond to emergencies.

The implementation of SO4 has lagged behind other activities. The SO suffered from a gap in leadership at the CARE Bangladesh headquarters level, which was addressed by the hiring of a new Humanitarian Assistance Coordinator in May 2007. Weak leadership left staff uncertain how to integrate HA activities with other program activities, and Humanitarian Assistance (HA) activities received a lower priority during the acceleration phase of SHOUHARDO.

#### ***Progress indicators against program goals***

The IPTT shows achievement of SO4 activities in the re-formation of UDMCs and in the number of infrastructure projects implemented. Other accomplishments against planned activities, especially for the October 2006 to March 2007 period, were significantly below target, particularly in comparison to other SOs. As of March 2007, 493 of 510 targeted UDMCs and 17 urban PDMCs had been re-formed in all program areas. This included the “foundation work” of identifying UDMC members, as many committees are inactive and members did not know they are on the committee. Training of the UDMCs had commenced in all regions in April 2007 and was slated for completion by June. Of the re-formed UDMCs, 131 UDMCs had completed training in disaster response and preparedness, against a plan to reach 510 UDMCs. The number of community disaster volunteers trained for disaster preparedness was 2,373 cumulatively by March 2007 against a target of 9,559. The number of contingency plans developed and meeting set criteria was 139 of 510. The program exceeded its target in the infrastructure category; of 500 planned infrastructure projects, 1,618 were complete by March 2007. Initial training for other activities planned under the revised Detailed Implementation Plan for FY 07, including ward and Union-level risk and resource mapping and disaster preparedness contingency plans were getting underway. All regions held awareness-raising activities around National Disaster Preparedness Day with participation by Union Parishad and Pourashava members, CARE and PNGO staff, disaster volunteers, and communities.

The program is piloting some promising early warning systems (EWS) with the Asian Disaster Preparedness Centre (ADPC) and various subcontractors in flood forecasting.

Its objective is to transmit early warning information to the community level in a manner that is understandable and highly contextualized into meaningful forecasts of water levels and other threats at a local level. Lessons learned through the Office of Foreign Disaster Assistance (OFDA) experience were integrated into the SHOUHARDO program in order to sustain the progress made by this initiative. Given the limited early warning information in all the areas visited, SHOUHARDO should continue to support efforts to fund the improvement of early warning systems at the community level.

SHOUHARDO also makes yearly budgetary provision for an emergency fund and central and regional emergency stockpiles of relief materials. This allows the program to respond rapidly to sudden-onset disasters. The approach has proven effective by eliminating many procurement and administrative delays, as demonstrated by the response to the January 2007 cold wave and the landslides and flooding in the coastal region in May-June.

The program has initiated an Urban Disaster Management (UDM) component in partnership with the ADPC. The purpose of UDM is to enhance the technical capacity of staff to recognize and respond to the hazards, vulnerabilities and capacities of urban communities in disaster preparedness. The UDM initiative conducted two Training-of-Trainers in community-based disaster risk management (CBDRM) for program staff from the four regional offices. In addition, 685 volunteers from 137 slums in the four regions were trained in CBDRM.

Earthquakes are a major hazard for urban areas in most of the program areas. SHOUHARDO is preparing staff and partners to mitigate the impact of earthquakes through Training in Earthquake Vulnerability Reduction for Cities. The sessions oriented staff from SHOUHARDO, the City Corporation and municipalities to earthquake and tsunami hazards and vulnerability in the country. Participants, including urban engineers, addressed structural and non-structural ways to mitigate the hazards, including appropriate land use and housing solutions. One outcome of the UDM is that the program is negotiating with the Chittagong City Corporation to pilot a retrofit of several buildings with the assistance of ADPC to make them more resistant to earth movements. Earthquake vulnerability reduction skills also addressed the preparation of action plans for risk reduction at the community and household level. In FY 08, the program will conduct an assessment in Cox's Bazar and Kurigram of the municipalities' capacity on disaster preparedness. Following the assessment, the UDM will undertake capacity building work for officials in vulnerability analysis, risk and resource mapping and contingency planning. The UDM work with municipalities also has the objective of strengthening CARE and NIRAPAD's capacity to conduct similar activities in other at-risk municipalities. SHOUHARDO's public awareness-raising events highlight specific urban hazards of earthquakes, landslide and fire.

SHOUHARDO also continues to support the strengthening of the NIRAPAD, a coordinating body for disaster preparedness and response. NIRAPAD's role is to raise awareness, disseminate best practices, identify gaps in policies and practices and advocate for change in government policies. Its capacity is dependent on its members'



ability to contribute, and the network is attempting to attract long-term funding for its operations.

### ***A Comprehensive Approach to Risk Management***

The perennial natural disasters that affect the poor and extreme poor in the SHOUHARDO target areas include cyclones, floods, erosion, landslides, tornados, high winds, cold waves, and less frequently, earthquakes and drought. They bring about loss of life, destruction of assets, destroy crops and seed stores, damage homes, bring on distress sales of livestock and temporary displacement, and force the poor to borrow money at high interest rates in order to recover. Even in less severe weather, seasonal rains cause months of disruption, leave vulnerable households unable to pursue normal livelihood activities, hampers mobility and the ability to access emergency medical services (especially for pregnant women), causes men to migrate for work, isolates women in rural communities, and cuts off households from markets, information, and local government services. People commonly cope with the losses and hardships of natural disasters through borrowing, migration, and distress sales of livestock and other assets.

In the disaster-prone environment of Bangladesh, successful program strategies must simultaneously reduce food and livelihood insecurity and build the resilience of households and communities to withstand shocks. This is the essence of the development relief approach, which seeks to reinforce livelihood strategies and shift the focus of vulnerable households from dependency on disaster relief to risk reduction (including preparedness) and risk mitigation. Risk reduction (reducing the likelihood that a shock will occur) and risk mitigation (minimizing the impacts of a shock once it occurs) are key to strengthening the resilience of vulnerable households to natural disasters. Risk reduction involves ‘hardware’ activities such as infrastructure to prevent flooding, erosion, or loss of life, as well as ‘software’ such as shared coping strategies and household and community contingency plans for safeguarding assets and reducing losses. Risk mitigation relies on resources built before disasters but accessible after shocks, such as savings, social connections, and ability to access government services for recovery.<sup>5</sup>

A development relief approach does not treat disaster preparedness as an isolated activity but as a way of thinking that is integrated into all activities. The assets of the poor and extreme poor can easily be wiped out by one disaster, so that adopting a risk reduction approach serves as a form of insurance for participants and helps achieve program impact.

An effective early warning, preparedness and response system requires participation at all levels: UDMCs, Pourashava DMCs, PNGO partners, Disaster Volunteers at community level, communities and households. Training should bring together representatives from the various bodies so that all can acquire a common understanding of actions and obligations of each party in risk reduction, early warning, and disaster response. This needs to be coupled with effective early warning systems and advocacy at the policy level

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<sup>5</sup> TANGO International, 2004.

to ensure that basic legislation and administrative authority exist to support local level interventions.

It is important to note that SHOUHARDO plans to undertake many of the activities suggested below in the coming year. The program has an ambitious schedule of projected activities with more community-level interventions, including risk and resource mapping, contingency planning and training in community-based disaster management are planned for FY 2008.

#### **4.5.1 Issues and recommendations for SO4**

##### **Focus on community-based disaster prevention and preparedness**

Poor and extremely poor communities and households suffer the greatest total losses during disasters and have the most to gain from improved risk reduction and preparedness strategies. The isolation and vulnerability of SHOUHARDO communities underscores the importance of enhancing their risk reduction and coping capacities to deal with natural disaster. Given the limited outreach and resources of government, communities will continue to rely on their own resources for disaster preparedness in the near future. It is these capacities that SHOUHARDO should strengthen by making community-based capacity building to reduce risk and vulnerability at the household level the main emphasis of SO4. Community-based disaster preparedness and disaster management allows communities to anticipate needs and respond rapidly, making effective use of local resources and extending protection to the most vulnerable. This supports the empowerment approach of SHOUHARDO while still drawing on the capacities and responsibilities of government to provide early warning and response. Better-prepared and more resilient communities will support their VDC/SDCs to put pressure on locally elected officials and UDMC/PDMCs to make the relief process a transparent one.

A retrospective study of the IFSP Flood Proofing Program was done in 2002, two years after the close of activities. The study found that Local Project Societies (LPS) trained in disaster mitigation activities remained active. When flooding threatened the community the LPS organized community meetings and arranged for people in unprotected houses to be sheltered in homes with raised plinth levels. The committees took charge of logistical needs including boat transport, the collection of safe water, and the protection of tube wells. The LPS also helped to coordinate post-flood relief efforts and sought community input to them.<sup>6</sup>

Indications of the benefits from a community-based disaster management approach are already evident in the response of the SHOUHARDO communities during the June landslides in Chittagong region. The SDCs referred to the list of the most vulnerable persons in the community, and were able to identify who needed relief assistance, based on their participatory community problem identification and mapping exercises done under the program. One active and well-organized SDC in Bhairab municipality (a

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<sup>6</sup> TANGO International, 2002.

CARE direct delivery area), Kishoregonj District, received disaster preparedness training and has prepared a contingency plan for floods. The plan divides the flood into three stages, before, during and after inundation, and included measures to ensure health and safety at each stage.

**Recommendations:** SO4 should focus on building skills among community members and support awareness-building in planning to prevent and cope with the greatest impacts of natural disaster. This includes raising people’s awareness of their own vulnerability and ability to protect their lives and their assets from natural disasters and reducing the ‘relief mentality’ found in some communities, notably in the char region. Specifically,

- 1) Training in risk reduction and disaster preparedness should begin immediately, as people’s assets are already threatened by the onset of the monsoon season. Training should be based on an identification of coping strategies, gaps and ways to strengthen these strategies, as well as the specific needs of communities. Each VDC/SDC should have a contingency plan for disasters that covers preparedness and response as part of their community action plan (CAP). This plan should include the community’s strategy for protecting lives and assets, who will do what, when and how both for preparedness and response. This would allow for awareness-based training tailored to local needs. It is noted that the program plans to undertake community-level risk and resource mapping, which will be important in raising community awareness and confidence in its capacities to reduce the impact of disasters.
- 2) A community-based system would be strengthened by the inclusion of an awareness-raising and training program in schools and with civil society organizations. If SHOUHARDO has funding available for more comprehensive activities, it should add these components.
- 3) Effective community response also depends on extensive and rapid early warning systems. SHOUHARDO is piloting some promising EWS with the ADPC and various subcontractors. Given the limited early warning information in all the areas visited, SHOUHARDO should continue to support efforts to fund the improvement of early warning systems at the community level.

#### **Integration of Humanitarian Assistance in all other program activities**

An effective disaster reduction program is focused on risk reduction and encompasses activities in disaster planning and preparedness, mitigation, relief, and recovery. Community-driven HA activities in SHOUHARDO to date have focused largely on infrastructure improvements. Infrastructure is an essential component of risk reduction, and can provide the stability and security a community needs as well as reducing annual expenditures that can be used for gains in livelihood activities. The construction of mound protection walls and submerged embankment walls in the haor region are

important examples of this. The infrastructure and other support given by SHOUHARDO provide an incentive to locally elected officials to facilitate the program.

One of SHOUHARDO's strengths is that it supports a complete package that addresses livelihoods, health, education, and rights in a community-led format. However, by focusing on the UDMC instead of sharing and strengthening community preparedness and coping strategies, the program may have missed an opportunity to help vulnerable households protect their newly acquired assets during the 2007 monsoon season. In the worst case, households unable to protect these assets will revert to their traditional strategy of selling goats, poultry and other livestock at very low prices, undercutting the objective of improving their livelihoods. The integration of risk reduction and disaster awareness is critical to protecting the gains made in other areas.

Where communities have the resources and skill to undertake infrastructure activities, 'soft' inputs have proven to be sufficient. An example of integrated risk reduction and livelihoods is the crop protection embankment constructed by the people of Keorjore in the haor region after crop loss due to flood inundation was identified as a major problem and prioritized in the CAP. The use of indigenous technology and labor to construct protection walls from brick supplied by the program is another example.

Communities and households indicated that they have coping strategies for disaster preparedness, including storing food, fuel and fodder, strengthening house structures, identifying safe places to take shelter; hiding money, jewelry and other assets in safe places. However, people often do not share those strategies with other households and are not organized at a community level to prepare for disasters and safeguard community resources.

An Operational Plan for SO4 activities was issued to Regional Offices, but unlike other sectors, humanitarian assistance activities do not have comprehensive operational guidelines. The proposed activities under SO4 for FY 08 would benefit from more detailed guidance. The integration of a HA approach should be somewhat easier now that the intensive, hardware-oriented phase of SHOUHARDO is over and there will be more overall emphasis on software activities.

**Recommendations:** As SHOUHARDO helps improve livelihood security, it is important to work with communities to identify and improve traditional coping strategies to protect new assets:

- 1) Introduce a comprehensive community-based risk reduction strategy to maximize the benefits of infrastructure components by linking closely to software activities. This can include using the events of infrastructure construction and maintenance to reinforce messages around planning for natural disasters.
- 2) Rather than treat HA as a separate intervention, risk reduction and disaster preparedness needs to be holistically embedded in all SHOUHARDO activities. For example:

- a. SHOUHARDO staff and VDC/SDCs can identify traditional household coping strategies, disseminate and improve upon them and organize a community-level responses to protect major assets
- b. EKATA members can plan for the specific needs of women and children during natural disasters and advocate that the VDC make provision for evacuating highly vulnerable individuals
- c. CHN volunteers can raise awareness about putting aside food, water and other essentials before flood season, and motivate communities to ensure their tube wells are flood-proofed
- d. IGA members can plan ahead for the protection of newly acquired assets.
- e. Savings groups can make encourage putting aside emergency cash to help meet needs during flood season.
- f. Support to livestock recipients should include contingency planning exercises for shelter or relocation in the event of a natural disaster.
- g. VDCs and EKATA groups can raise awareness among men who migrate during the monsoon season about measures to reduce the vulnerability of women and children during their absence.

### **Sustainability**

The IFSP made a considerable investment in training unions, upazilas, zilas, and ward volunteers, but there has been no systematic assessment of the sustainability of the interventions. There is anecdotal evidence from staff that some UDMCs trained under the IFSP still function, though at a reduced level, but that commitment often falls off and many ceased to be active. One UP office visited by the mid-term review team had a disaster contingency plan developed under the IFSP but it had not been updated to reflect changes in the community. UDMC/PDMC members who were trained in disaster management before SHOUHARDO reported that they were familiar with what to do but lacked equipment for early warning and response.

Much of the HA model for strengthening the capacity of the government response in early warning and response rests on official bodies that have no resources for early warning of remote communities and few resources for relief. Union Parishads and Pourashavas do not have a budget for early warning or disaster response. The UDMC/PDMC is a largely relief-oriented organization whose outreach is severely limited and whose membership changes frequently due to transfers of government personnel. One UP Chairman estimated that it takes four days to provide relief assistance: one day to receive the information about an affected community, two days to assess the damage, and one day to get assistance to the affected households. Politics often influence who receives relief goods. Many communities are not aware of, nor have they been exposed to UDMCs. Disaster Volunteers have been identified but many have not been trained, so that the ties of Ward Volunteers to the UDMC and community Disaster Volunteers to the VDC/SDC do not appear strong at this point.

UDMC members learn new skills in the training and are highly motivated afterwards. A recently trained UDMC in Khankhanabad Union in Chittagong District related how it met, discussed an action plan and decided to announce a Signal 7 storm warning in April 2007. UDMC members report that coordination meetings at Upazila level have improved response and collaboration by NGOs who previously acted independently. Their motivation probably helps keep the UP Chairman engaged as well; although UP Chairmen attended the disaster management training, many did not stay the entire time; in Rangpur the level of participation of UP Chairmen was around 50%<sup>7</sup>. There are no official government sanctions if a UP Chairman fails to respond to disaster warnings in his or her district. NIRAPAD had identified this as a gap in the system and is approaching the government to make it a requirement that UPs and Pourashavas response to local disasters.

The sustainability of community efforts and the incorporation of comprehensive disaster management policies at the national level are two major challenges to the long-term effectiveness of any community based disaster management program.<sup>8</sup> The approach places the greatest emphasis on enhancing the ability of households to protect themselves; however, in order to maintain enthusiasm and commitment over the long-term, communities need to be tied into local institutions connected to a broader, supportive policy environment. SHOUHARDO must engage as wide a range of stakeholders as possible, and is attempting to do this with its engagement at the community and local government levels and through the advocacy efforts of NIRAPAD.

#### **Recommendations:**

- 1) SHOUHARDO should conduct a post-project analysis of the effectiveness of prior efforts to train and equip UDMC/PDMCs and communities, with a view to learning weak points, building on strengths, and consulting stakeholders to define realistic roles for government intervention and find viable ways to improve their sustainability.
- 2) UPs and Pourashavas do not have specific budgets for disaster response, and usually draw funds for relief from other budget categories. UDMC/PDMCs are using equipment provided by the program. SHOUHARDO should advocate with local government to set aside a provisional budget for early warning and response to help ensure that UDMC/PDMCs are able to sustain their activities.
- 3) Ideally, identification of UDMC members would begin soon after elections and before the committees were formed. Though it is recognized that this timing is not always feasible, in the future this would help prevent the Union Parishad Chairmen from appointing political supporters who are more apt to distribute relief resources on the basis of political gain and help ensure a more balanced committee.

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<sup>7</sup> LIFD, undated.

<sup>8</sup> UNCRD, 2003.

### **Staff capacity to deliver HA interventions**

SO4 is supported by two staff at CBHQ. There is no Regional Technical person or focal point for Humanitarian Assistance in Regional Offices, nor is there a specific person within the PNGOs responsible for humanitarian assistance. As a result, HA activities, which are more software-oriented, tend to be overlooked when pressure to realize the hardware activities is high. Communities that struggle daily with their livelihoods also often give disaster preparedness a lower priority than livelihood inputs.

Technical partners provided the training in disaster preparedness using a module developed by NIRAPAD. This has limited the input and involvement of staff in disaster preparedness activities and may reduce their awareness of risk reduction concepts. Coupled with a lack of clear guidance from CARE Bangladesh headquarters on how to implement SO 4 activities, many staff were unsure how to reinforce the HA component so that it did not extend beyond UDMC and some volunteer training. There is no specific strategy for engaging the technical partners to provide feedback.

The draft work plan for SO4 in FY 2008 places much more emphasis on community-based disaster preparedness and response training that will considerably strengthen the SO4 component. However, it continues to rely heavily on outsourcing training and technical support, and on volunteers due to a lack of staff. SHOUHARDO staff (both CARE and PNGO staff) have been too overloaded during the acceleration phase to conduct TOT and training sessions.

### **Recommendations:**

- 1) A Regional Technical person for HA should be placed in each regional office. This staff would be responsible for working with other staff to integrate risk reduction and disaster preparedness into livelihood activities and assist stakeholders to plan for a coordinated disaster response.
- 2) Each partner NGO should designate a focal person to be given in-depth training in risk reduction and community-based disaster preparedness. Additional staff, combined with more comprehensive training of frontline staff in risk reduction and disaster preparedness would support implementation of a comprehensive approach to reducing the impact of disaster on lives and assets in these highly risk-prone communities.

### **Training**

Many of the CARE and PNGO staff are not experienced in risk reduction concepts or in disaster preparedness and response, and many staff are unsure how to integrate these concepts into livelihood activities. Many staff are also unlikely to be familiar with issues of human rights in disaster situations. Frontline staff that works closely with VDCs and SDCs should in particular be familiar with these issues to help sensitize the VDCs/SDCs to actions they can take to help ensure people's rights are respected. While frontline staff

have received a short training on disaster management, they need to be trained in more depth on how to incorporate an overall risk reduction approach into program activities, as well as in more specific disaster preparedness and response techniques. Many government counterparts with whom SHOUHARDO work closely are equally unfamiliar with concepts of risk reduction, disaster preparedness and response, and how they can reduce the impact of disasters on the livelihoods of the PEP. Where appropriate, key government counterparts should be included in training for frontline staff.

There is evidence that Disaster Volunteers have difficulty retaining the information received in training and need refresher training to maintain their effectiveness. Refresher training and an analysis of lessons learned to date should also be planned, especially given the heavy reliance on volunteers to carry out much of the community-based preparedness plan. Refresher training, along with opportunities to share experiences and improve future performance, should be scheduled for UDMC/PDMCs and technical and frontline staff from CARE and partner NGOs.

The disaster management training module was developed by NIRAPAD and administered by Institutional Development Services Limited (IDSL), a technical partner. The module is of good quality but would benefit from more region-specific input so that future trainings could be better tailored to the specific threats of the area. The module does address rights in disaster situations, which could be expanded and emphasized for a stronger tie-in to the ‘message of SHOUHARDO.’ As SO 4’s recruitment and training activities intensify during the next phase of the program, the conclusion of the acceleration period for livelihood inputs should allow more time to integrate risk reduction, disaster preparedness, rights and livelihoods messages.

### **Recommendations:**

- 1) Provide comprehensive training to all frontline PNGO and CARE staff in risk reduction, disaster preparedness and response in order to facilitate increased awareness and efforts at the community level to reduce the impact of natural disasters. Training should include identification of local coping strategies, gender issues, and risk reduction measures related to specific livelihood activities. Local government counterparts in the SHOUHARDO program should be included in the training as appropriate.
- 2) Refresher training should be provided at six-month intervals to help retain learning and ensure effectiveness. Complementary activities that supplement learning and maintain motivation can be done in formal and informal ways:
  - a. Periodic meetings of trainees to allow them to share experiences can be held as an informal, low cost way of helping them to retain learning from training and helps keep them motivated.
  - b. Form linkages among UDMCs, PNGO staff, VDCs, volunteers
  - c. Bring communities and PNGOs, UPs together for planning
  - d. Regular, informal contact to keep UDMCs and volunteers motivated



- e. Incorporate theatre, drills, simulations
- f. Training on rights should specifically address human rights in disaster situations, especially those areas where VDCs and SDCs are entitled to services from government, and how to take action to ensure those services are delivered to the most affected. This includes the right to physical security, shelter, government's obligation to help provide basic necessities to survival, and the right of women and other vulnerable persons to protection from violence.
- g. More pre-testing of training modules by region could be done, allowing the modules to be more closely tailored to the specific disaster-related needs of each region.

### **Monitoring**

The program does not presently monitor its success in reducing risks through infrastructure. It should periodically examine whether the infrastructure activities support livelihood improvements, and how. In addition, given the large investment in training UDMC/PDMCs in new skills, the program should assess the quality of disaster preparedness and response among UDMCs as a result of their training.

### **Recommendations:**

- 1) Investigate whether communities are maintaining the infrastructure designed to reduce the impact of natural disasters, and their perceptions of its effectiveness.
- 2) Where communities have received training in disaster management, review with stakeholders to determine which parts of training are effective and what needs revision.
- 3) Where UDMCs have undertaken early warning and disaster response, assess their application of methods learned during training, and the scope and impact of their actions on program participants.

### **Contingency Planning for SHOUHARDO**

A comprehensive risk management strategy includes recovery, the longer-term phase following the immediate aftermath of a disaster when people rebuild their lives and assets. CARE/Bangladesh seeks to retain its disaster response capacity and maintains regional contingency plans that are updated every six months. However, given the ambitious plans and pressured timetable of SHOUHARDO, the program is vulnerable to severe disruption in the event of a large-scale natural disaster. Program staff should consider the implications of such a large-scale disruption to the achievement of its goals, and have its own contingency plan for how program goals can be integrated into post-disaster recovery activities, and for actions to get the program back on track after the recovery phase.

SHOUHARDO maintains an emergency stockpile of relief supplies and an emergency fund to allow rapid response to the many smaller scale disasters that occur annually.

These contingencies enable CARE to rapidly mobilize assistance to affected populations, saving lives and alleviating suffering. The emergency fund has been exhausted after the response to the cold wave in the north in January 2007 and the landslides and flooding in the coastal areas in May-June.

#### **Recommendations:**

- 1) SHOUHARDO should have its own ‘recovery strategy’ in case of a large-scale disaster that severely disrupts program interventions. The strategy should cover where, when and how it will resume the livelihood and rights-based activities, and how the program will prioritize regions, communities, and activities in order to resume support to program participants as quickly as possible.
- 2) SHOUHARDO’s emergency fund and material stockpiles should be replenished without delay so that CARE can maintain its emergency response capability for the remainder of the 2007 monsoon season and beyond.

A long-term strategy for humanitarian assistance should be conceptualized within the context of a comprehensive risk management strategy that encompasses measures to identify and reduce risks, disaster preparedness, response (including relief), and mitigation (as well as recovery). SO4 activities will focus on reducing the risk and impact of disasters in the second half of the program, and though ambitious, the planned activities for FY 08 should help accomplish this. It is important that SO4 staff also work with other sectors to better integrate ways to reduce risk into livelihood and awareness-raising activities.

## **4.6 Program Progress toward Goals and Achievement Projections until 2009**

### **4.6.1 Current Progress**

The progress of the SHOUHARDO program was analyzed in terms of the targets for the Indicator Performance Tracking Table (IPTT) indicators (also some PMP indicators) over the last 18 months (October 2005-September 2006, and October 2006-March 2007). The IPTT indicators for all SOs have been covered in the analysis. In understanding the essence of IPTT indicators and analyzing the data, several brainstorming sessions were held with the M&E unit of CARE headquarters; meetings were also held with the focal SO staff at headquarters. Following this process, an attempt was made to estimate the status of target achievement, projection of achievement, and additional time requirement after September 2009 to achieve Life of Activity (LOA) targets by SOs and IPTT indicators. In doing so, the annual target for the year 2007 has been halved due to half-yearly availability of achievement data for that period.

It is important to note at the outset that for some indicators the target wise achievement data were not available at the time of writing, but will be available soon (e.g. EPI coverage, ANC, exclusive breastfeeding, GMP). It is also important to note that for a

program like SHOUHARDO with multiple and multidimensional interventions and activities, it is neither easy to achieve nor easy to identify the targets at the initial, start-up phase. The analysis shows that many of the targets have been achieved and some not. The well-achieved targets include both those that are relatively “easy-to-attain” (soft target) and those which are “not easy-to-attain” (hard target). The group of targets not achieved includes those that will not be easy to achieve if **current rate of growth** (i.e. **current momentum**) in target achievement continues, which implies the need for implementation acceleration over the next two-and-a-half years. In terms of current progress it is also important to note that quantitative achievements are encouraging in the sense that the program implementation has delayed by over one year but a solid stage has been formed which will facilitate the progress in future (detailed discussed in sub-section 4.6.2). In future implementation, therefore, more effort will be required to ensure quality-issues related to the interventions and activities.

As shown in the table in Appendix 1, the SO-wise targets which show high achievement (up to March 2007) are as follows: **(SO1)** Number of groups receiving training in good governance, human rights, leadership development (152%); number of communities aware of different service providers and what they offer (137%); number of savings programs established (687%); number of rural markets developed/upgraded (188%);



**(SO2)** Number of ECDs established and fully functioning (167%); number of PNGOs receiving training in management of ECDs (139%); number of eligible children in targeted areas enrolled in ECD programs (164%); number of infrastructure projects completed (drainage and irrigation) (109%); **(SO3)** Number of REFLECT/EKATA groups formed (344%); number of poor and extreme poor in PTA (141%); number of women’s groups who have developed and implement action plans (225%); **(SO4)** Number of community volunteers trained for disaster preparedness and actively engaged during times of disaster (150%); and number of infrastructure projects completed (261%).

The most prominent IPTT indicators (by SO) that may lag significantly behind targets – if viewed from **current momentum** scenario – are summarized in Appendix 1. These include: **(SO1)** Number of networks and alliances formed between different stakeholders and are operational (34%); number of infrastructure projects completed through community processes of planning and implementation through FFW, LCS, contractors (31%); number of households practicing alternative IGAs (37.4%); **(SO2)** Number of children between 0-24 month enrolled and participating in monthly growth monitoring (1.4%); number of communities with total sanitation (77%); **(SO3)** Number of PTAs receiving training in problem analysis and planning(14.5%); number of women’s groups linked to regional and national women’s groups and NGOs and bodies that raise and deal with issues related to women (40%); **(SO4)** Number of DMC receiving training in disaster response and preparedness (41%); number of contingency plans developed and

meeting set criteria (42.8). However, as will be discussed below, the quantitative time-lag may not hold true because of **non-linearity** in attainment of the above and many other indicators. (For details see the **comment** column in Table 1).

#### 4.6.2 Projected Achievement of Targets

It is possible to project the level of achievement of the LOA targets by the end of the program using the extrapolation method considering the **current momentum**—i.e. the **linear trend**. However, it is not easy to project “how effectively SHOUHARDO will reach its targets and objectives by the end of the program”. While the projection using current momentum is a quantitative numbers exercise, the “efficiency and effectiveness” of SHOUHARDO in reaching those targets is a “qualitative” issue – an issue of delving deep into the relevant strategies and interventions (discussed in the other chapters).

The estimations shown in the last three columns of the table in Appendix 1 provide the essential information for understanding the pace and direction of progress:

- Targeted growth rate to achieve LOA targets by September 2009
- Projected achievement if annual growth rate for 2006-07 **remain the same** (i.e. **linear**) for the rest of the SHOUHARDO period
- Additional time required (i.e. number of years) after 2009 to achieve LOA target **with current growth rate**.

It is important to note that in real life situation the **linear extrapolation** (i.e.; if current momentum holds true) will not hold true for many of the SHOUHARDO interventions, reflected in IPTT indicators. The non-linearity is mainly related to the necessary changes in emphasis on certain activities, lagged-outcome of certain interventions, and mutuality and inter-dependence of inter-activity (inter-intervention) spill-over effects (i.e. progress in one activity will facilitate progress in other interventions). In order to better understand the nature and possible direction of indicators having non-linearity behavior detailed discussions were held with relevant persons at the CARE HQ and at the regional offices; MTR team’s observation of the interventions and associated consequences was also taken in to consideration. At this point, it would be worth conclude that, the likelihood is high that in real life situation the quantitative targets on most IPTT indicators will be achieved; the more emphasis should be devoted to the quality of achievement of some targets (which are indicated in the **comments** column in Table 1).

Regarding the projected achievement of LOA targets and associated issues, Table 1 shows the scale of achievement, status of real (with non-linear assumption) achievability (by 2009) with some **specific comments** on those SOs with programming implications.

**Table 1: Level of Achievement and Projected Achievability by 2009**

Ref.	Indicator	Scale (Achievement)	Achievable by Sept. 2009	Comments: Scenarios with 'linearity' and 'non-linearity' assumptions
<b>SO 1</b>				
IR 1.1.1a	# & % of groups receiving training in good governance, human rights, leadership development, etc.	Good	Yes	
IR 1.2.1a	# of networks and alliances formed between different stakeholders and are operational	Extremely low	Yes and No	With current momentum (i.e; current growth rate) an additional 6 years will be required to achieve LOA target. However, in real life, this LOA target will be achieved in terms of <b>formation</b> of networks and alliances. This will happen mainly due to the following: dialogues have been started with all potential stakeholders (national and local); networks and alliances have been formed; and especial "emphasis design" has been worked out with the Advocacy Unit. Thoughts are needed to the <b>operational</b> part of the formed networks and alliances—especially after the phasing-out. Although the numbers of target networks and alliances is important, more important is the quality of such networks and alliances. Therefore, selectivity is essential in which CARE must be taken so that compromising with quantity do not affect the real/intended outcome – in both short and long-run.
IR 1.2.2b	# & % of community aware of different service providers and what they offer	Good	Yes	-
IR 1.2.3a	# of infrastructure projects completed through community processes of planning and implementation through FFW, LCS, Contractors	Extremely low	No	The most likely achievement of target LOA by 2009 will be around 50%. This is due to the fact that resources will be curtailed for FFW (not for CFW); shifting of these resources to strengthen MCHN; and vigorous support will be made to continue MCHN as one of the prime food security interventions.
IR 1.2.3b	# of person days of employment created during crisis period, while households suffer with food insecurity	Extremely low	No	The LOA target achievement by 2009 will be around 50%. This is mainly because of the fact that FFW will be discontinued in FY 2008; only CFW will continue.
IR 1.3.1c	# & % of households practicing alternative income generating activities	Extremely low	Yes	The LOA target will be achieved because of especial programmatic focus on this in collaboration with the Economic Development Unit (EDU/Care).
IR 1.3.1d	# of savings programs established	Good	Yes	The LOA target will be significantly exceeded. This achievement will happen due to village's over-enthusiastic response in forming savings groups. Initially, it was planned to form one savings group in each village, but villagers

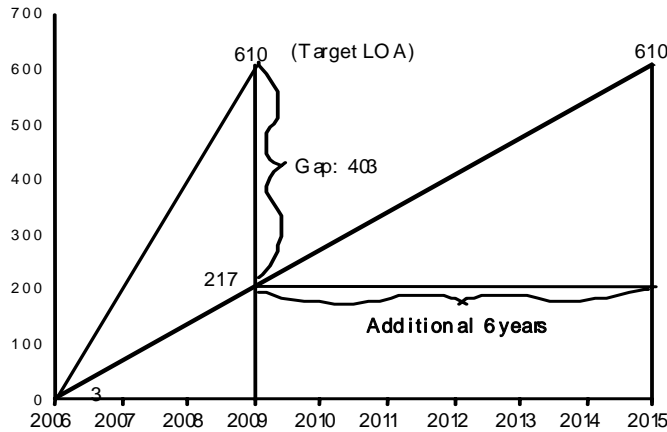
Ref.	Indicator	Scale (Achievement)	Achievable by Sept. 2009	Comments: Scenarios with 'linearity' and 'non-linearity' assumptions
				formed 2-4 savings groups in many villages. While this is a commendable success, thoughts are needed towards improving the quality of savings groups and sustainability of these groups after phasing-out of SHOUHARDO.
IR 1.3.2a	# of rural market developed /upgraded	Good	Yes	-
IR 1.3.2b	# & % of women entrepreneurs engaged in business/enterprise	Good	Yes	Achievement will be more than LOA targets due mainly to the involvement of Economic Development Unit (EDU/Care).
<b>SO 2</b>				
IR 2.1.2a	# of ECDs established and fully functioning (Rural 1000 + Urban 60)	Good	Yes	-
IR 2.1.2f	# & % of PNGOs receiving training in management of ECDs	Good	Yes	-
IR 2.1.2h	# and % of eligible children in targeted areas enrolled in ECD programs	Good	Yes	-
IR 2.1.2i	# and % of children between 0-24 months enrolled and participating in monthly growth monitoring (as per revised target of May07)	Extremely low	Yes	Target for FY07 onward will be achieved. This is mainly due to the fact that the growth monitoring and promotion intervention has started only from March 2007.
IR 2.2.1a	# & % of communities with total sanitation	Low	No	The LOA target will be achieved by about 90%. More emphasis is needed because "total sanitation" is part of MDG, and Government of Bangladesh is committed to that as reflected in the PRSP. More emphasis will be needed in building linkages with the Department of Public Health Engineering (of MLGRD&C) and the Ministry of Health and Family Welfare (MOHFW).
IR 2.2.3a	# of infrastructure projects completed (drainage and irrigation system improvement)	Good	No	LOA target achievement will be around 70% (5000 out of targeted 7038). This will be due to reduced effort of FFW since FY 208.
<b>SO 3</b>				
IR 3.1.1a	Number of REFLECT/EKATA groups formed	Good	Yes	-
IR 3.1.2a	# of PTAs formed (should be: <b># poor and extreme poor included in PTA as member</b> )	Good	Yes	
IR 3.1.2b	# & % of PTAs who raise and deal with	Good	No	Additional 1 year will be required to achieve LOA target with current growth rate

Ref.	Indicator	Scale (Achievement)	Achievable by Sept. 2009	Comments: Scenarios with 'linearity' and 'non-linearity' assumptions
	women and girls educational entitlements			
IR 3.1.2d	# of committees (SMC/SC) receiving training in problem analysis and planning	Moderate	Yes	LOA target will be achieved because all relevant training modules have already been designed, and special efforts have been designed to accomplish the target. But the question will be remain open about effectiveness of this training in raising voice of the poor in SMC/PTA, especially in ensuring that their voices are heard and respected.
IR 3.1.2e	# of parent-teacher associations receiving training in problem analysis -and planning	Extremely low	Yes	With current momentum an additional 10 years time will be required to achieve the LOA target. However, in reality, the LOA target will be achieved by September 2009, because all training facilitators/trainers have already been recruited, trained, equipped, and relevant training modules are also already in place.
IR 3.2.2a	# & % of women groups from REFLECT and EKATA receiving training in problem analysis and planning	Good	Yes	LOA target with current growth rate will be achieved.
IR 3.2.2b	# of women's groups who have developed action plans and implemented these	Good	Yes	-
IR 3.2.3b	# & % of women's group linked to regional and national women's groups and NGOs and bodies that raise and deal with issues related to women	Moderate	Yes	LOA target with current growth rate will not be achieved. However, due to especial emphasis on advocacy interventions this target will be achieved.
<b>SO 4</b>				
IR 4.1.1a	# & % of committees (DMC: rural and urban) receiving training in disaster response and preparedness	Moderate	Yes	Additional 2 years time will be required to achieve LOA target with current growth rate. In real life, target will be achieved by end 2008. This is attributable to the fact that all relevant modules have already been developed, and works have been contracted out to the technical partners.
IR 4.1.1c	# & % # of community volunteers trained for disaster preparedness and actively engaged during times of disaster	Good	Yes	-
IR 4.2.1a	# of contingency plans developed and meeting set criteria	Extremely low	Yes	With current momentum, an additional 6 years will be required to achieve LOA target. However, this will be achieved because of the achievement in IR 4.1.1a.
IR 4.2.2a	# of infrastructure projects completed	Good	Yes	-

The SO-wise projected situations with implications are as follows:

**SO1:** Out of nine selected indicators (for which detailed data are available), achievement is on schedule for five, and projections show that LOA targets on these indicators will be achieved, maintaining the current momentum, during the life of the program. For the two out of other four indicators, although current achievements are extremely low, the LOA targets will also be achieved. For example, as shown in Figure 2, with the **current rate of achievement (current momentum)**, it will take 6 more years after 2009 to achieve the target on indicators “# networks and alliances **formed between different stakeholders and are operational**”. In real life situation, the likelihood is high that in terms of **forming** networks and alliances, the LOA target will be achieved due mainly to the fact that dialogues have already been started with all relevant stakeholders (both national and local); networks and alliances have been formed; and especial programmatic efforts have already been designed to serve the purpose by the Advocacy Unit. However, how much of these networks and alliances will be effective and **operational**, especially after phasing-out, remains an open question (details see in **comment** column of Table 1). There are two indicators, namely “# infrastructure projects completed” (R.1.2.3a) and “# of person days of employment created” (IR 1.2.3b) for which the LOA targets will not be achieved due to resource reduction on FFW and discontinuation of FFW from FY2008 (details see: **comments** columns in Table 1).

Figure 2: Projection for Target Achievement in SO 1  
 Number of networks and alliances formed between different stakeholders and are operational:  
 Additional time required to achieve LOA Target with **current growth rate (current momentum)**

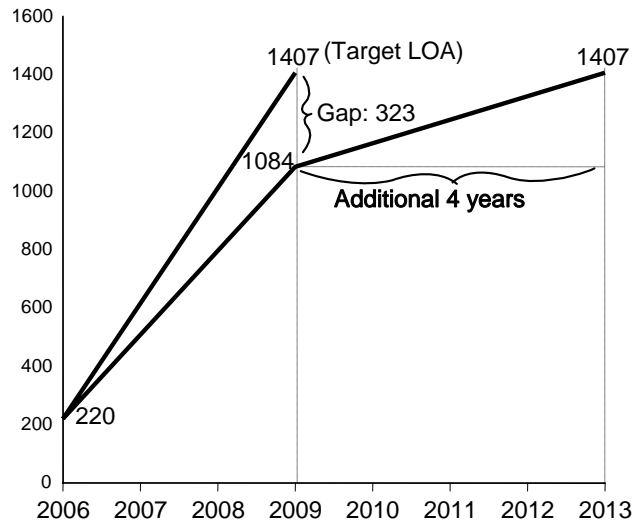


**SO2:** Out of the selected six IPTT indicators, four indicators have made satisfactory progress toward achievement, and the projection shows that LOA targets on these will be achieved by 2009. However, progress on two indicators is either low or extremely low. Out of these two indicators, on one indicator, namely “# and % children between 0-24 months enrolled and participating in monthly growth monitoring” – the LOA target will be achieved due to vigorous start of the related intervention from March 2007. However, on the other low-performing indicator, namely “# and % of communities with total



*sanitation*” – the LOA target will be achieved maximum up to 90%. It is to note that with the current momentum, it will take four more years after 2009 to achieve the target on indicator “# communities with total sanitation”. This implies that the current momentum has to be accelerated through vigorous efforts of the VDCs, UPs, and the Department of Public Health Engineering (DPHE).

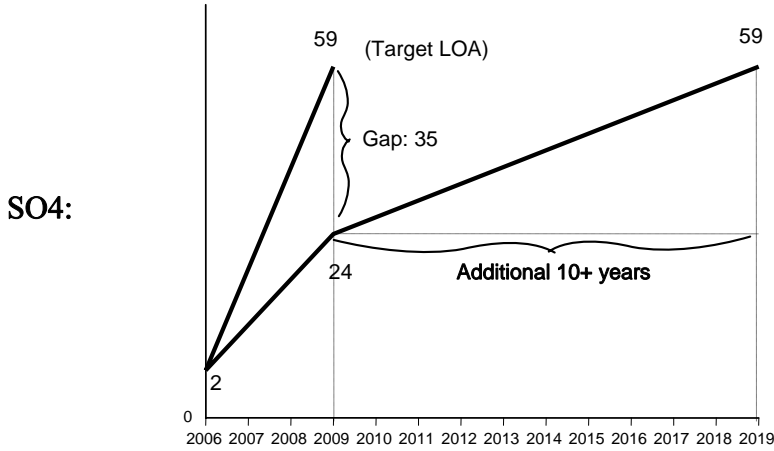
Figure 3: Projections for Target Achievements in SO 2  
 Percent of Communities with total sanitation:  
 Additional time required to achieve LOA target with **current growth rate**



**SO3:** In terms of projected achievement, the overall situation on SO3 is the most encouraging. Out of eight selected IPTT indicators (shown in Table 1) five show ‘good’ progress, two show ‘moderate’, and one shows “extremely low” progress. Although, on 3 indicators, the current progress is not satisfactory, the LOA targets in reality will be achieved due to various reasons including especial efforts from advocacy intervention (unit), already recruitment and training of training facilitators, already designed training modules. Details see in **comment** column in Table 1. However, in order to ensure sustainability of this SO and to further improve upon the related empowerment situation of the poor and extreme poor, it is suggested that: (1) it would be absolutely necessary to make an all-out effort to include poor and extreme poor guardians/parents into the PTA bodies, which is possible either through election or through persuasion using the UPs and/or Upazila Nirbahi Officers (for advocacy and lobbying); (2) it would be necessary to strengthen the VDC/SDCs so that these bodies become recognized as institutionalized representatives of poor people’s collective power; and (3) an enabling environment would need to be created in which the representatives of local civil society and the SMCs become pro-active in including PEP representatives. All these are necessary to ensure not just inclusion of the poor and extreme poor in the SMCs and PTAs, but to ensure that their voices are heard and respected.

Figure 4: Projections for Achievement of SO 3

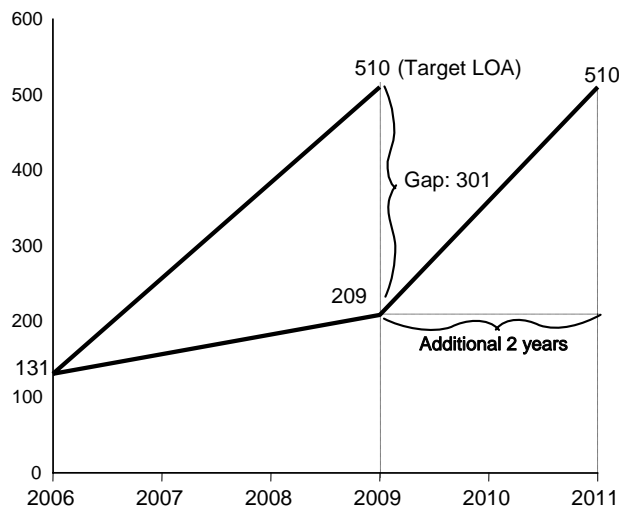
*“Number of women’s groups linked to regional and national women’s groups and bodies that raise and deal with issues related to women” (IR.3.2.3b)*



Out of four selected IPTT indicators, satisfactory progress (good and moderate) was made on three, and projection shows that LOA targets on these will be achieved by 2009 (See Table 1). For the remaining one indicator, with current rate, there is a low possibility of achieving the LOA targets by 2009. However, in real life situation, the LOA target on this indicator *“# contingency plans developed and meeting set criteria”* will be achieved, because of achievement of the target for IR.4.1.1A i.e; *“# of DMCs receiving training in disaster response and preparedness”*.

Figure 5: Projections to Achieve Targets in SO 4

Percent of Communities (DMC) receiving training in disaster response and preparedness:  
 Additional time required to achieve LOA target with **current growth rate (current momentum)**



## 5.0 Program Management

SHOUHARDO is the largest development program in CARE/Bangladesh and the largest Food for Peace Title II program in the world. It is to be expected that a program of this magnitude would entail significant management complexities and demands, particularly given the remoteness of the targeted communities. The major management challenge is to find a balance between implementation goals and strategies that may at times seem at odds with one another. Simultaneously, management must strive toward efficiency, effectiveness, commonality of purpose, flexibility, transparency, and accountability. SHOUHARDO management must assure quality control without sacrificing flexibility and creativity, accountability without concentration of decision-making, and consistency in implementation without ignoring context. In a program this large, management is most effective when it is adaptive—willing to adjust current systems and to create information flows that enable reflection on management practices. It is in this light that the MTR carefully examined the management strategies of the program and identified the issues discussed below.

The MTR team was uniformly impressed with the competence, professionalism, energy, commitment, and dedication of the SHOUHARDO management and staff at all levels—headquarters and regional. It is roundly evident that the management has a consolidated vision for SHOUHARDO that is consistent with the SHOUHARDO message. Equally important for adaptive management, the SHOUHARDO leadership throughout the program area has demonstrated a willingness to adjust strategies and to pursue alternative paths toward the ultimate SHOUHARDO goal set. In this spirit, the MTR seeks to propose a set of management adjustments that would enable the programmatic recommendations—described above—to be implemented.

### 5.1 Staffing

One of the most urgent management issues is the number of staff available to implement the SHOUHARDO program. The staffing issue is complex and has several different dimensions.

- ***Staff overburdened and extended too thinly.*** At all levels of program execution, from headquarters to village, there is an inadequate level of staff. In the case of frontline staff, PNGO and CARE Field Facilitators (FFs) are responsible for program delivery in 4-6 villages. While CARE frontline staff have motorbikes, the PNGO staff must rely on bicycles to get from one village to another. For most FFs, access to all the field sites is itself a challenge. In addition, the frontline staff are responsible for the implementation of all the SOs, so that they must work in agriculture, health and nutrition, sanitation, disaster management, and empowerment. At the hub-offices and regional offices, staff are equally overburdened in terms of both geographical and SO coverage.
- ***Not enough time to develop the SHOUHARDO message.*** With the pressure related to intensifying the “burn rate” during 2006-07, the Field Facilitator time has been concentrated on the coordination of trainings and the distribution of

inputs. It was clear after observations in the field and interviews with FFs that the logistical, operational tasks are overwhelming and leave little time for nurturing the SHOUHARDO message of collective problem-solving and managing a development plan. Instead of being the change agents that the program intended, the field staff have become more like procurement agents and logistical coordinators—a situation that engenders a “relief” impression.

- ***Over-reliance on volunteers for intervention delivery.*** Many of the SO interventions are actually delivered by village-level *volunteers*—the community agriculture volunteers (CAV) and the CHVs.<sup>9</sup> In addition an EKATA change agent is the principal delivery point for the empowerment messages. And it is anticipated that soon village disaster preparedness volunteers will be introduced throughout the program. The volunteers and change agents receive a three-day training after which they are expected to work with the relevant groups of program participants (women, girls, farmers, fishers, etc.). In the case of the CHV, the volunteer has to assimilate 20 “messages” (content areas) in these three days well enough to deliver them effectively to program participants. As expected, there is a great deal of variability in the capacity and thus the competence of the volunteers to be effective communicators and trainers. The volunteers are supported by the FFs, but there is no systematic assessment of volunteer performance or refresher/follow-up training.
- ***Technical support is inadequate at the community level.*** The demonstration of the SHOUHARDO message is built upon successful collective problem-solving at the community level. Yet, the availability of technical support is most lacking precisely at this level. SHOUHARDO classifies its staff functions in terms of the broad categories of program implementation and technical support (and also administrative support). Thus, the regional coordinator oversees the program manager and the technical assistance coordinators who, for their part supervise an “implementation” line and a technical support line on to the community level. Throughout the regions, however, the technical support is understaffed and concentrated at the regional office. In the hub-office (Upazila) level, the PNGOs have a program coordinator (implementation), a support staff responsible for agriculture, monitoring and evaluation, commodities distribution, and accounting. A CARE staff person also sits in each PNGO office as a facilitator. CARE also maintains a PSO at each hub office, whose responsibility is to coordinate program activities and to liaise with the PNGO staff. In many ways, the PSO is the critical bridge between the regional management, including technical support, and the PNGO/CARE staff working in the communities. The volunteers and the Field Facilitators do not have the technical capacity to address issues that might arise with all the SOs, so all technical support must be solicited at the regional level (or above), far away from the community where the problem-solving takes place.

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<sup>9</sup> While called “volunteers,” these staff are actually paid a small salary—around Taka 1200 per month.

- ***Focal expertise is needed at the regional level.*** There is no technical focal person for many of the SOs at the regional level. One agricultural specialist covers three regions; the health and nutrition technical coordinator (SO2) at headquarters is responsible for the vast majority of training of volunteers in all four program regions. The lack of a focal specialist at the regional level slows the flow of technical information between source and field site where it is needed.
- ***Clear division of tasks needed at the community level.*** The MTR team found that the functions of some field staff positions are not clearly discriminated and specifically that there seemed to be some duplication at the field level between CARE Field Facilitators and PNGO frontline staff. In the PNGO regions, the CARE FF is intended to facilitate whereas the PNGO frontline staff is meant to implement. There is also a PNGO supervisor who oversees the field activities. In reality, since the PNGO staff also oversees the volunteers who deliver much of the interventions, the differentiation of duties seems unclear and redundant at the community level. Given the MTR's findings that the entire program is in need of additional staff to reduce the heavy workload and resulting stress that field staff operate under, action to eliminate any unnecessary overlap between the FF and PNGO frontline staff responsibilities is needed. Specific recommendations on additional staff needed, and on the extent of CARE's monitoring role with regard to the PNGO staff is discussed in a following section.
- ***The turnover rate among staff is alarming.*** The turnover rate of staff—CARE and PNGO—is around 25 percent (30 percent in the haor region), which means that one-quarter of the staff are more inexperienced and did not receive the formal two-week orientation. The loss of staff has occurred at all levels and has a gender dimension. The gender imbalance of staff is an issue of concern. The reasons for the lack of staff retention are multiple. Remoteness, difficulty of access to the communities, and lack of adequate living conditions take their toll on field staff; however, other factors such as job-related pressure and stress due to the over-extended workload and salary levels also contribute to staff loss. Many staff, once trained in the program, have been lured away by other more attractive offers in less-demanding places.

### **Recommendations for Staffing**

The MTR team enthusiastically applauds the SHOUHARDO staff—both CARE and PNGO—for dedication and commitment in the face of the many challenges inherent in implementing such a large and complex development program in such remote places. The success of the program is ultimately tied to the quality and the motivation of the staff, which implies that all staff, from headquarters to frontline, share a consistent vision of what SHOUHARDO is seeking to achieve. Every staff member should see his or her role as being an integral, critical part of the wider mission of SHOUHARDO. At the same time, the organization of SHOUHARDO is a network of interrelated support services for the effort that is taking place in local communities and in a vertical government structure. Within this complex network of staff roles, it is necessary to

assure that every member has the chance to succeed at the job. Management must assure that everyone is *enabled* to successfully perform and to be able to recognize success when it occurs. The following recommendations are offered in this spirit of re-establishing a shared staff vision and readjusting the support structures so that all can succeed.

- (1) The SHOUHARDO message should be the central focus that guides all other program interventions; it should be the mantra that any staff member can recite with fervor. Unfortunately, the message has been somewhat lost in the flood of interventions implemented over the last year. It is critical to understand how input distribution—as part of a problem-solving development plan—can contribute to change in community power structures. As a critical, return-to-the-basics recommendation, the MTR team strongly suggests that management initiate an internal staff dialogue (CARE and PNGOs) that reasserts the centrality of the SHOUHARDO message, that defines the relationship of software to hardware (including goats), that assures a shared and unambiguous vision that all staff have internalized.
- (2) The day-to-day tasks of the frontline staff take them away from the core SHOUHARDO mission. The MTR team strongly recommends that the frontline staff be relieved of their logistical and coordination responsibilities so that they can focus on their major task—promoting a problem-solving environment in the communities in which they work. In the flurry of activities aimed at increasing the burn rate, the field staff are forced to be more logistics officer or procurement agent than change agent. It is recommended that the job description for frontline staff be modified to emphasize the community-level problem analysis and needs assessment, the problem-solving process, development planning (modifying the CAP), development activity management skills, and local level monitoring and evaluation. Frontline staff should become akin to advisors to the VDC/SDCs, and they should spend more time in discussion with community members, visiting program participants, collaborating and assisting the village volunteers, coordinating meetings with UP members, and channeling requests for technical support to the appropriate sources. This recommendation implies a re-orientation of the frontline staff in their role as change agents and the shifting of logistical and procurement activities to a higher level, perhaps modifying the job description of the CARE field facilitator or other PNGO support staff.

The programmatic adjustments recommended above will require additional staff, adjustments to the staff structure and changes in the technical skills available in the region. In order to recapture the SHOUHARDO focus on transformational change, it is necessary to add staff that can support this programmatic strategy. It is recommended that SHOUHARDO add staff to make a balance between livelihood inputs and empowerment, or ‘hardware’ and ‘software’ components workable. While the necessity to keep the ‘burn rate’ acceptable will continue to be a reality, additional staff will reduce the unrealistic workload, make staff and interventions more focused and effective, and increase staff retention. Redefining the staff configuration will also help to meet programmatic needs.

- (3) It is recommended that the technical support staff be expanded by assigning focal technical coordinators for all the SOs and for monitoring and evaluation systems (discussed below) at the regional level. Currently there is no region-based technical support in such critical areas such as agriculture, health, empowerment, etc. The MTR team acknowledges that the program design was to access government and private sources of technical assistance; however, regional staff are currently overburdened by the need to coordinate the provisioning of technical support in the diverse program areas. For example, it is difficult to arrange for technical support in health and nutrition or to assess the quality of such assistance, if the staff has no background or expertise in that area.
- (4) The MTR team agrees with regional management that technical support has to be located closer to the frontline where the demand for such support is generated. This is especially true in the regions where participating communities are remote and isolated and travel from one hub-office to another is difficult and time-consuming. This would imply strengthening the technical capacity provided at the program support officer level and perhaps upgrading the position to grade “D” staff category. To operationalize this recommendation, it is suggested that each region carry out an assessment of the demand for technical support at the community level, based on the experience of the past year. The result of this assessment will be a technical staffing plan that is proposed to headquarters. The PNGOs should participate fully in this assessment and the preparation of the staffing plan.
- (5) To reduce the turnover rate and to attract more staff to the remoter areas, it is suggested that additional financial and non-financial incentives be considered. It is recognized that there are limits to what the program can provide financially, and that other organizations providing greater pay and financial incentives will always draw some staff away. However, non-financial incentives are also an essential component of job satisfaction and could be used more broadly. A financial incentive could include a hardship allowance for staff living or working in more remote areas. More efficient transportation where communities are more dispersed (motorbikes rather than bicycles) would serve as another incentive. Non-financial incentives could include more flexibility in allowing field staff to live in less remote locations. While the program’s aim is to post staff in program locations, field staff report that housing is difficult to find and isolation and loneliness is a problem. Another incentive would be to increase skill-building opportunities so staff can perform their jobs more effectively, as would formal recognition for performance-based excellence such as a certificate of appreciation or recognition at staff meetings and other functions. The program could work with regional offices and PNGOs to survey staff about what types of non-financial incentives would provide motivation and how staff would like to be recognized. The recruitment of additional staff, suggested above, will serve to reduce stress and burn-out of existing staff. If staff turnover increases as people see the program end in sight, management might consider instituting a performance-

based ‘staying bonus’ for staff who stay until the program activities are completed. The team recognizes that management has sought to provide incentives for staff in remote areas; however, the midterm review is the appropriate opportunity to re-assess the effectiveness of the current incentive structure. These incentives should be made available to both CARE and PNGO staff.

- (6) The MTR team has looked carefully at the different roles and functions of the staff. The current structure of the organization in most regions—from the community upward—has a group of community volunteers (agriculture, health, EKATA, education) who work in one or two communities. They are coordinated and supervised by a (PNGO) Community Facilitator (CF) who works in 4-6 villages. The CF position is meant to be the primary and regular contact point between the program and the community. This staff is supervised by a cluster PNGO manager (supervisor), but is also “monitored” by a CARE field facilitator located at the Upazila level who covers some 20 villages. The communities also receive assistance from an infrastructure facilitator and a commodities facilitator who have a coverage area of about 20 communities. The cluster PNGO offices report to the district level PNGO office which has a program manager, a commodities officer, infrastructure officer, agricultural officer, training officer, accounting officer, and monitoring and evaluation officer. CARE has its “hub-office” at the district level, which has a program support officer, an accounting officer, an infrastructure officer, and a commodities officer. It seems to the MTR team that the monitoring function of the CARE field facilitator appears redundant, while the need for field level change agents is dire. The MTR team believes that the frontline staff need relief from logistics/procurement activities and reinforcement in change agent activities. This adjustment would assign logistics and procurement to an Upazila or district level staff person and shift the CARE Field Facilitators to a change agent role in those communities where the VDC/SDCs have demonstrated some maturity (according to the assessment results recommended above). In these communities each facilitator/change agent would have 2-3 communities rather than the normal 4-6 communities. The monitoring or quality control would shift to the PNGO program manager office and to the CARE hub-office, which would have staff reinforcements in the technical areas (see Appendix 2 for a recommended organizational chart).



## 5.2 Training



Training has been a key component in the SHOUHARDO intervention set. Most training, with important exceptions (e.g. HHN) has been outsourced on contract to the technical partners. The messages and corresponding modules have been prepared centrally either at CARE headquarters (e.g. the EKATA materials) or at the training institutions such as NILG and NBD, with participatory input from regional offices (e.g., the development of modules) or government counterparts (the NILG initiative). Despite the fact that the training activity is perhaps the most visible one in the SHOUHARDO program, senior management made the conscious decision to not establish a training unit (“cell”), a strategy seen as consistent with the new “facilitation” function of

CARE/Bangladesh. SHOUHARDO staff are primarily training coordinators, in the sense that they identify the participants, organize the logistics, hire the training organization, and specify the content of the training modules.

A seemingly endless number of trainings is offered under SHOUHARDO, including trainings designed for staff preparation (the two-week staff orientation, the training of CHVs, TOTs, etc.), those aimed at behavioral change (EKATA, UP capacity building, etc.), and those intended to develop specific skills (Community Homestead Development (CHD), IGAs, adult literacy, etc.). The MTR team identified the following issues with training in SHOUHARDO:

- ***Too many trainings are not demand-driven.*** Every training requires an enormous amount of staff time, and the range of skill-building trainings appears to be supply-driven from staff side rather than demand-driven from the community as part of a broader problem-solving process. Skill-building training should be identified by the community based a clear understanding of how the training fits into the broader community development plan. Too often, the community selects a training because it is “available” as part of the SHOUHARDO menu of interventions. This issue is related, of course, to the job description of the frontline staff and the pressure to achieve quantitative intervention targets.
- ***Training program management concentrated at headquarters.*** The regional staff expressed a concern that training is too concentrated at the headquarters level. For some capacity-building trainings, the regions are forced to depend upon the availability and schedule of the institutions contracted to provide the training when regional resources are available. Also, the training content is often standardized (“ritualized,” some might say) with the same modules used in each region, even though regional variations would indicate a more context-based content.

- ***The training “fallacy” and lack of follow-up.*** The MTR team perceived that there is little follow-up on the quality or the effectiveness of much of the training. This leads to the fallacy of training, which associates a training episode with a learning process. Particularly in those trainings that are meant to support behavioral change (such as the HHN messages and the UP capacity-building), a one-out training session is unlikely to effect the outcomes desired by the program. Rather it is necessary to look at a given episodic training as a single element in a larger learning process leading toward behavioral change. This issue is aggravated by the nature of contract training, where the training contractor provides the service and goes home with no further responsibility to assess the quality or the impact of the training. The training of the community health volunteers exemplifies the need for follow-up. The amount of information presented in the three-day session is far beyond the ability of many volunteers to assimilate; and, although frontline staff also participate in the training, the lack of post-training follow-up results in a wide amount of variation in the quality of the volunteer work in the field.

### **Recommendations for Training**

Training is a critical component of the SHOUHARDO intervention set, and the MTR team has three recommendations that would shift the emphasis of the training, make it more flexible and regional-specific, and assure a focus on the quality of training as a learning tool.

- (1) The MTR team recommends that the training emphasis be placed on refresher training in the SHOUHARDO message and other “software” components. Over the next two years, the skill-based trainings should not be distributed to program participants as another set of program inputs; rather these trainings should represent a carefully designed community strategy to solve a local problem. The trainings should have impact goals and indicators included in the design. Ideally, the IGA and skill set trainings would be integrated into the Economic Development Unit (EDU) strategy to link IGA activities to regional and national markets. On the other hand, more training—particularly refresher training—is needed in the basic principles of community-driven development and livelihoods systems (including the incorporation of risk reduction approaches). As described above, the MTR team feels that the frontline staff must shift their task distribution away from coordination to “conscientization” (consciousness-building), problem-solving, and closer collaboration with the VDC/SDCs and other community groups. If it is not feasible to “refresher” train the entire frontline staff, the MTR team recommends that the training be limited to those communities where the VDC/SDCs and the UP/Pourashavas are more mature and developed.
- (2) It is critical, from the perspective of the MTR team, that training not be defined as an isolated activity, but rather it should be incorporated into a broader effort to effectuate *learning*. Ultimately this recommendation demands a focus on quality control. Two action items can help achieve this recommended training shift. The first is to institute follow-up refresher courses to reinforce learning in the more critical areas, such as with community volunteers and frontline staff. The second

is to employ more informal learning methods—such as peer-to-peer sharing, field visits, etc.—to complement formal training sessions and reiterate desired messages. In this sense, community facilitators who understand the principles of community development are, in effect, trainers themselves in that they use informal methods to enhance learning and behavioral change. In addition to these action items, it is recommended that the Upazila-level supervisory staff be responsible for assessing the impact of training on learning and the assimilation of training messages.

- (3) The organization of training and the preparation of content should be regionalized to the extent possible, with technical support from headquarters. Where possible, the trainers can be identified and contracted locally for many types of training (perhaps using PNGO capacity where it is developed). To achieve the regionalization of most training, a small training work team will need to be developed at the regional level. This team will have the responsibility for assuring the community-driven demand for training, for locating the appropriate technical resources, for organizing the training, and for evaluating the impact of the training. With this more flexible structure, refresher courses or more informal learning opportunities can be organized in a timely fashion, and the region can respond more readily to training demands originating in the communities. Although trainings are specified activities in the annual budgets, the MTR team recommends that these activities can be modified throughout the year within the budgetary limits of each PNGO.

### 5.3 Partnerships

As a principal feature of its implementation strategy, SHOUHARDO has established partnerships with three types of groups—implementing partners (PNGOs), technical partners who provide technical assistance services, and Government of Bangladesh partners who play a variety of roles in SHOUHARDO. In addition, CARE/Bangladesh has a long-term partnership agreement with five NGOs, four of which are also partners in the SHOUHARDO program.

#### *Implementing Partners*

Implementing partners include 45 local and regional NGOs<sup>10</sup> (at the time of the MTR) who were selected through a rigorous process. The government agency Local Government Engineering Department (LGED) also serves as an implementing partner for large infrastructural projects. Two other selected PNGOs (one in Chittagong region and another in Rangpur region) were subsequently excluded from the program. There was a multi-stage selection process to identify the appropriate set of implementing partners.<sup>11</sup> A total of approximately 650 applicants responded to a call for interest. The applicants were to have goals and objectives similar to those of SHOUHARDO program, working experience in the geographical in area, and diversified programs (e.g. not just micro-

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<sup>10</sup> 15 in Chittagong region, 13 in Kishoregonj region, 7 in Rangpur region and 10 in Tangail region, total 45

<sup>11</sup> *SHOUHARDO Program: Steps for NGO/CBO selection for implementation, revised date May 8 2005 and office memo on June 1, 2005)*

credit). Based on these criteria, a shortlist was identified and then sent to the regions for verification and a “field assessment.” A PNGO assessment checklist was used which included the legal status of the organization, the governance of the organization, policy procedures, financial and administrative procedures, program capacity, and field level operations. Several sources were consulted at this stage, including NGO directors and staff; field visits were made to observe activities; financial and audit reports as well as annual reports and evaluation reports were reviewed; and organizational policies (HR, gender, etc.) were examined. If the NGO applicant had been a partner in any other CARE Bangladesh project, the selection team reviewed their implementation performance, and transparency and financial management. A regional selection committee representing all levels of staff (i.e. from regional coordinator to field facilitators) decided on the final candidates. Even after the preliminary decision, an effort was made to check references with other donors wherever possible about the potential partner NGO’s reputation and abilities.

### ***Technical Partners***

The technical partners include a range of government training institutions, such as the NILG and Palli Karmo Sahayak Foundation (PKSF), national and international level NGOs and issue-based consortia and federations. There are 16 external technical partners, and two internal CARE mission units (Education Unit and Economic Development Unit) are collaborating partners. The purpose of these partnerships is to access organizations with expertise in specialized technical areas in order to provide contracted training for CARE/PNGO staff, community volunteers, VDC/SDCs, LEB members, and others.

The technical partner selection process began with the identification of a list of technical support organizations by SHOUHARDO in the relevant fields. Then SHOUHARDO developed collaborative agreements for each specialized field on either a short or long term basis, depending on the issues.<sup>12</sup> Through this process, SHOUHARDO was able to recruit a range of reputable organizations with expertise in areas relevant to SHOUHARDO activities. Most of the technical partners are involved in training services—usually in one-off assignments rather than long term partnerships.

### ***Government Partners***

SHOUHARDO considers government a critical partner and key to program success. The government partners also indicated that this relationship was equally beneficial to their own pro-poor development initiatives. Interviews with different level government representative confirmed that the partnership with SHOUHARDO enhanced their capacity. There are also 124 formal PACCs at different levels of government (as described above). There are also government institutions acting as technical partners. The NILG coordinates the training of LEB members through four public regional training centres. SHOUHARDO works most closely with the LGD ministry.

### ***NGO Implementing Partners (PNGOs)***

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<sup>12</sup> Office memo dated May 10, 2005, meeting notes on partner selection process May 7-8, 2005

Since so much of SHOUHARDO implementation is carried out by the PNGOs, the MTR team focused much of the analysis on this relationship. SHOUHARDO considers the PNGO relationship to be a significant challenge due to the number and the diversity of partners. The management difficulties associated with the coordination of so many partners are manifest in many areas of program implementation. First, there is the sheer bureaucratic burden. Each PNGO is tasked with preparing annual budgets, which contain both administrative costs (staff, office, etc.) and programmatic costs (trainings, inputs, etc.). It is very difficult to maintain uniform quality across all PNGOs in the budgeting process, even though a single, consistent budget must be ultimately presented to the donor. Second, there is the need to strike a balance between quality control and the decentralization of the decision-making. SHOUHARDO management is rightly concerned that mechanisms of quality control be maintained. It has do so by design in the staffing of the PNGO offices (accounting officer, M&E officer, technical staff, etc.) and in the preparation (centrally) of numerous guidelines and procedures the orient the implementation process from training to food distribution to latrine construction to procurement. Furthermore, SHOUHARDO field facilitators are, in effect, monitors/supervisors of the field implementation process. They are responsible to assure that interventions are implemented the “right way.” On the other hand, SHOUHARDO management wishes to devolve as much of the regional and frontline decision-making as possible to the PNGOs. From the perspective of SHOUHARDO management, the PNGOs prepare and present their annual budgets. Once approved, the PNGOs implement the program in the way they see fit...within the general parameters of the program, of course. They hire their own staff and train them; they carry out their own activities; and they have the flexibility to make adjustments in their goals and activities as long as the budgetary limits are not exceeded.

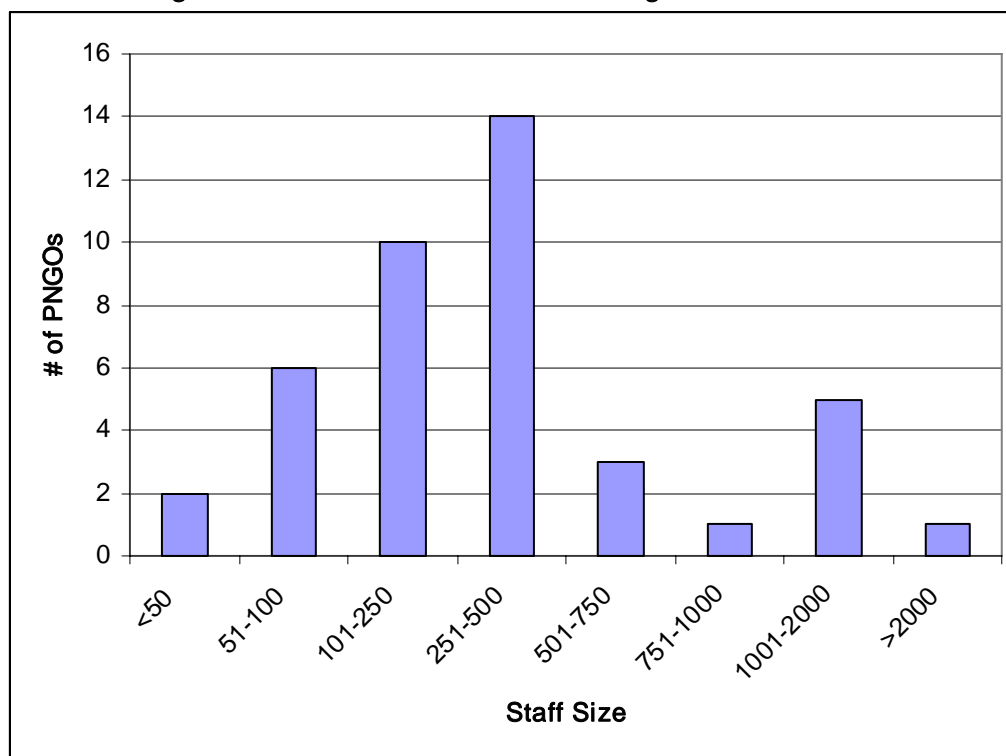
The accelerated burn-rate over the last year put significant pressure on the partnership relationship, and the experience has been a learning process for both the PNGOs and SHOUHARDO management at both regional offices and headquarters. Both partners have had to adapt to one another, and the MTR is an opportune time to examine how the partnership can be enhanced.

The following issues emerged from interviews with PNGO staff and management, SHOUHARDO management, field observations, and the PNGO survey:

- ***There is wide variation in the experience, capacity, and size of the NGO partners.*** The number of PNGO implementers is very large and very diverse. The range of experience and capacity varies significantly, a fact that creates great challenges for CARE management, since the needs of each partner are different. More than half of these organizations have been CARE partners in the past, and all the PNGOs are partners of other fora or organizations. Based on information from the MTR partner survey, Figure 6 presents the variability in staff size of the partner NGOs. Figure 7 shows the proportion of staff that has been hired by the PNGOs to undertake SHOUHARDO activities (i.e.

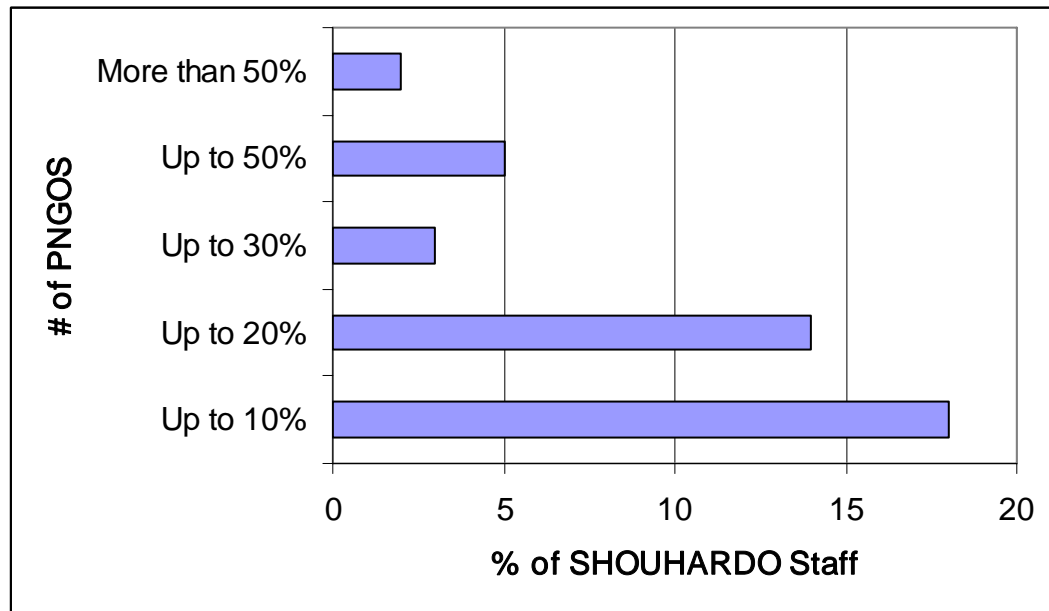
SHOUHARDO-funded staff).<sup>13</sup> Most of the partners are fairly large with staffs of 250-500 members, but eight have less than 100 and six have more than 1000 staff. For 18 partners, the SHOUHARDO staff constitute less than 10 percent of the total staff; while for seven partners, SHOUHARDO staff make up more than 30% of the organization's total. These differences in size also reflect differences in capacity and experience. SHOUHARDO management has sought to maximize uniformity of quality through the establishment of guidelines that direct intervention implementation and through extensive monitoring of the PNGO performance. But these strategies tend to discourage creativity and innovativeness, which some of the PNGOs could contribute. This is a difficult issue that involves critical trade-offs.

**Figure 6: Distribution of PNGO Staff Including SHOUHARDO**



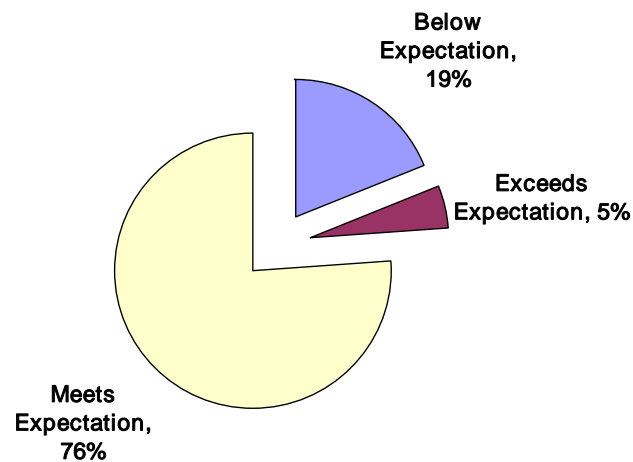
<sup>13</sup> It is important to note that SHOUHARDO does not hire PNGO staff, but provides the resources for the PNGO staff hires who work on SHOUHARDO.

Figure 7: Distribution of PNGO SHOUHARDO Staff in relation to total staff



- CARE's commitment to PNGO capacity-building.** A second issue is CARE's responsibility vis-à-vis their implementing partners. There is a contract based on an MOU that establishes mutual obligations and outputs. In the DAP, however, there is specific mention that CARE will help build the sustainable capacity of the partner organizations so as to assure a sustainability of the program vision once SHOUHARDO is completed. In the partnership survey, the PNGOs offered a self-assessment of their performance in SHOUHARDO. While the majority expressed an opinion that they had met SHOUHARDO expectations, nearly 20 percent felt that they were below expectations (Figure 8). The reasons were attributed in part to lack of capacity but in part due to certain inflexibilities in the relationship with CARE.

Figure 8: Self assessment of PNGO



On the other hand, several PNGOs acknowledged the positive benefits that SHOUHARDO had brought to their organizations, especially with regard to training opportunities and the formulation of more rigorous policies and procedures. There was a general sense that SHOUHARDO was on the right track and that the partnerships were effective and dynamic.

- ***Key partnership challenges from the PNGO perspective.*** The PNGOs identified the most challenging partnership issue to be the one-sided decision-making process and delays that resulted from it. Nearly half the respondents cited this issue. The other partnership challenges included staff turnover, insufficient transportation, and short duration of the SHOUHARDO program relative to the goals. Several respondents mentioned that the objective and goal of SHOUHARDO is not always clear to partners and their staff. The reasons for that appear to be the limited time spent for educating the staff. For example, since the 13-day foundation training at the beginning for PNGO staff, a large number of trained staff has left and been replaced by new staff. Most of these new staff received a brief orientation to the program and have had to learn on the job. For such a complex program as SHOUHARDO, many new field staff suffer from inadequate orientation and a knowledge gap. Also, SHOUHARDO policy procedures (especially with regard to procurement) were also cited as a challenge to PNGOs.
- ***PNGO relationship is more like an “outsourcing” of services than a true partnership.*** Some partners perceive the SHOUHARDO partnership as a type of outsourcing of services arrangement in which true participation and partnership are discouraged. Although CARE has expended a great effort to identify the appropriate partner based on experience and capacity, the partnership in fact does



not take advantage of the resident capacity, but imposes a system from outside to which the partners must adapt. Some partners feel that they have much more to contribute to SHOUHARDO—especially with regard to program strategies and implementation, but are not adequately consulted.

- ***Imbalance between CARE monitoring and technical support.*** As discussed earlier, CARE technical assistance is located at the regional level. There is a small technical team in each of the implementing partner organisations. However, due to the staff shortage, individual staff are forced to provide technical assistance in several areas. Most of the CARE field staff actually perform monitoring roles, and there is an imbalance between the staff needed to provide technical support (not enough) and the staff who are monitoring the partners (too many). This issue was discussed in detail above.
- ***Performance and quality of PNGOs and direct delivery.*** Based on field observations, no systematic differences between the quality of PNGO and DD (Direct Delivery) staff were identified. Most DD staff had the advantage of being on the job longer and better established in respective workplaces. A good portion of PNGO staff had actually worked for CARE projects in the past and had been trained in the CARE “environment.” and are familiar with the program. The variability in performance of field staff appeared consistent across the two modes of operation.
- ***Improving the CARE/PNGO partnership.*** Partnerships are often about perceptions, and there is a certain discrepancy in how CARE management and PNGO management understand the relationship. CARE wishes to assure the quality control in the delivery of interventions, but would like to devolve as much decision-making as possible to the PNGO partner. On the other hand, some PNGO partners perceive the relationship as one-sided, and they don’t feel the ownership in SHOUHARDO. CARE feels the need to monitor extensively; the PNGOs wish to have more independence and flexibility. The result is a sense, on the part of the MTR team, that there is overlap in responsibility and some confusion as to roles in the field. Such differences in perception are often overcome in organizations through open and frequent communication.

### **Recommendations for Partnerships**

- (1) The MTR team strongly recommends a capacity review of the 46 PNGOs—to be carried out at the regional level in cooperation with PNGO management—to determine where strengths and weaknesses lie. CARE could apply its current tool used in PNGO assessment—OCAT (Organisational Capacity Assessment Tools) to assess current management and administration, program service development, accounts and finance, human resource, relationship with other stakeholders, levels of expertise, and understanding of the SHOUHARDO message. This would not be an evaluation exercise, but rather an effort to identify where unused expertise can be mobilized and where more training might be needed. The areas of review

would include financial management, monitoring and evaluation, training, technical expertise, experience in disaster management, and so forth. This exercise should help build the foundation for better utilization of PNGO expertise and experience.

- (2) The MTR suggests that CARE institute a regional level coordination work group comprised of SHOUHARDO regional staff with implementing partners and, perhaps, government partners (e.g. LGED). This work group would meet quarterly *not* to review progress, but to address a problem-solving agenda made up of programmatic and management issues (e.g. devolving of decision-making, procurement procedures, training resources, the SHOUHARDO message, quality control, etc.). In addition to that, this forum should create an opportunity for the sharing of learning and experiences across partner organisations. These work groups would have representatives from all staff levels and at some point in time could invite VDC/SDC representatives from the more successful and mature committees. The major output of this coordination work group would be to provide a problem-solving forum with open lines of communication, where stronger partnership relations could be developed. This will provide an unique opportunity in the area of strengthening a “learning culture”<sup>14</sup> which is one of the key focuses for CARE’s long range strategic plan for 2007-2011. These forums will work towards the sustainability of the learning from SHOUHARDO and will provide regional platforms for future development initiatives for CARE. This group should have representation at the district level PACC.
- (3) The MTR team feels strongly that manner of the issues regarding PNGO partnerships could be resolved through an increase in effective communication. Currently, the forms of communication at the regional office are limited to a discussion of target progress, implementation details, logistics, budgeting, and other operational issues. There is little opportunity for regional and PNGO staff (of different levels) to sit together and discuss the philosophy of the program, quality control, implementation options, staff training needs, and more efficient and effective forms of sharing implementation responsibilities. The current meetings have more of a monitoring or reporting agenda. A regular forum for discussion of the more strategic and programmatic issues is direly needed at the regional level (and perhaps at HQ also). In this spirit, the MTR team has recommended the formation of a working group/task force comprised of regional CARE and PNGO staff to deal with how to enhance the flow of information (both ways—not through guidelines and directives), to deal with staff capacity, with the sharing of management duties, and the (fundamentally) with the quality of the program. This is straightforward and viable recommendation that will ultimately *save* staff time and management effort. It should not be seen as another meeting imposed on an overwhelmed staff. The staff are overwhelmed in part because of

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<sup>14</sup> CARE’ organizational culture promotes learning, knowledge sharing, and excellence in programming, enabling staff and partners to understand, demonstrate, and measure impact on the underlying causes of poverty and social exclusion.

the lack of communication among partners. The team urges management to implement this recommendation in a spirit of good faith and cooperation.

### **Recommendation for PNGOs**

- 1) ***Internal Integration of SHOUHARDO Activities:*** It was felt during the MTR that much of the SHOUHARDO matters are left with the SHOUHARDO project staff within the PNGOs. The project coordinator or the program manager within the PNGO often has to deal with the SHOUHARDO-related issues, and in most places the SHOUHARDO team within the PNGOs has very little or no connection with other activities that go on within that organisation. There should be some effort to reduce this “*SHOUHARDO island*” approach and to integrate within the broader organisation.
- 2) ***Female Staffing:*** As stated earlier, there is wide variability among the PNGO capacity and staffing. The staff gender balance is no exception. On average there is 60:40 ratio of male and female staff within the implementing PNGOs. In the SHOUHARDO project staff within the PNGO partners, the female staff balance is less than 20% (M 81:F 19). Remoteness and unavailability of qualified females are hard to accept as the reason, since these organisations have been working in these areas well before SHOUHARDO.
- 3) ***Staff Capacity Building:*** All staff working within the PNGOs in the SHOUHARDO program have received training organized by CARE (with very few exceptions). Some of the large PNGOs have their own program training unit that can provide training for new staff. Due to a high turn over of staff, new staff are equipped with very brief or no training. PNGOs with in-house capacity can play a critical role in developing the capacity of their own staff.
- 4) ***Sustainability Plan:*** Each PNGO should start developing sustainability plans for VDC/SDCs beyond SHOUHARDO. This includes looking into their own organisational plans and identifying ways to integrate VDC/SDC development activities. This might be done through developing procedures for VDC/SDC to function as fully recognised organizations, as well as through identifying potential donors to support these organisations post-SHOUHARDO.

## **5.4 Monitoring and Evaluation**

Due in part to the delayed start-up of the program (the program only started implementation in CY 2006), the monitoring and evaluation component has focused primarily on the quantitative monitoring indicators that comprise the IPTT (indicator performance tracking table) and the PMP (program monitoring plan). The baseline survey carried out in 2005 provides the baseline values for the selected indicators. Baseline data was collected on outcome and effect level indicators following FANTA Guidelines. It is still too early to measure changes on all of the outcome or effect level indicators because of the late start-up. This is planned at a later stage.

One of the most acute staff shortage points is in monitoring and evaluation. M&E data collection is the responsibility of the field level monitoring and evaluation specialist in the PNGO office. The PNGO field data are compiled at the regional level, and quarterly and annual reports are sent to headquarters. The M&E unit at headquarters has only two staff and is currently in the process of developing a quantitative data management system that will systematize program reporting. While the M&E unit plans to develop a set of qualitative measures of program impact, including case studies, this activity is not yet operational.

In effect, the M&E system is limited to the compilation of quantitative indicators required for reporting out to the USAID Food for Peace (FFP) office (called the “internal program M&E component” in the M&E plan). This information, while necessary for assessing progress, does not provide management the critical feedback on intervention impacts, operational constraints and successes, or even participant perspectives on the program. Effective adaptive management needs a comprehensive M&E system that regularly digests and analyzes both quantitative and qualitative results. Currently, the lack of staff at all levels does not permit the development of such a system, despite the labors of the very competent M&E staff.

The original Monitoring and Evaluation Plan (revised November 2005) also referred to a “collaborative monitoring plan” that was meant to build the M&E capacity of the PNGOs, whose field staff have an M&E officer. There is little indication, however, that such capacity-building has been achieved in practice.

### **Recommendations for the M&E System**

Here, the MTR team offers two important recommendations.

- (1) It is recommended that SHOUHARDO expand its M&E capacity in order to generate a flow of information that can better guide adaptive management decisions and adjustments. The M&E system should incorporate a qualitative component that is capable of assessing program effectiveness, particularly the impacts of the SHOUHARDO message and philosophy. Case studies are used to communicate some of the successes of the program, but they seem more media-focused than analytical insight for program management. The design of the qualitative M&E system must ultimately be determined by the information needs of the SHOUHARDO management at national and regional levels. Moreover the M&E system output must be analyzed and presented in a format that is readily understood by management. Such examples would include periodic assessments of the UP/Pourashava linkages with SHOUHARDO communities, an M&E activity which could be carried out using the methodology applied in the baseline institutional analysis conducted by HDRC. In addition, a participatory monitoring and evaluation system should be instituted at the community level, using indicators such as the CAPs or others developed by the community itself. Such methodologies exist in Bangladesh and elsewhere in the CARE system.

- (2) In order to achieve the above recommendation, M&E staff increases at headquarters and at the regions will be required. There should be a minimum of two M&E staff posted under the Regional Program Manager (RPM) in each region. Their responsibilities will be not only to compile the data for indicator tracking reports (quarterly and annual) but also to supervise the qualitative assessments. The implementation of a qualitative M&E component will also require orientation of the PNGO monitoring staff in qualitative and participatory methods (already part of their job descriptions). The analysis and presentation of the qualitative output would also fall under the purview of the expanded regional M&E staff.

## 5.5 Gender Empowerment and Awareness



Women in Bangladesh mainly remain within the boundaries of the home and have very limited access in the public space. It is difficult for them to gather, discuss issues and take initiatives to resolve problems of the community.

Consequently there are very few women leaders, particularly at the grassroots level. Also, women lack experience and skill in political activities such as public speaking and lack knowledge about the political process and procedures, community and national issues, building

relationships with constituencies, and other matters of public life. In this situation, women require external intervention in order to participate in the political process. They need assistance in building capacity and require opportunities to emerge as a strong political force. It is against this background that SHOUHARDO has sought to develop grassroots women leadership, their capacity to participate in the governance of their affairs, and their understanding of rights and entitlements as citizens.

Although the MTR team has sought to incorporate the gender dimensions of SHOUHARDO program and management strategies throughout this report, it is appropriate to address specific issues. The gender *discourse* in SHOUHARDO should have four areas of emphasis: (1) provide a comfortable and enabling environment for poor and extremely poor women to participate in program activities and in social affairs. This issue is not about targeting women for inputs or savings groups, but for providing a public voice for women who traditionally have not had such a forum of expression; (2) create a steady channel of information in-flow for poor and extremely poor women in local communities. Women have seldom been the recipients of useful information that would link them to a broader constituency, and SHOUHARDO interventions are information-intensive; (3) within SHOUHARDO provide professional opportunities for women to occupy non-traditional staff roles, with an eye toward gender balance; (4) and cultivate within SHOUHARDO a culture that re-affirms and enhances the status of women, as manifest in day-to-day activities and attitudes at all staff levels. In the final accounting, CARE staff should be the best gender advocates around.

SHOUHARDO has made significant progress in advancing the gender agenda with regard to active female participation in program activities. While not yet ideal, the participation of women in the VDC/SDCs has in some cases been very dynamic and accepted by the community as a whole. The EKATA intervention has given women space (not just physical but social) for expression and could help produce a generation of women leaders. Even if the open discussion and widespread support of “women’s issues” such as dowry and domestic violence are not yet paralleled in practice, it is acceptable to promote them, and men know that these are public issues of concern to the community. EKATA and the SO2 courtyard sessions have also focused the flow of information on women, who previously relied only a husband’s largesse to learn about a wider world. Examples of the program’s successes in promoting women’s rights were cited by participants in all regions, including preventing early marriage and dowry, intervening to stop domestic violence, reducing the incidence of gambling, stopping harassment by male workers, gaining access to khas land, and stalling slum evictions until government officials could make effective rehabilitation plans. The examples are cited throughout the main report and the regional reports. Outside the villages and slums, SHOUHARDO has formed linkages with rights-based and legal aid organizations at the district level to facilitate greater access to the formal justice system for issues such as domestic violence. Linkages have been formed with Bangladesh Legal Aid and Services Trust (BLAST) in Chittagong, Kishoregonj, Rangpur and Tangail; with the Stop Violence Against Women (SVAW) network in Chittagong, and with BRAC, Rangpur Dinajpur Rural Service (RDRS) and the Assistant Commissioner Land in Rangpur. The MTR team found evidence that women’s participation in program interventions is not just pro forma and perfunctory, but effective and in some cases transformative. Observations and recommended actions on gender are also discussed under each SO.

The MTR team can summarize the impacts of SHOUHARDO on gender empowerment and awareness by addressing the following concerns:

- ***Is gender included in the design and implementation of the program?*** It is clear that SHOUHARDO has very effectively targeted women and has practiced a positive “affirmative action” not only its SO3 activities but in all the SOs. There is an effective gender balance in the VDCs and SDCs (in the latter, women are in the majority). The SO1 interventions have been gender-specific in promoting activities that are considered part of the woman’s domain, such as poultry-raising, homestead gardening, handicraft production, etc. In some areas, the SO1 opportunities for women have broken traditional boundaries and provided women access to IGA activities once dominated by males (e.g. professional driver training). In SO2, the majority of participants are females, and the interventions are meant to enhance the health and nutrition of women (and children). In SO4, gender sensitivity is integrated into disaster preparedness and response (training women as DM volunteers, allowing separate space for women in the cyclone shelters, etc.).
- ***Do women actively participate or is their involvement merely perfunctory and ornamental?*** The MTR team, accustomed to so many UP and Pourashava meetings where female members are physically and socially isolated from

participation, was highly impressed with the level of participation of women in community affairs. The SHOUHARDO women's groups—either EKATA or HHN or even VDC/SDC—were uniformly active and expressive. It is clear that many women are taking advantage of the opportunities offered by SHOUHARDO to develop their leadership skills and to promote a more public persona.

- ***Is there evidence of change in the status of women?*** The MTR team feels that the impact of SHOUHARDO with regard to the status of women has been positive. Increasing knowledge and awareness is empowerment, and there was frequent evidence from the field that within local communities the status of women is improving.

In the context of this positive impact, however, there is a continuing concern with the SHOUHARDO gender balance on its staff as well as with gender relations. This is an area to which CARE has devoted a great deal of attention and effort. While the proportion of female staff at the field level is somewhat more encouraging, there are few female staff in the different management and operational positions. This is an old issue in CARE, particularly since the organization became regionalized, but the reality remains—CARE has not been able to attract and retain its female staff. Thus, the progressive gender policy in Dhaka finds little expression in the gender staff balance. While SHOUHARDO management has followed an asserted effort to find qualified female staff, the results are not yet forthcoming. The challenging environment in which SHOUHARDO works makes it difficult to retain staff, both male and female. Recommendations are given elsewhere in the MTR as to how retention rates might be improved, but it is important to note here that if the program wishes to recruit and retain more women in the field, it should consider making some gender-sensitive policy adjustments as to where female staff are based (union level vs. village-based) and addressing safety, security and isolation issues that women face.

In the regional offices, SHOUHARDO management is still, on the whole, a male-dominated culture. The MTR team observed that it is difficult for women managers to express themselves, to retain the attention of the male colleagues, and to have their ideas accepted. Such an implicit hierarchy is also present in the field where the frontline staff are often women but the supervisors are male. As stated above, gender awareness is a state of mind that must be made routine, and the SHOUHARDO and PNGO staff should be held to the highest standards.

### **Recommendations for Gender Empowerment and Awareness**

- (1) Field staff and community volunteers lack skills in how to communicate abstract ideas of 'empowerment' and to facilitate ways that women can apply these concepts to become more powerful. This is a challenging task, and regional staff should provide additional training and direct support to field staff and community volunteers to determine the best ways to communicate and carry out ideas related to women's empowerment.

- (2) Wider local linkages for women and women's groups to formal institutions outside of their villages should be pursued by the regional offices. This includes linkages to the formal school system, meetings with female UP members along with continued ties to the public structures, rights-based organizations, and wider networks established by the program-wide advocacy work.
- (3) Create a conducive work environment for female staff that recognizes gender-specific needs in rural areas (e.g. isolation, security, professional contact).

## **5.6 Collaboration within CARE Bangladesh Units**

SHOUHARDO currently has a formal agreement with two units within the CARE/Bangladesh structure that provide services to SHOUHARDO activities. The SO3 interventions were designed and are implemented through the Education Unit. As stated above, the EKATA approach is widely accepted and has been effectively replicated in SHOUHARDO. The Education Unit has trained a core of 55 staff who provide the training of community change agents and the technical backstopping. These staff reside in the regions. The MTR team recommends the continuation of this collaboration and program support of the Education Unit.

SHOUHARDO also has an agreement with the Economic Development Unit. The EDU collaboration began in December 2006 and is now contracted until September 2007. Most of the 55 staff members in EDU work with SHOUHARDO—there are regional managers in three regions (not Tangail) with program officers in the hub offices, and community facilitators. The objective of this collaboration is to contribute primarily to SO1 by identifying private sector linkages that can enhance the economic activities of the program participants. In the field, EDU staff have mostly worked with downstream marketing of agricultural products and some handicrafts. At the national level, the EDU seeks out opportunities for non-local markets and even export opportunities for small-scale production commodities.

There has been some confusion about the roles of the EDU staff at the regional level, and the MTR team had difficulty separating the tasks of the EDU community facilitator from that of the frontline staff. The regional office doesn't really know how to "use" the EDU expertise, so in places, the EDU staff seem isolated, or an add-on activity. The MTR team, however, is highly supportive of this collaboration and recommends that it be fully supported. To achieve this integration, the EDU unit has to define itself more precisely and demonstrate its tremendous potential to support both rural and urban IGAs. The team offers the following recommendations:

- (1) The EDU team, with its expertise, should become a technical support unit for economic assistance. Its potential and contribution lies in a region or district-wide vision of economic linkages with larger markets. The staff should be involved in systematic market analysis at the local, regional, national, and even international levels, applying a commodity value-chain approach. They should train field facilitators to look for income earning opportunities, for positive



deviance examples (perhaps a community with a tradition of some handicraft). This involves identifying and promoting sources of local entrepreneurship.

- (2) The EDU should function to build bridges between local level producers, including farmers, fishers, laborers, and national markets and employers. Small communities could become points of outsourcing of production activities from Dhaka and other industrial areas. The EDU is well-positioned to create these linkages between socially-minded entrepreneurs with established productive infrastructure and the pool of labor that exists in the SHOUHARDO communities. This requires a new vision of IGA promotion and a new IGA strategy, which EDU staff are capable of producing.
- (3) SHOUHARDO should explore other areas of collaboration within the organization. Particularly, the MTR team feels that there is a “natural” scope for collaboration with CARE’s Program Quality Unit on reflective practice and shared learning. With the need to expand M&E activities to include a greater focus on impact, SHOUHARDO would benefit from the perspective that has been developed in this unit. Limited collaboration has already occurred in Kishoregonj, but it is recommended that the M&E unit of SHOUHARDO initiate a more formal collaboration.

## 6.0 Commodities Management

SHOUHARDO will distribute a planned 69,070 metric tons of commodities over the life of the program. Its primary challenges in distribution are the multiple modes of transport required to deliver commodities to remote areas, program staff who must fulfill multiple responsibilities in addition to commodity management, and breaks in the supply pipeline that are not under the control of the program. Some lack of clarity in regional decision-making authority was noted in Kishoregonj Region, where commodity managers reported that they required approval from headquarters if a Food Distribution Point (FDP) needed to be moved because of flood or other hazards.

**Commodity Chain Management:** CARE Bangladesh restructured its commodity chain management in late 2006, addressing gaps in the existing process and building the capacity of staff to identify and address future problems. The restructuring has reduced the level of problems in transferring, storing and distributing commodities to a minimum, a significant achievement for a complex operation with a large number of widely dispersed FDPs. Monthly monitoring is conducted by the environment and commodity units. In addition, all senior management and technical staff are required to check on warehouses monthly.

**Multi-modal transport:** To save warehousing costs, Title II commodities are offloaded directly from ships in port to trucks and taken to 22 regional warehouses and eventually to 753 FDPs in the program areas. From the regional warehouses it is transported in small quantities by road and by boat, and in some areas by more pedestrian means of transport. Maintaining accountability, timeliness and protecting quality for food that is handled multiple times is a costly and demanding job.

**Multiple Responsibilities of Food Monitors:** Commodity management is a time-consuming responsibility. SHOUHARDO staff, particularly among the PNGOs, must handle commodity management tasks along with other program responsibilities. For example, POPI's logistics officer in Kishoregonj District is also the MCHN officer and the M&E officer. This is symptomatic of the overall shortage of staff in SHOUHARDO and illustrates the stresses staff face in trying to carry out their multiple responsibilities in a conscientious manner.

At the field level, the commodities facilitator must monitor about 20 communities and is supervised by a CARE field facilitator located at the Upazila level. There is also a district level commodities officer in the PNGO offices, and the PNGOs have support staff responsible for commodities distribution in the hub-office (Upazila) level.

**Pipeline breaks:** There were delays in fulfilling several call forwards related to approval of the annual Title II funding that caused a break in the commodity pipeline. Commodities called forward in November 2006 arrived two months behind schedule in May 2007, forcing the program to distribute half rations from March to May 2007. Any gap in MCHN rations can have a negative impact on the nutritional status of marginal households; consequently SHOUHARDO reduced FFW activities from February 2007

and used the savings from the FFW program to support the MCHN program. The program planned to distribute the rations received in May retroactively, as many households had borrowed to make up for the food shortfall and were now indebted.

**Bulk versus bagged commodities:** The program distributes wheat, vegetable (soybean) oil, and split yellow peas. The staff have experienced significant difficulties when the commodities arrive at the Chittagong port in bulk and local laborers sack the commodities with shovels. This has resulted in uneven weights of the sacks and consequently surpluses in some warehouses and shortages in others.

**Reduction in resource availabilities:** Due to increases in commodity value and to financial constraints within the FFP program, it is likely that the amount of commodities for distribution will be reduced in the next two cycles. SHOUHARDO management has already stated their preference that the distribution of rations to women and children will take precedence over FFW distributions. The MTR team agrees with this priority and supports it, if for no other reason, for that of sustainability.

#### **6.0.1 Recommendations for Commodities Management**

Overall, CARE has devoted much effort to ensure that commodity transport and storage, warehouses, fumigation requirements, and tracking and reporting of losses are closely monitored and managed. The MTR did not find any significant issues with CARE's commodity management. One pressing issue at the time of the MTR, which involved a problem with underweight bags resulting from bulk shipments that were being poorly bagged at the port, has been resolved.

The discussion and recommendations under SO 2 noted the problems associated with high rates of iodine deficiency in the program areas. Since FFP does not provide iodized salt in its commodity mix, the program should consider identifying additional non-FFP resources or partners that could provide iodized salt as a complement to the MCHN ration.

## 7.0 Environmental Compliance

Responsible environmental management practices are particularly important to the long-term success of the program given SHOUHARDO's involvement in agricultural interventions, construction of community infrastructure and distribution of food assistance. CARE Bangladesh has drawn on its long experience with these types of activities to ensure that construction, use and maintenance of infrastructure does not destroy land forms, negatively affect bio-diversity, or contribute to air or water pollution. Similarly, SHOUHARDO has procedures in place to verify the safe application of pesticides used in agricultural activities as well as the safe storage of food for distribution.

In order to identify potential environmental impacts and recommend appropriate mitigation measures, SHOUHARDO has implemented a two-step environmental assessment process. As part of the first step, a Village-specific (or Pourashava-specific) Initial Environmental Examination (VSIEE or PSIEE) is conducted for all program activities carried out under SHOUHARDO. The focus of the VSIEE or PSIEE is necessarily on the potential environmental impacts of priority activities identified in the CAP. If potential environmental impacts identified by the VSIEE/PSIEE are relatively minimal and easily mitigated, the process requires the development of an Environmental Management Plan (EMP) to monitor both the implementation and effectiveness of mitigation measures.

The second step of the environmental assessment process occurs when / if the VSIEE or PSIEE indicates a potentially significant environmental impact resulting from a particular project. In this case, a Site-specific Initial Environmental Examination (SSIEE) or Environmental Impact Assessment (EIA) will be required. In cases where it is warranted, an SSIEE/EIA systematically evaluates the environmental impacts of the project and recommends mitigation measures to be incorporated into the original design of the intervention.

In order to support environmental compliance of all activities, the Environmental and GIS Unit of CARE-Bangladesh developed comprehensive Environmental Compliance Management Guidelines. In addition to emphasizing the rationale underlying environmental assessments, the Guidelines help to ensure compliance with both USAID and Government of Bangladesh environmental regulations. The specific purposes of the Guidelines are to:

- Ensure regulatory environmental compliance in all SHOUHARDO activities and promote environmentally sound development activities in both rural and urban areas of Bangladesh;
- Enhance the understanding of concerned staff of SHOUHARDO (CARE-Bangladesh, PNGO, Pourashava and City Corporation) on issues of environmental assessment (in accordance with USAID and GOB regulations);
- Ensure uniformity and standardization of tools and approaches to conducting environmental assessments, and

- Promote participation of the local communities in the environmental assessment process especially in devising mitigation measures and monitoring environmental management processes.

Overall, the team found environmental compliance awareness to be high, and procedures well understood and integrated into activities, particularly among staff responsible for infrastructure. In addition to the Environmental Management Compliance Guidelines, the Environmental and GIS Unit of CARE-Bangladesh has developed a document entitled the Pesticide Evaluation Report and Safer Use Action Plan (PERSUAP) for SHOUHARDO. The Pesticide Evaluation Report (PER) provides information on each of 12 factors outlined under USAID environmental regulations on pesticide procedures. Based on the findings of the PER, the Safer Use Action Plan (SUAP) provides a plan of action for achieving environment compliance in pesticide management including the determination of specific responsibilities of different parties involved in the pesticide program.

The MTR team also applauds the linkages created with the IUCN in the haor areas to develop the floating garden intervention (the *baira*) that enhances both economic income and the environment. A regional and field staff has been well-trained and the system appears to function with professional competence and efficiency.

## 8.0 Priority Findings and Program Recommendations

SHOUHARDO's combination of a traditional food security approach with efforts to reverse the underlying causes of food insecurity makes it one of the most unique development efforts in Bangladesh. On the one hand, SHOUHARDO adopts a traditional approach to reducing food insecurity of the poorest rural and urban residents in Bangladesh by increasing the availability, access, and utilization of food. Its intervention sets are comprehensive and focus on increasing the technology, information flow, and assets necessary to produce and purchase more food, to combine better nutrition with improved health and hygiene practices, to diversify and intensify livelihood options in villages and cities, and to create locally the awareness and preparedness to reduce vulnerability to the disasters that have so frequently destroyed household assets.

On the other hand, the unique groundbreaking dimension to SHOUHARDO is its focus on correcting the *underlying causes of food insecurity*. As decades of development work in Bangladesh have so markedly revealed, food insecurity is a function of local power. ***The rural and urban poor are food insecure because they have no power.*** This powerlessness is manifest in lack of access to productive resources such as land and water rights, lack of access to education and thus to employment, lack of access to information, lack of access to services to which they have fundamental rights as citizens, and lack of access to the formal power structure as defined by locally-elected governmental bodies, public service providers, institutions of justice and so forth. SHOUHARDO thus addresses the most fundamental constraint to food security by seeking to create conditions for a transformation in the traditional power structures that marginalize and exploit the poorest segments of society. Thus, SHOUHARDO meets FFP objectives by attempting a ***sustainable*** solution to widespread poverty in urban and rural Bangladesh. The program explicitly acknowledges that the social change which enhances food security must involve (1) the participation and improvement in the status of women, so that they can assume an active and respected economic role in society and (2) changes in governance at the local level, so that the poorest of the rural and urban poor can obtain access to their elected governmental officials and to the services that government is obligated to provide.

This transformation envisioned by SHOUHARDO requires time because it involves changing the behaviors and mind set of people who have been long oppressed by the local elite who have captured most of the resources. Although CARE and its partners have made commendable progress in the program, such transformative change is not likely to be totally achieved in the five-year span of the project. What is intended is to establish the institutional mechanisms that will allow for such change to occur in a sustainable manner. In other words, SHOUHARDO seeks to put its targeted population on the road to sustainable food security by the end of the current project.

In each of the discussions of the programmatic approach and the management effectiveness, a set of recommendations has been offered. The total number of recommendations is large, which is to be expected given the importance and the breadth of the program; so in the interest of clarity, the MTR team would like to reiterate its

priority findings and major programmatic recommendations. It is hoped that careful readers will refer back to the appropriate sections for more detailed analysis.

As stated above, the MTR team is highly supportive of SHOUHARDO and its transformative goals. Nonetheless, the team feels that acceleration without adequate staff has led the program off-track and it needs to refocus on the fundamental objective so clearly laid out in the DAP. To adapt an old image, SHOUHARDO staff at all levels can feel the trunk, the skin, the tusks, but now fail to recognize the elephant. The roots of the problem lie in a series of events that preceded the inauguration of the program and caused an extended delay in start-up. The consequence of the delay was a major ratcheting up of the program activities without an adequate assessment of the quality of the intervention set. While the management has now succeeded in achieving an acceptable burn-rate, intervention and implementation priorities have been reversed, and the program runs the danger of losing its uniqueness. Specifically, the MTR provides the following diagnosis:

- The SHOUHARDO message is becoming less prominent, and this is the major threat to the sustainability of this important program. The program is perceived in too many unions as one that distributes inputs and “helps” the poor. There are too many interventions and trainings that bear little relationship to the core SHOUHARDO message of community-led development. Especially in the face of resource cuts, there should be fewer interventions, more staff, and a re-allocation of resources.
- The SHOUHARDO and PNGO staff are excessively over-burdened and de facto job responsibilities have shifted away from promoting the SHOUHARDO message. CARE and PNGO field staff are busy being logistics and procurement agents and NOT development agents. Field staff are engaged in activities that have little to do with the SHOUHARDO objectives.
- There is inadequate technical support at the regional, sub-regional, and field level. The dependence on volunteers (not really volunteers) to implement the program has not been reflected in their technical backstopping.
- The strategy to mobilize government services to provide technical support and to adopt pro-poor stances has not materialized in practice, and the effort to integrate communities to locally-elected bodies at different levels of government suffers for lack of a consistent methodology and for lack of staff time.
- Training has become mistaken for learning; and as a result, it is assumed that a person once-trained will have assimilated and applied the message. Little assessment or follow-up of training is built into the implementation strategy.
- Quality is being sacrificed for quantity. Adequate quality control mechanisms are not in place. The necessary monitoring and evaluation unit was never fully staffed at the regional or headquarter level. The current documentation of program quality and impact is limited to reporting indicators and sporadic anecdotal evidence, and there is no system of feedback that could systematically inform management adjustments to program content or implementation.

- Learning is not adequately shared throughout the program, though work on this is underway. Field staff have little opportunity to share with regional staff; PNGO staff have little opportunity to share among themselves or with CARE staff; VDC/SDCs do not share with one another; UP/Pourashava do not share SHOUHARDO experiences; and so on.
- The advocacy component in SHOUHARDO has been under-emphasized and, thus, under-utilized in the field. The Advocacy Unit in CBHQ has led trainings on concepts and issues for regional staff, and established national level working relationships with rights-based organizations and legal aid organizations. However, advocacy efforts in the field are extremely limited, due to lack of staff time (or vision), yet the mobilization of advocacy campaigns and groups is critical to the sustainability of the program. The program plans in 2008 to do more work to establish linkages with public structures that protect rights and entitlements such as khas land and pond distribution committees, nari nirjatan protirodh committees and standing committees of the UP, and strengthening school committees.

## 8.1 Core Recommendations

As stated repeatedly throughout this report, analysis and recommendations have been provided in the individual sections. Sensitive that such a large number of recommendations might be numbing, the team has sought to prioritize the recommendations around a core group, in our opinion, will assure the sustainability of SHOUHARDO's effort to enhance food security among the country's poorest population. Table 2 summarizes these recommendations as programmatic and operational.

**Table 2. A summary of the core programmatic and operational recommendations**

<b>Programmatic Recommendations</b>	<b>Strategy</b>	<b>Regional Coverage</b>
Reassert VDC/SDC institutions as the core program strategy of SHOUHARDO	Redefine staff roles, from management to field, CARE and PNGO, to focus on the SHOUHARDO message; work more with VDC/SDCs on developing the problem-solving capacity of the groups and to revise the CAP not as budget plan, but as a development plan.	All four regions
Intensify the effort to link VDC/SDCs with the LEBs and government service providers	Reinforce the Upazila PACC, add VDC members to it; seek the active involvement of the MLGRD&C in promoting a pro-poor position at LEB level; analyze the possibility of a union-level development committee in a small number of unions or Pourashavas to enhance open discussion; devote more staff	All four regions



	to these tasks	
Adopt intervention sets to the progress of the VDC/SDCs or LEBs.	SHOUHARDO must be willing to adjust and react to success or the lack of it. Concentrate more staff time on those communities where progress appears good; pilot the provisioning of a budget to the successful VDC/SDCs; reinforce the SHOUHARDO message in the weak ones; make all inputs support a problem-solving effort by the local community; increase linkages with pro-SHOUHARDO LEBs.	All four regions
Promote greater exchange of learning	Create opportunities for VDCs and SDCs to share lessons learned; involve the advocacy unit in sharing; hold local SHOUHARDO days.	All four regions
Refocus on learning rather than training—quality not quantity	Assess the impacts of training for LEBs, community groups, particularly in the SHOUHARDO message; this is particularly applicable to both frontline staff and volunteers in their technical areas; where necessary provide refresher and follow-up training from the regional resources	All four regions

<b>Operational Recommendations</b>	<b>Strategy</b>	<b>Regional Coverage</b>
Adjust staff job descriptions to reflect roles as development agents	Refresher orientation on SHOUHARDO message and how to facilitate local problem-solving; study how to reduce the number of communities per field staff in the rural areas; more staff time per village.	All regions
Increase technical staff and distribute technical capacity closer to the front line.	Hire technical staff in all SOs at the regional level, reinforce technical capacity at hub-office and cluster level; work with existing PNGO technical capacity where possible.	All regions, especially in coastal and haor regions where more isolated
Review the distribution of decision-making throughout the system	Two workshops, one with regional staff in each region, the other with PNGO staff in each region, are held to openly discuss issues of regionalization and of the PNGO partnership responsibilities	All regions
Strengthen the PNGO partnerships	At the regional level, the PNGOs	All regions

through more effective interaction and discussion	and CARE should form a core task force to address issues such as the quality of the program, the capacity of the PNGOs, and the distribution of obligations; an analysis of PNGO capacity is recommended.	
Increase monitoring and evaluation staff at HQ and regional levels	Introduce impact-based M&E, use participatory M&E using the VDC/SDCs, focus on quality not quantity.	All regions
Enhance the partnership relationships with EDU, Education, and Advocacy	Increase advocacy activities at the community level; shift EDU to a technical support position, continue to support Education on EKATA and CRC programs.	All regions

The core recommendations summarized in Table 2 are detailed further below and in the body of the report. The MTR after review of comments and the report itself, feels that these recommendations are critical to the sustainability of the program in all its aspects (promoting social change that addresses the underlying causes of food insecurity, enhancing abilities to produce and purchase food, promoting health and nutrition, empowering women, and reducing disaster risk) and that they are viable adjustments given management realities. They do, nonetheless, require concrete actions to be taken by management.

**Recommendation 1.** Management must reassert the SHOUHARDO message and turn priorities that strengthen local community institutions (VDCs/SDCs), that legitimize local community development plans (CAPs), and that integrate local communities into the power structure of LEBs and other governmental and non-governmental entities. Input interventions and trainings should be limited to those that can demonstrate that they will strengthen the problem-solving capacity of local communities.

**Recommendation 2.** To achieve (1), it will be necessary to reorient regional and field staff (through the PNGOs) toward the purpose of SHOUHARDO and the principles of social change, informal learning, and awareness-building. In effect, it is necessary for staff to REDEFINE themselves in ways that are consistent with their original job descriptions (which talk of participatory techniques, community facilitation, etc.). It is critical that the frontline staff perceive themselves and their volunteer counterparts as “development/change agents” whose goal is to effect the social change that addresses the underlying causes of food insecurity. This can be accomplished opportunely through a series of regional workshops coordinated by the PNGOs. This recommendation also implies that field staff (i.e. change agents) are, in effect, trainers and learning facilitators and should be classified not as administrative costs but as program costs in annual PNGO budgets.

**Recommendation 3.** In order to accomplish (1) and (2), adjustments in staffing will be necessary. The MTR team proposes an assessment of the VDC/SDCs in order to identify the level of progress achieved by them in terms of the SHOUHARDO goals of

representation, accountability to their constituency, development vision, etc. On the basis of the outcome of this assessment, the VDC/SDCs would be classified into those where progress is wanting, those where progress is discernible, and those that can be considered “graduated” (i.e. advanced progress). Instead of engaging in a uniform set of interventions across all communities, it is recommended that intervention sets would be adapted to level of progress. SHOUHARDO would reduce its presence in those communities deemed unlikely to progress and shift resources to the communities where progress is documented or promising. In these communities, the ratio of villages per development agent will be reduced, and the effort to support change in these communities will intensify.

In short, using progress as the metric, SHOUHARDO should study the possibility of increasing or decreasing its efforts in specific communities and refocus on the communities where the likelihood of effective positive change is greater. This does not mean that weaker, more marginalized or non-progressing communities would be abandoned, but it does not make sense to the MTR team that scarce resources would be allocated to where the core intervention has not been successful. Simply, there should be interventions, such a budget management, that should be made available to those communities that have clearly adhered to the SHOUHARDO message. This recommendation should be implemented at the local level where adequate knowledge is available and where staff can be more easily shifted. Thus, this recommendation appeals for a change in the current tasks and responsibilities of the frontline development agents and a refocusing of effort on the communities—rural and urban—with the greater potential for social transformation.

**Recommendation 4.** It is critical to increase the technical staff capacity at the regional and subregional levels, thus shifting technical backstopping toward field level where it is most readily needed. One of the reasons that SHOUHARDO has not been successful in mobilizing more technical assistance from NBD and other local resources has been the lack of staff and staff time to pursue this strategy. These linkages require cultivation and perseverance. Increasing technical staff regional and locally will also increase the likelihood of mobilizing other local resources. Minimally, greater technical support and backstopping is needed in Agriculture, HHN, Disaster Preparedness, Empowerment, and Advocacy. In all regions, more support in SO1 and SO4 are also needed (see regional chapters).

**Recommendation 5.** Urgent reinforcement of the monitoring and evaluation capacity of the program is needed in all regions. There should be at least two M&E specialists in each region to assure that a qualitative and systematic M&E system can begin to document program impact. The MTR team would also prefer the initiation on a pilot basis of a participatory M&E system that would reinforce the VDC/SDCs and perhaps the UP/Pourashava linkages (by involving them in the M&E process). It is further recommended that SHOUHARDO management explore a collaboration with the new Program Quality Unit in CARE because of the fundamental importance of SHOUHARDO to development in Bangladesh. This unit could help develop a

systematic strategy for identifying the critical lessons from SHOUHARDO. It is, after all, a bold experiment in social change, one that has implications for all future programming.

**Recommendation 6.** To enhance the opportunities learning, the MTR team proposes two critical sets of workshops to be organized as soon as possible. The objective of the first workshop—to be held in each region—will determine the extent to which decision-making and management can be decentralized toward the regions. There should be an open and frank discussion of the capacity of the region to assume greater decision authority from headquarters, and the outcome will be a clear agreement on which resources and management decisions can be made regionally and which must be approved through headquarters. There is currently differing perspectives on the regionalization of authority, and these workshops could help establish a comfortable work environment. The second set of workshops would also be held regionally to enhance the relationships with the PNGO partners. This workshop would focus on those areas that have caused tension over the last year—lines of authority for different kinds of decisions, the use of PNGO capacity for training and M&E functions, quality control of the interventions and the clarification of frontline staff and technical staff roles, and options for PNGO capacity-building where needed. A specific recommendation for an assessment of PNGO capacity has been made above, and the outcome of this exercise would help establish the workshop agenda. It is necessary to expand the lines of communication among partners to optimize co-learning.

**Recommendation 7.** The MTR team feels strongly that manner of the issues regarding PNGO partnerships could be resolved through an increase in effective communication. Currently, the forms of communication at the regional office are limited to a discussion of target progress, implementation details, logistics, budgeting, and other operational issues. There is little opportunity for regional and PNGO staff (of different levels) to sit together and discuss the philosophy of the program, quality control, implementation options, staff training needs, and more efficient and effective forms of sharing implementation responsibilities. The current meetings have more of a monitoring or reporting agenda. A regular forum for discussion of the more strategic and programmatic issues is direly needed at the regional level (and perhaps at HQ also). In this spirit, the MTR team has recommended the formation of a working group/task force comprised of regional CARE and PNGO staff to deal with how to enhance the flow of information (both ways—not through guidelines and directives), to deal with staff capacity, with the sharing of management duties, and the (fundamentally) with the quality of the program. This is straightforward and viable recommendation that will ultimately *save* staff time and management effort. It should not be seen as another meeting imposed on an overwhelmed staff. The staff are overwhelmed in part because of the lack of communication among partners. The team urges management to implement this recommendation in a spirit of good faith and cooperation.

## 8.2 Conclusions

USAID should be given high praise for supporting a program such as SHOUHARDO that seeks to address the underlying causes of food insecurity in Bangladesh. There are no other Title II programs that the MTR team is aware of that seeks to tackle the structural issues leading to chronic poverty so explicitly as this program. Lessons learned from this program should be shared with Cooperating Sponsors working in other regions that are facing similar structural barriers to food insecurity.

### 8.2.1 Is SHOUHARDO sustainable?

The magnitude of the program in both scope of activity and geographical reach requires a long period of time to identify and train partners and set up program sites. The emphasis on software over hardware means that a significant amount of groundwork and interaction with selected communities is necessary to prepare the participants for program interventions. The time required for the overall setup of the program was justified given the objectives of this ambitious endeavor. SHOUHARDO effectively reached full implementation in most villages and slums in mid-calendar year 2006. This was a year and a half later than designed. As a result, all of the measurable impacts of the program will not be achieved, particularly those that would reflect changes in behavior or in local power relations. On the other hand, it can be expected that over the next two years, SHOUHARDO will be able to establish a direction of change. It will accomplish in many regions and many communities a discernible difference in the relationships between the poor and non-poor. It will also be able to point to a set of LEBs that have agreed that the VDC/SDC is a legitimate platform to represent the poor and to manage pro-poor development resources.

What will happen when SHOUHARDO comes to an end? There is no doubt that local communities will not be able to sustain the resource flows that SHOUHARDO has provided them. It is unlikely that the flow of goats, sewing machines, and rations will continue. But the true metrics of sustainability will lie in the following:

- The local community institutions (VDC/SDCs) remain the driving force of community development. Changes in leadership are smooth and the poor retain control of the committees.
- The local institutions including EKATA, HHN, and HA groups will spawn natural leaders who become skilled at problem-solving.
- The community institutions will develop safety nets and opportunities for the most vulnerable households.
- LEB members will come to interact with the community institutions and will provide development resources based on community CAPs.
- Donors and other NGOs will “invest” in local CAPs.
- Neighboring communities will inquire into how to form their own VDC/SDC.

- UP/Pourashava annual budgets include resources for UDMC/PDMCs to do early warning, risk reduction and disaster preparedness.

Some of these sustainability indicators have already manifested themselves. The MTR team is confident that much more progress will be made in this direction over the next two years.

### **8.2.2 Is SHOUHARDO a good development investment?**

The resources invested in SHOUHARDO must be evaluated not in terms of expenditure per beneficiary, but rather in terms of the long-term impacts of the program. If SHOUHARDO succeeds in initiating a process of change that ultimately will shift resource shares nationally, then the potential return on this investment is immeasurably high. A long-term perspective is necessary to understand how the SHOUHARDO institutions might be adopted nation-wide or even across international boundaries. In any cost-benefit analysis, the next best alternative use of the funds is always considered. The benefits of most development programs are ephemeral providing temporary relief. SHOUHARDO, on the other hand, is attempting a transformation the value of which will be enjoyed for generations.

### **8.3 Final Recommendation**

SHOUHARDO management at all levels has the necessary competence, professionalism, energy, commitment and dedication to support the realization of the SHOUHARDO message. SHOUHARDO leadership has demonstrated a willingness to adjust strategies and pursue alternative paths to achieve the objectives of this program. To enable the program to fulfill its greatest potential, the MTR team recommends that the program should be granted a six-month extension at the end of the current LOA to enable the implementation of MTR proposed programmatic recommendations and to consolidate gains from two full years of stable program implementation. Reaching the targets proposed in the SHOUHARDO Program will take much more time than originally anticipated. This is primarily due to pipeline breaks, the amount of time it took to identify and bring on board PNGOs, and problems associated with staff retention due to the difficult working environment. Based on the lessons learned from the implementation of SHOUHARDO, the successful transformative processes should be promoted in the next five-year program supported by USAID.

**APPENDIX 1: Analysis of IPPT Targets and Projections for Achievement by 2009**

**Table 2: Status of target achievement, projection of achievement, and additional time (after 2009) required to achieve targets**

Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
<b>SO 1: Improved availability and economic access to food for targeted vulnerable households through strengthening livelihood security</b>										
SO 1b	Type of different food groups consumed per day	5.2	2006	-		-	-			
			2007	-		-				
			2008	-						
			2009	0.8	6					
			Total	6						
SSO 1.1a	Average score on Management Capacity Matrix	-	2006	-		-	-			
			2007	30%		-				
			2008	20%						
			2009	25%	75%					
			Total	75%						
IR 1.1.1a	# & % of groups receiving training in good governance, human rights, leadership development, etc.	-	2006	1243		1350	152%			
			2007	605(303)		661				
			2008	500						
			2009	-	2348					
			Total	2348						
SSO 1.2 b	% of households that no longer have to depend on seasonal migration	42.9%	2006	-		-	-			
			2007	-5%		-				
			2008	-5%						
			2009	-5%	-15%					
			Total	-15%						
SSO 1.2c	% of households that no longer need to sell their services advance	15.4%	2006	-		-	-			
			2007	-5%		-				

Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
			2008	-10%						
			2009	-5%	-20%					
			Total	-20%						
IR 1.2.1a	# of networks and alliances formed between different stakeholders and are operational	-	2006	5		3	34%	154.3%	207	6
			2007	120(60)		19				
			2008	225						
			2009	260	610					
			Total	610						
IR 1.2.2b	# & % of community aware of different service providers and what they offer	-	2006	501		469	137%	41.8	-	-
			2007	437(219)		514				
			2008	469						
			2009	354	1761					
			Total	1761						
IR 1.2.2d	# & % of households (P & EP) receiving assistance from service providers	49.3%	2006	10%		-	-	16.4%	-	-
			2007	30%		-				
			2008	25%						
			2009	15%	80%					
			Total	80%						
IR 1.2.3a	# of infrastructure projects completed through community processes of planning and implementation through FFW, LCS, Contractors	-	2006	924		835	31%	107.4	8246	10+
			2007	10000(5000)		982				
			2008	10000						
			2009	5736	26660					
			Total	26660						
IR 1.2.3b	# of person days of employment created during crisis period, while households suffer with food insecurity	-	2006	328526		293692	78.7%	90.4	4306211	6
			2007	2124950(1062475)		801371				
			2008	2025900						
			2009	990580	5469957					



Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
			Total	5469957						
IR 1.2.3c	# of communities maintaining infrastructure	-	2006	-		192	-	69.3	-	-
			2007	20%		-				
			2008	20%						
			2009	40%	80%					
			Total	80%						
SSO 1.3a	Average expenditure on food in Taka, of participating households	1608	2006	-		-	-	6.7%	-	-
			2007	+5%		-				
			2008	+5%						
			2009	+10%	+20%					
			Total	20%						
SSO 1.3c	# & % borrowers taking loan from local moneylenders reduced.	37.6	2006	-		-	-	-11.9%	-	-
			2007	-5%		1321				
			2008	-5%						
			2009	-15%	-25%					
			Total	-25%						
SSO 1.3d	Households (P&EP) average net production from dark green leafy vegetables	-	2006	5%		-	-	76%	-	-
			2007	10%		-				
			2008	15%						
			2009	20%	50%					
			Total	50%						
SSO 1.3d	HH average net production (Kg) from fruits that are yellow or orange inside	-	2006	-		-	-	80.5%	-	-
			2007	5%		-				
			2008	5%						
			2009	15%	25%					
			Total							
IR	# & % of households adopting three	48.2%	2006	5.3%		-	-	6.1%	-	-

Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)	
1.3.1a	or more "best practices" for food crop production		2007	24%		-					
			2008	-							
			2009	-	30%						
			Total	30%							
IR 1.3.1b	# & % of households engaged in fishing/ fish culture adopting three or more "best practices"	3.1%	2006			-	-	4.2%			
			2007	7.5%		-					
			2008	5.8%							
			2009	-	13.3%						
			Total	13.3%							
IR 1.3.1c	# & % of households practicing alternative income generating activities	-	2006	10159		5810	37.4%	87.1%	52734	10+	
			2007	52147(26074)		7769					
			2008	78694							
			2009	-	141000						
			Total	141000							
IR 1.3.1d	# of savings programs established	-	2006	704		729	687%	47.6%	-	-	
			2007	496(248)		5810					
			2008	500							
			2009	648	2348						
			Total	2348							
PMP 14.2.2	Households average income per annum (BDT)	2133	2006	-			-	67%	-	-	
			2007	+5%							
			2008	+5%							
			2009	+10%	+20%						
			Total	+20%							
PMP 14.2b	Households average income sources per annum	1.2%	2006	-		-	-	17.8%	-	-	
			2007	+5%		-					
			2008	+15%							

Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
			2009	+30%	50%					
			Total	50%						
IR 1.3.2a	# of rural market developed /upgraded	-	2006	12		12	188%	37.4%	-	-
			2007	8(4)		18				
			2008	4						
			2009		24					
			Total	24						
IR 1.3.2b	# & % of women entrepreneurs engaged in business/enterprise	-	2006	-		0	-	-	-	-
			2007	-		720				
			2008	-						
			2009	-	-					
			Total	20%						
<b>SO 2: Sustainable improvement in the health and nutrition of target beneficiaries</b>										
SO 2a	% of children 6-24 months of age below -2 standard deviations in height for age (stunting)	52.2%	2006	-			-	-	-	-
			2007	-						
			2008	-						
			2009	-4%	-4%					
			Total	-4%						
SO 2b	# & % of children 6-24 months of age below -2 standard deviations in weight for height (wasting)	16.2%	2006	-			-	-	-	-
			2007	-						
			2008	-						
			2009	-5%	-5%					
			Total	-5%						
SO 2c	# & % of children 6-24 months of age below -2 standard deviations in	56.8%	2006	-		-	-	-	-	-
			2007	-		-				

Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
	weight for age (underweight)		2008	-						
			2009	-6%	-6%					
			Total	-6%						
SO 2d	% of mother having children 0-24 months with BMI $\geq$ 18.5.	42.1%	2006	-		-	-	-	-	-
			2007	-		-				
			2008	-						
			2009	+15	+15%					
			Total	+15						
SO 2.1a	# & % of children 6-24 months with diarrhea in the last 2 weeks	22.5%	2006	-		-	-	-5.9%	-	-
			2007	-10%		-				
			2008	-5%						
			2009	-5%	-20%					
			Total	-20%						
PMP 14.3.3	EPI coverage	37.1%	2006	-		-	-	13.8%	-	-
			2007	+10		-				
			2008	+15						
			2009	+20	+45%					
			Total	+45						
	ANC	44.28%	2006	-		-	-	4.5%	-	-
			2007	5%		-				
			2008	5%						
			2009	5%	15%					
			Total	15%						
	Exclusive Breast feeding	-	2006	-		-	-	88%	-	-

Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
			2007	5%		-				
			2008	10%						
			2009	10%	25%					
			Total	25%						
IR 2.1.2a	# of ECDs established and fully functioning (Revised Target, 19 Oct 06)	-	2006	298		294	167%	42%	-	-
			2007	441 (221)		566				
			2008	331						
			2009	-	1070					
			Total	1070						
IR 2.1.2f	# & % of PNGOs receiving training in management of ECDs	-	2006	16		17	139	31.7%	-	-
			2007	30(15)		26				
			2008	-						
			2009	-	46					
			Total	46						
IR 2.1.2h	# and % of eligible children in targeted areas enrolled in ECD programs		2006	8260		5609	164%	44%	-	-
			2007	13890 (6945)		19290				
			2008	9630						
			2009	-	31800					
			Total	31800						
IR 2.1.2i	# and % of children between 0-24 months enrolled and participating in monthly growth monitoring as per revised target of May07		2006	61600		-	1.4%	47%	-	10+
			2007	69115 (34558)		1337				
			2008	69115						
			2009	55440	255270					
			Total	255270						
IR 2.1.3a + 3b	# of MCHN beneficiaries (Pregnant women + Lactating mothers) (as per March 2007)		2006	100000			-	99%	-	-
			2007	106000						
			2008	106000						

Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
			2009	106000	418000					
			Total	418000						
IR 2.1.3c	# of people receiving non-emergency Title II food assistance through FFW/CFW (FFW may be discontinued from FY08) (Ref Targeting 19 Oct06)	-	2006	16800		-	-	47.7%	-	-
			2007	15809		-				
			2008	10800						
			2009	10800	54209					
			Total	54209						
SSO 2.2a	# & % of HHs using hygienic household or community latrines		2006	10%		57304	-	12.4%	-	-
			2007	15%		67547				
			2008	15%						
			2009	20%	60%					
			Total	60%						
IR 2.2.1a	# & % of communities with total sanitation	-	2006	334		220	77%	47.3%	1084	4
			2007	370 (185)		158				
			2008	352						
			2009	351	1407					
			Total	1407						
IR 2.2.1b	# & % of households who have access to arsenic free water	16.7%	2006	2%			-	12.9%	-	-
			2007	18%						
			2008	20%						
			2009	10%	50%					
			Total	50%						
IR 2.2.3a	# of infrastructure projects completed (drainage and irrigation system improvement)	-	2006	1276			109%	56.3%	-	-
			2007	2500 (1250)						
			2008	2500						
			2009	762	7038					
			Total							

Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
			Total	7038						
<b>SO 3: Enhanced empowerment of 4000,000 women and girls from targeted vulnerable households</b>										
<b>SO 3b</b>	# & % of women reporting significant participation in household decision-making	11.8%	2006	-		-	-	6.4%	-	-
			2007	10%		-				
			2008	15%						
			2009	25%	50%					
			Total	50%						
<b>SSO 3.1a</b>	# & % of women and girls enrolled in formal and non-formal education (CARE and non-CARE)	40.8%	2006	-		3839	-	8.4%	-	-
			2007	+10%		15413				
			2008	+10%						
			2009	+10%	+30%					
			Total	+30%						
IR 3.1.1a	Number of REFLECT/EKATA groups formed	-	2006	0		96	344%	35.8%	-	-
			2007	400 (200)		592				
			2008	419						
			2009	-	-					
			Total	819						
IR 3.1.1c	# & % of adolescents who have attended sessions on life skill and reproductive health training	-	2006	-		3338	-	31.4%	-	-
			2007	40%		2150				
			2008	20%						
			2009	15%	-					
			Total	75%						
IR	# of PTAs formed	-	2006	0		69	141.3%	26.5%	719	-

Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
3.1.2a	(should be: # of poor and extreme poor men/women included in PTA as member)		2007	300 (150)		143				
			2008	210 (105)						
			2009	-	510					
			Total	510						
IR 3.1.2b	# & % of PTAs who raise and deal with women and girls educational entitlements	-	2006	0		24	96.7%	26.5%	295	1
			2007	180 (90)		63				
			2008	125						
			2009	-	305					
Total	305									
IR 3.1.2c	# of education standing committees that are established as per government guidelines	-	2006	0			-	46.8%	-	-
			2007	200						
			2008	310						
			2009	-	510					
Total	510									
IR 3.1.2d	# of committees (SMC/SC) receiving training in problem analysis and planning	-	2006	0			43.5%	46%	435	10+
			2007	400 (200)	87					
			2008	400						
			2009	204	1004					
Total	1004									
IR 3.1.2e	# of parent-teacher associations receiving training in problem analysis -and planning	-	2006	0		29	14.5%	46%	150	10+
			2007	400 (200)		-				
			2008	400						
			2009	220	1020					
Total	1020									
IR 3.2.2a	# & % of women groups receiving training in problem analysis and planning	-	2006	-		89	53.6%	48.8%	712	10+
			2007	500 (250)		45				
			2008	500						



Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
			2009	328	1328					
			Total	1328						
	# of women groups from REFLECT and EKATA receiving training in problem analysis and planning (Ref Targeting 19 Oct 06)	-	2006	85		89	63.5%	48.2%	254	2
2007			252 (126)		45					
2008			63							
2009			-	400						
Total			400							
IR 3.2.2b	# of women's groups who have developed action plans and implemented these	-	2006	-		42	225%	49%	-	-
2007			300 (150)		296					
2008			300							
2009			197	797						
Total			797							
IR 3.2.3b	# & % of women's group linked to regional and national women's groups and NGOs and bodies that raise and deal with issues related to women	-	2006	-		-	40%	89%	24	10+
2007			10 (5)		2					
2008			20							
2009			29	59						
Total			59							
<b>SO 4: Targeted communities and Institutions are better able to prepare for, mitigate and respond to natural disaster</b>										
SO 4a	Average score on Management Capacity Matrix (Union Parishad & Pourashavas/Wards)	-	2006	-		-	-	80.5%	-	-
2007			15%		-					
2008			25%							
2009			35%	75%						
Total			75%							
SSO 4.1a	# & % of communities integrating local coping mechanisms to reduce risk of disasters	-	2006	-			-	52.5%	-	-
2007			35%							
2008			65%							
2009			-	100%						
Total										

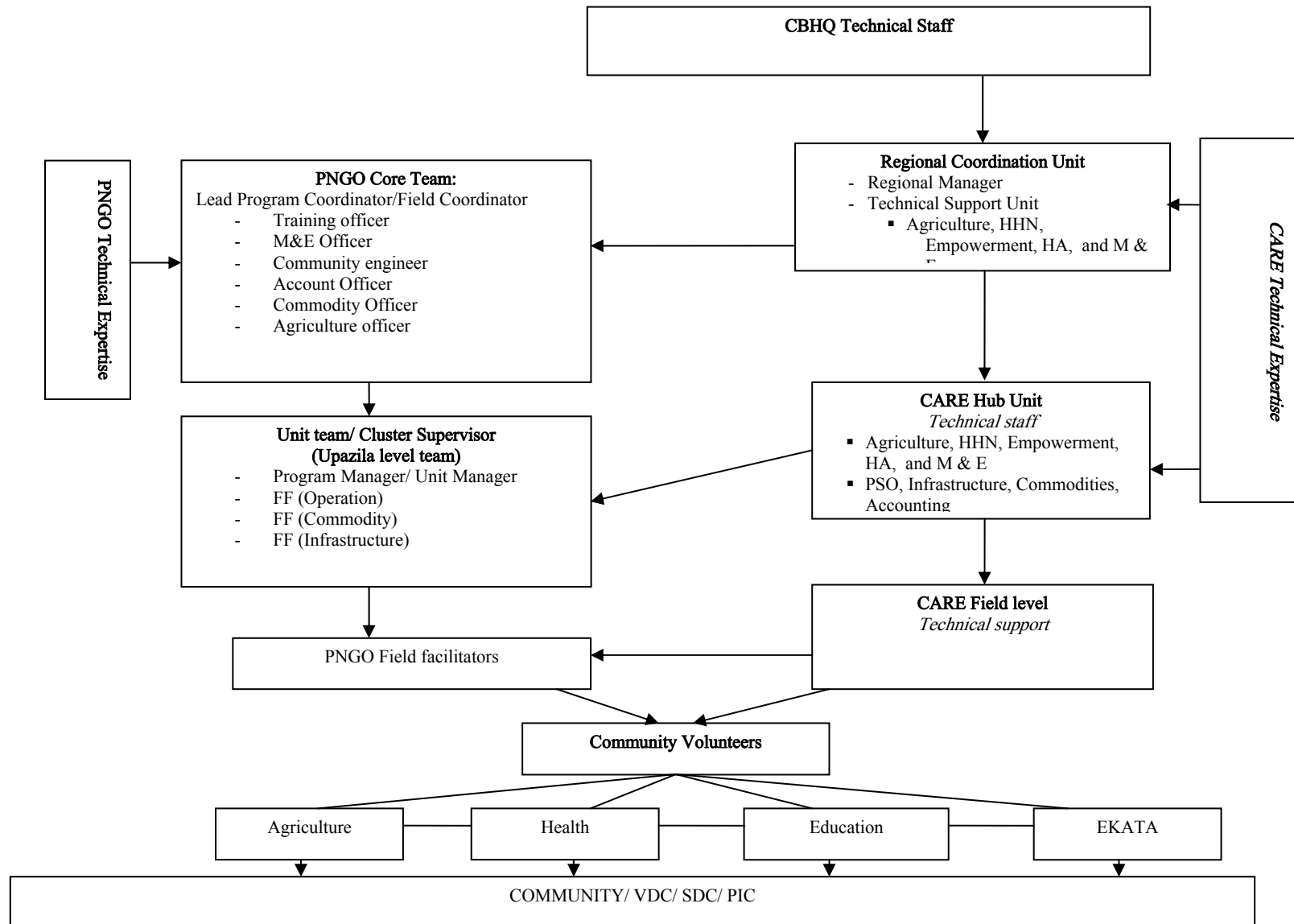
Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
			Total	100%						

<b>SSO 4.1b</b>	# & % of shelters which provides easy access to women, elderly and the disabled	-	2006	-			-	42.4%	-	-
			2007	30						
			2008	30						
			2009	10	70					
			Total	70						
IR 4.1.1a	# & % of committees (DMC: rural and urban) receiving training in disaster response and preparedness	-	2006	131		131	40.9%	41%	209	2
			2007	379 (190)		-				
			2008	-						
			2009	-	510					
			Total	510						
IR 4.1.1b	# & % of women who are able to make decisions during times of disaster	19.5%	2006	-		-	-	8.2%	-	-
			2007	-		-				
			2008	+75%						
			2009	+15%	+90%					
			Total	+90%						
IR 4.1.1c	# & % # of community volunteers trained for disaster preparedness and actively engaged during times of disaster	-	2006	-		2247	150%	57.8%	-	-
			2007	3000 (1500)		-				
			2008	5000						
			2009	1541	9541					
			Total	9541						
IR 4.2.1a	# of contingency plans developed and meeting set criteria	-	2006	139		139	42.8%	39%	218.5	6
			2007	371(185.5)		-				

Ref		Baseline	Year	Target	Targets: LOA	Achieved (FY2006 and upto 1st half of FY'07)	Achievement as % of target	Targeted growth rate to achieve LOA	Projected achievement if annual growth rate (2006-2007) remains the same	Additional time required after 2009 to achieve LOA target with current growth rate (in years)
			2008	-						
			2009	-	510					
			Total	510						
PMP 14.4.1	% of target population with access to disaster-proofed facilities	14.5%	2006	-		-	-	25.2%	-	-
			2007	34.5%		-				
			2008	65.5%						
			2009	-	100%					
			Total	100%						
IR 4.2.2a	# of infrastructure projects completed	-	2006	418			260.8%	45%	-	-
			2007	500 (250)						
			2008	500						
			2009	200	1618					
			Total	1618						
PMP 14c	% of People in Target Areas with Access to Emergency Relief Supplies	29.9%	2006	-		-	-	17.9%	-	-
			2007	+40%		-				
			2008	+30%						
			2009	+30%	+100%					
			Total	+100%						
PMP 14c	% of People in Target Areas with Access to Emergency Relief Supplies	-	2006	1411529		-	-	41.4%	-	-
			2007	2650425		-				
			2008	1117038						
			2009	-	5778992					
			Total	5778992						

*Source: Estimated and projected by MTR-Team based on data provided by M&E unit, Care-SHOUHARDO*

**APPENDIX 2: Proposed Organizational model and technical expertise**



## APPENDIX 3: Persons and Villages consulted

## Chittagong Region

District	Location			Organization	Persons Consulted
	Upazila	UP / Pourashava	Village / Slum		
Chittagong			Chittagong City Corporation	CARE	Regional Coordinator S.M. Khaleque Zaman, SHOUHARDO, CARE, and Senior Officials
	Banshkhali	Khankhanabad		Union Parishad	UP Chairman of , and UP Members
			Moulavi Para	VDC	President, VDC and the members
			Buraghata	UDDIPAN (PNGO)	IGA participants ECD Centre PIC members Health Volunteer and Mothers' Group members (Shapla Mohila Group) UDDIPAN staff working for SHOUHARDO
Cox's Bazar				Pourashava	Chairman (in charge) and members
				Mukti (PNGO)	Chief Executive
				COAST, SHED. RIC, MUKTI, SARPV, SHED	PNGO staff (Supervisors, Field Facilitators, Project Coordinators, M&E officer, trainer, Union Facilitator)
			Khaimmar Gona	VDC	VDC Chairman and members Earth Work/ FFW labors
	Chakaria			USCC	UNO of Chakaria, UP Chairmen, and Upazilla officers of 9 ministries
	Teknaf	Baharchhara		Union Parishad	Chairman, SHOUHARDO staff
			Uttar Rahmutterbill Dakhin Sheelkadi	SHED (PNGO)	SHED staff working for SHOUHARDO
			Subrang Pourashava	Mahajer Para	SDC
	Ukhia	Palong Khali	Pashchim Palong Khali	VDC	Chairman, General Secretary and 6 members in Ward no. 5.
EKATA Group				EKATA members and Facilitator	

## Kishoregonj Region

Location				Organization	Persons Consulted
District	Upazila	UP / Pourashava	Village / Slum		
Hobigonj				CARE	Hub Office Staff, Economic Development Unit for Hobigonj and Sunamgonj
				USS	SHOUHARDO staff
	Baniachong	Sujaatpur	Gazipur	Union Parishad	UP Chairman
	Lakhai			USCC	Chairman and members, UP Chairman and Upazilla level Govt. officers were present.
		Murakori	Fulbaria	VDC	VDC Members
	Chunarughat	Gazipur	Barajum	Union Parishad	UP Chairman and members
				VDC	VDC Members, CHV, Agricultural Volunteers
Kishoregonj				CARE	SHOUHARDO-CARE Kishoregonj Regional Office Senior Management Team
	Karimgonj			ORA (PNGO)	SHOUHARDO Staff
	Tarail	Damiha	Maguri	ORA	VDC members PIC members Community Volunteers (Ag, Health)
				SAD	IGA Training participants and facilitators
				IDEA, ORA, POPI, CDA, SARA, SBSKS	PNGO staff (Supervisors, Field Facilitators, Project Coordinators, M&E officer, trainer, SCM Union Facilitator)
	Bhairab	Bhairab	Mushkilar Hati Rail Colony	SDC	SDC members
	Netrakona Bajitpur Mitha Moin	Maijchar Kherjur		SUS (PNGO)	SHOUHARDO Staff
	Kamiar Bali		Union Parishad	UP Chairman and members	
Sunamgonj			Rahamatpur	Union Parishad	UP Chairman and members
			Kawarjore Dakkhin	Union Parishad	UP Chairman and members
	Derai	Vhatipara		VDC	VDC members

## Rangpur Region

Location				Organization	Persons Consulted	
District	Upazila	UP / Pourashava	Village / Slum			
Kurigram				CARE	SHOUHARDO-HUB office, EDU staff	
	Kurigram Sadar	Jatrapur		Union Parishad	Chairman and Members	
		Ghogadha	Char Rawlia	VDC	VDC members	
	Nageswari	Nunkhaoa	Baparir Char	VDC	VDC Members	
				USCC		
Rangpur			Rangpur	CARE	CARE SHOUHARDO Regional Office	
				BRIF, SKS, MJSKS	PNGO Staff (Field facilitators, program Coordinators, Field Manager)	
			Uttar Thakurdas Pallimari	CARE	Field Facilitator	
				CHV	CHV	
				VDC	VDC Members	
	Rangpur Sadar	Rangpur Pourashava	Helal Press Slum	EKATA group	EKATA Members	
				BRIF (PNGO)	Field Facilitator	
Nilphamari	Dimla	Purba Chatnai	Purba Chatnai	SDC	SDC Members	
				EKATA Group	EKATA Members	
				EKATA Group	EKATA Members	
					UDMC	
					VDC	VDC Members
	Nilphamari Sadar	Saidpur Pourashava	Bagbari Camp	SDC	SDC Members	
	Jaldhaka	Golmunda	Char Bhabon Char	VDC Volunteers	VDC members Group of Volunteers IGA participants	
Jaldhaka	Golmunda	Golmunda	JSKS (PNGO)	JSKS Staff working for SHOUHARDO		

**Mid Char Region**

Location				Organization	Persons Consulted
District	Upazila	UP / Pourashava	Village / Slum		
Tangail			Tangail City/ South Collage Para Bosti	SDC	SDC members IGA members EKATA members
		Elenga		Union Parishad	Chairmen and Members



**Dhaka**

<b>Location</b>	<b>Organization</b>	<b>Persons Consulted</b>	<b>Position</b>
Dhaka	Center for Environmental and Geographic Information Services (CEGIS)	Giasuddin Ahmed Choudhury	Executive Director
		M.M. Awlad Hossain	Principal Specialist, Database and IT Division
		Ahmadul Hassan	Division Head R & D and Training
		Mohammed Aminur Rahman Shah	Jr. Professional, R & D and Training
	Asian Disaster Preparedness Center (ADPC)	A.R. Subbiah	Director, Climate Risk Management
	Institutional Development Services Linkage (IDSL)	Taposh Barua	Senior Training Officer
	Network for Information, Response and Preparedness Activities on Disaster (Nirapad)	Palash Mandal	Co-ordinator
	Resource Integration Center (RIC)	Abul Haseeb Khan	Director
	Dwip Unnayan Songstha (DUS)	Md. Rafiqul Alam	Executive Director Md.
	Social Agency for Development of Bangladesh (SAD)	M. Motiur Rahman Sagar	Executive Director
	Gono Unnayan Prochesta (GUP)	Md. Nasir Uddin Ahmed	Director
National Institute of Local Government (NILG)	Md. Arfan Ali	Director General	

	Bangladesh Development Service Centre (BDSC)	Md. Hasan Ali	Executive Director
	United Development Issues for Programmed Actions (UDDIPAN)	Hosne Ara Begum	Program Coordinator
	People's Oriented Program Implementation (POPI)	Md. Majibur Rahman	Deputy Director
	Unnayan Sohayak Sangstha (USS)	Ajoy Biswas	General Secretary
	Social Assistance and Rehabilitation for the Physically Vulnerable (SARPV)	Shahidul Haque	Chief Executive
	Association Socio Economic Advancement of Bangladesh (ASEAB)	Khandoker Zakaria Ahamed	Team Leader
	South Asia Partnership Bangladesh (SAP-Bangladesh)	Shahadat Hossan	Training Coordinator
	Sabalamby Unnayan Samity (SUS)	Showpaen Kr. Paul	Project Director

APPENDIX 4: PNGOs Consulted<sup>15</sup>

Organization	Name of Executives/ consulted person	Location
Asian Disaster Preparedness Center (ADPC)	A.R. Subbiah Director, Climate Risk Management	Dhaka
Association Socio Economic Advancement of Bangladesh (ASEAB)	Khandoker Zakaria Ahamed, Team Leader	Tangail
Bangladesh Rural Improvement Association (BRIF)	Shah Ahsan Habib, Executive Director	
Bangladesh Development Service Centre (BDSC)	Md Hasan Ali, Executive Director	Rangpur
Community Development Association (CDA)	AKM Fazlul Karim, Director	Kishorgonj
Center for Environmental and Geographic Information Services (CEGIS)	Giasuddin Ahmed Choudhury Executive Director	Dhaka
Coastal Association for Social Transformation Trust (COAST)	Rezaul Karim Chowdhury, Executive Director	Chittagong
Dwip Unnayan Songstha (DUS)	Rafiqul Alam Executive Director	Dhaka
Effort for Rural Advancement (ERA)	Serajul Islam, Executive Director	Kishorgonj
Gono Unnayan Prochesta (GUP)	Md. Nasir Uddin Ahmed	
Institute of Development Affairs (IDEA)	Nazmul Haque, Chief Executive	Kishorgonj
Institutional Development Services Linkage	Taposh Barua, Senior Training Officer	Dhaka

<sup>15</sup> All 45 Implementing PNGOs responded to the MTR PNGO survey questionnaire. PNGO staff from different levels was consulted from the above listed PNGOs

(IDSL)		
Jhanjira Samaj Kallyan Sangstha (JSKS)	Mustaf Kamal, Director	Rangpur
Mirjagonj Somaj Unnayan Sangstha (MISUK)	Jashiar Rahman, Executive Director	Rangpur
Mahideb Jubo Samaj Kallyan Samity (MJSKS)	Shyamal Chandra Sarker, President	Rangpur
MUKTI Urban and Rural Development (MUKTI)	Sujit Chowdhury, Chief Executive	Chittagong
Network for Information, Response and Preparedness Activities on Disaster (Nirapad)	Palash Mandal Co-ordinator	Dhaka
Organization for Rural Advancement (ORA)	Ad. Fakir Md. Mazharul Islam, Executive Director	Kishorgonj
Pasashik Parshad	Md. Shamsul Huda, Executive Director	Tangail
People's Oriented Program Implementation (POPI)	Murshed Alam Sarker, Director	Kishorgonj
Resource Integration Center (RIC)	Abul Haseeb Khan, Director	Chittagong
Social Agency for Development of Bangladesh (SAD-Bangladesh)	M. Motiur Rahman Sagar, Executive Director	Kishorgonj
South Asia Partnership Bangladesh (SAP-Bangladesh)	Syed Nurul Alam, Executive Director	Tangail
Social Association for Rural Advancement (SARA)	Tushar Daring, Executive Director	Kishorgonj
Social Assistance and Rehabilitation for the Physically Vulnerable (SARPV)	Md Shahidul Haque, Chief Executive	Chittagong
Sehora Bohumukhi Somaj	Sheikh Sultan Ahmed, Chief Executive	Kishorgong

Kollayan Somity (SBSKS)		
Society for Health Extension and Development (SHED)	Md Umrah, Executive Director	Chittagong
Sabalambay Unnayan Samity (SUS)	Begum Rokeya, Executive Director	Kishorgong
United Development Issues for Programmed Actions (UDDIPAN)	Emranul Haque Chowdhury, Director	Cgittagong
Unnayan Sohayak Sangstha (USS)	Ajoy Biswas, General Sectary	Kishorgong