Evaluation of Australian Government Funded NGO Projects in Africa

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Evaluation of Australian Government funded NGO Projects in Africa

AusAID The Australian Government's
Overseas Aid Program

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GLOSSARY

Accreditation	An assessment of a Non Government Organisation's (NGO's) capacity to appraise, manage, report on, and be accountable for development activities, competently and independently. There are two levels of NGO accreditation with AusAID - base and full – which determine funding eligibility and processes.
AE	African Enterprise
Appraisal	The process of assessing the viability, value and sustainability of a project or activity before it is implemented (*NGOPI*, November 1997).
ANCP	AusAID NGO Cooperation Program. The goal of the ANCP is to subsidise Australian NGO community development activities which alleviate poverty in developing countries in a direct and tangible way.
AusGUIDE	AusAID's activity cycle guidelines (available on www.ausaid.gov.au)
AusAID	Australian Agency for International Development
ANAO	Australian National Audit Organisation
ANGO	Australian Non-Government Organisation
APHEDA	Australian People for Health, Education and Development Abroad
AVI	Australian Volunteers International
Cluster evaluation	Evaluation of a number of similar projects. These may be in the same sector, be funded from the same program or have similar objectives or design.
CDC	Committee of Development Cooperation (with AusAID and NGO representation)
CAA	Community Aid Abroad (Oxfam in Australia)
Component	A component of a project is a set of related activities and outputs which together contribute to the achievement of a project purpose or objective (e.g. a water supply component of a village improvement project).
Country Window	See NGO Country Window.
Ex-post evaluation	Ex-post evaluation of projects is usually undertaken 2-5 years after completion and assesses how well a project and/or activity has achieved its objectives and the sustainability of benefits.
GSA	Government of South Africa
GOT	Government of Tanzania
GOZ	Government of Zimbabwe

Impact	Impact generally refers to what the project is expected to achieve at the goal and objective levels. It measures whether or not the statements of intention (goal and objectives) have been achieved. It can also be measured at the outcome level by asking the question: *What difference has the project made?*
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
KAP	Knowledge, Attitudes and Practice
KZN	KwaZulu-Natal Province, South Africa
Logframe	A logical framework matrix (known as the logframe) is the product of a process of problem analysis and preparation of a logical hierarchy of project/activity objectives; identification of important assumptions and risks; and specification of monitoring and evaluation instruments. The logframe matrix provides a summary of what the project aims to achieve and how, what the main assumptions are, and a framework for developing the activity's monitoring and evaluation system.
NACP	National AIDS Control Program
NGO	Non-government organisation
NGO Country Window	NGO programs funded through AusAID's country and regional programs. There will normally be a funding round calling for project proposals from NGOs addressing specific sectoral or other selection criteria.
NGOPI	*AusAID's Non-Government Organisation Package of Information* (first published in November 1997. A revised version was launched in July 2000 and is available on AusAID's website www.ausaid.gov.au).
Objective	Objective refers to what the project aims to achieve at each level of the logframe hierarchy from the output up to the goal level. One can therefore refer to goal, purpose, component or output level objectives.
Outcome	Outcome is used to describe what the project or activity is expected to achieve at the objective level.
Output	The products and services which are directly produced by an agency or project and delivered to external users. In the context of the logframe hierarchy, outputs are the tangible result of applying inputs and undertaking activities.
PLWHA	People living with HIV/AIDS
Performance information	Performance information is evidence about performance that is collected and used systematically. It should enable judgements to be made on the extent to which outputs are achieved and how these contribute to desired outcomes.

Performance indicator	An indicator is the unit of measurement or pointer that is used to monitor or evaluate the achievement of project objectives and outputs over time. Indicators can include specification of quantifiable targets and measures of quality.
PIA Section	Performance Information and Assessment Section, AusAID
Primary governance	Strengthening of civil society.
PASU	Program Administrative Support Unit (locally engaged staff providing support for AusAID programs at overseas posts).
QAG	Quality Assurance Group, AusAID
Real time evaluation	Reviews of projects during implementation.
SA	Salvation Army
STDs	Sexually transmitted disease(s)
SANGOP	Southern African NGO Cooperation Program, a former AusAID Country Window funding scheme for NGOs.
TAWASA	Tanzania Integrated Rural Water and Sanitation Project
UNAIDS	The Joint United Nations Programme on HIV/AIDS
WV	World Vision
ZAPP	Zimbabwe AIDS Prevention Program

PROJECT SUMMARIES

HIV/AIDS

Winterveld Community AIDS Project in North West Province, South Africa

AusAID funding $140,700 (Window)   Duration: January 1999 to December 2000

Australian NGO: Australian People for Health Education and Development Abroad (APHEDA); implemented by Winterveld AIDS Awareness Trust (WAAT).

The objectives of the project are: to slow the expansion of the HIV/AIDS epidemic in the Winterveld township area by maintaining youth and community HIV education programs; to facilitate the development of peer support groups for people with HIV in the community; to provide support, advice and information to people with HIV and sexually active young people in the Vulingqondo Centre; to maintain volunteer home care teams to assist in the household care of people with AIDS; and to evaluate the project and redesign further education and support efforts.

Shosholoza AIDS Project in KwaZulu-Natal Province, South Africa

AusAID funding $260,183 (Window)   Duration: July 1998 to June 2001

Australian NGO: Community Aid Abroad (CAA); implemented by Targeted AIDS Intervention (TAI).

"Shosholoza" is a word used in South Africa for rallying support for a team in a sports competition or other public contest. The project aims to contribute to the prevention of HIV/AIDS in KwaZulu-Natal through the medium of soccer teams and players as educators to reach soccer players, their supporters, their sexual partners and the broader community. The component objectives are: to conduct research on knowledge, attitudes and practices in relation to safer sex practices of men in soccer teams and associations in KwaZulu-Natal; to lobby leadership in soccer to ensure they include AIDS prevention as part of the support they offer players and integrate AIDS education into their professional development programs for players and the activities they run for the broader community; and to train peer educators using a competency-based model to enable men to communicate with their partners about sexual issues, with a focus on safer sex practices.

Kwetu Women and AIDS Project in Dar es Salaam and seven regional centres, Tanzania

AusAID funding: $656,036 (Window)   Duration: May 1997 to June 2000

Salvation Army Australia (SAA); implemented by Salvation Army Tanzania (SAT)

"Kwetu" means "our home" in Kiswahili. The objectives were: to reduce the risk to commercial sex workers of contracting and transmitting HIV/AIDs through education and counselling activities and provision of condoms; to offer alternative economic options to commercial sex work for the target group through micro-enterprise development and vocational training; to provide sustainable community support networks for former commercial sex workers and to assist former sex workers to educate their home communities on the risks of urban migration and the AIDS epidemic; to improve expertise in Tanzania in AIDS-related activities including AIDS counselling; and to provide efficient and effective project management.

Factory Workers AIDS Project in Harare and adjacent rural areas, Zimbabwe

AusAID funding: $999,273 (Window)   Duration: June 1998 to May 2001

Australian Volunteers International (AVI); implemented by the Zimbabwe AIDS Prevention Program (ZAPP), a program of the Department of Community Medicine at the University of Zimbabwe.

The overall goal of the project is to provide peer education regarding HIV/AIDS and other STDs among factory workers in various industries as an intervention against HIV infection. This will contribute to the improvement of HIV/AIDS prevention in Zimbabwe. The component objectives are: to increase HIV/AIDS awareness among both male and female factory workers through the training of peer educators; to facilitate behaviour change with the aim of reducing new HIV infection in this group through education of workers, and by extension their sexual partners; to provide HIV testing, counselling and education services to participants and their spouses or other sexual partners; to define those elements of a peer education program most likely to be supported by employers; and to provide effective project management.

Child Nutrition

Winterveld Child Nutrition Project in Winterveld, North West Province, South Africa

AusAID subsidy: $37,500 (ANCP)   Duration: May – December 1998

Australian People for Health Education and Development Abroad (APHEDA); implemented by St Peter's Madlenkosi Clinic, a non-government clinic providing health services in the Winterveld area with an emphasis on mother and child health care.

The objectives of this seven-month project were: to improve the health of mothers and children in the Winterveld through supporting local training so that the Clinic could extend promotion of healthy nutrition among mothers in the community; to establish ten women's self-help groups based on small vegetable gardens or savings societies; to provide nutrition education and support to approximately 10 mothers/grandmothers per day over six months; and to maintain ongoing liaison with local and regional primary health care providers and collaborate closely with the two local doctors and key traditional healers.

Education

Social Empowerment Diploma in KwaZulu–Natal Province, South Africa

AusAID subsidy: $70,500 (ANCP)   Duration: December 1997 to December 1998

African Enterprise (Australia); implemented by African Enterprise (South Africa)

The project aimed to provide 30 disadvantaged black South Africans with a broad foundation of theoretical and practical development skills by sponsoring them to undertake the Social Empowerment and Development Diploma at African Enterprise's Christian Leadership Training Centre in Pietermaritzburg, KwaZulu-Natal. It was hoped that the training would lead to better employment and other income generating opportunities for graduates and that they would contribute to social empowerment and development in their communities.

Water and Sanitation

Tanzania Integrated Rural Water and Sanitation Project (TAWASA) in Msalala Division of Kahama District, Shinyanga region of Tanzania

AusAID funding: $1,076,661 (Window)   Duration: July 1999 to June 2002

World Vision Australia (WVA); implemented by World Vision Tanzania (WVT)

The project aims to improve community health by reducing morbidity and mortality associated with a lack of adequate water and poor sanitation. It is a rural water supply and sanitation scheme based mainly on the construction of shallow wells and training at the user level in their maintenance and management. Construction of freshwater harvesting tanks and latrines at schools, markets and health dispensaries is also part of the project. Major component objectives are: to strengthen the institutional capacity of village health services/structures to manage water and sanitation facilities; to improve household health sanitation practices through appropriate training packages; to improve access to sustainable clean water sources and sanitation facilities; and to effectively manage and monitor the project.

EXECUTIVE SUMMARY

Aim of the evaluation

The main objectives of non-government organisation (NGO) cluster evaluations are to provide an independent assessment of NGO project performance in the field and anticipated development impact and to verify the self-assessments provided by NGOs to AusAID. The Africa NGO cluster evaluation looked at seven projects - five Country Window and two ANCP funded - in Tanzania, Zimbabwe and South Africa. Four addressed HIV/AIDS prevention and the remaining three were interventions in water and sanitation, child nutrition, and social empowerment training.

About 7% of Australia's aid program is channelled through NGOs. This constant support reflects the Government's acknowledgement of the importance of NGO activities as partners of the official aid program in providing assistance to developing countries. A key theme of AusAID's new NGO policy statement, *Working With Australian NGOs (1999)*, is that the Government and NGOs need to know more about the performance of activities to improve and demonstrate quality and impact.

Summary of main findings

Based on a comprehensive performance analysis using AusAID's new quality standards[1], only three of the seven projects evaluated had a quality rating[2] of 'satisfactory overall' or higher – see Table 2.1 on page 5. Based on a narrower assessment of achievement of objectives and delivery of outputs, which NGOs are currently required to report to AusAID[3], the evaluation found two projects were 'fully satisfactory' and a further two were 'satisfactory overall'. In every case the NGOs scored the achievement of their objectives and outputs higher[4] in their reports to AusAID than the evaluation team.

Notwithstanding these findings, the projects are all targeting high priority needs in Africa and being implemented by highly dedicated people. It should also be noted that a number of the projects evaluated were designed and implemented prior to AusAID introducing enhanced performance, management and operational standards which are now being used to assess the performance of bilateral projects and programs. A major conclusion of the evaluation is that the overall quality of the NGO program in Africa could be lifted considerably if the standard of project designs could be improved and if design frameworks could be utilised more effectively as management tools.

The strongest performing project overall was the *Factory Workers AIDS Prevention Project* in Zimbabwe. The peer education component of this project is considered best practice. The weakest performing project was the *Winterveld Community AIDS Project* in South Africa. The local implementing partner is a small community based organisation operating in a difficult socio-economic environment and there have been serious management problems.

It should be noted at the outset that many of the shortcomings and challenges for both AusAID and the NGOs identified in this report are similar to those being identified by AusAID through its new quality assurance processes across the aid program. The move to results-based management and performance reporting by the Australian Government and other OECD governments poses

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1 See *AusGUIDELINE*, "Project Quality Standards", in *AusGUIDE* available on AusAID's website www.ausaid.gov.au

2 A 'quality rating' is a measure of the quality of individual projects expressed as a score or a standard. A 5-point scale is used as follows: 5 = best practice; 4 = fully satisfactory; 3 = satisfactory overall; 2 = marginally satisfactory; 1 = weak.

3 As detailed in AusAID's *NGO Package of Information (NGOPI)*, available on www.ausaid.gov.au

4 The divergence averaged 1.5 points overall using the *NGOPI* scores – see Box 6.1 (p.34).

challenges for all official aid agencies and NGOs. Performance measurement, particularly in fields such as community development and HIV/AIDS prevention, is difficult. Quantitative performance information must be accompanied by qualitative performance information and analysis.

Appropriateness of objectives

Project objectives were fully appropriate in terms of AusAID policy settings (including policies on poverty reduction, gender and family planning) and with recipient country needs and priorities. However good ideas have often not been translated into realistic, achievable objectives, reflecting shortcomings in problem analysis and conception.

Standard of design

The standard of design of NGO projects was generally weak and requires early attention. Activities are often presented as outputs and objectives, not as activities, and risk and sustainability are inadequately addressed. Poor design inhibits appraisal[5] by AusAID, which was found to be superficial, and also undermines monitoring, implementation and reporting by NGOs.

The requirements for project design and procedures for facilitating revisions currently set for NGO projects under *NGOPI* need to be strengthened. For Country Windows, AusAID should provide longer notice of funding rounds to provide more time for NGOs to undertake participatory planning and design. At the same time, it was apparent to the evaluation team that many NGOs and their implementing partners are not yet fully conversant with, or convinced of the benefits, of utilising design as a management tool.

AusAID and the NGOs need to work together to improve the standard of design of NGO projects and programs presented for funding, and agree on a mechanism for facilitating the review and improvement of design documents during implementation. It is important that designs include performance indicators and monitoring systems.

Management

AusAID's screening of NGO projects submitted for Country Windows funding, and subsequent oversight, was superficial, both being aggravated by poor design and reporting. The oversight by Australian NGOs of their African counterparts was limited but appropriate overall. There is considerable potential for Australian NGOs to play a more valuable supporting role in the implementation of projects by developing the capacity to facilitate review processes for their implementing partners (including review of design).

The management capacity of implementing organisations varied considerably from very competent to weak. For example, poor project management undermined the *Winterveld Community AIDS Project.* As well, the Australian NGO did not satisfactorily describe the objectives of the Social Empowerment Diploma Project, but without serious consequences. Coordination was satisfactory overall but there were significant gaps in the HIV/AIDS projects.

Accuracy and quality of NGO reporting

The accuracy and quality of NGO reporting needs to be improved to enable AusAID to make an informed judgement on quality and performance. NGOs report mainly on activities, rather than what the activities have achieved in terms of the project's objectives (eg it is not sufficient to report that training has been undertaken without reporting what the training has achieved or contributed to). Some reports are inaccurate in important respects and there is a general tendency to be overly positive, sometimes to the point where the information becomes misleading. The

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5   In this report, an appraisal is an assessment of a project proposal by AusAID against the agreed selection criteria and policy framework for a particular NGO program. It is normally undertaken by a panel.

evaluation team rated achievement of objectives well below what NGOs have reported. This is not to suggest that NGOs are deliberately misleading AusAID about the performance of their activities. The quality of reporting, and the dialogue between NGOs and AusAID could be strengthened considerably if the standard of design is raised. But it also requires a willingness on both sides to engage in a more realistic discussion of the impediments to quality and performance, including the limitations of the project paradigm of aid delivery.

NGOs and their implementing partners still see performance information as a donor requirement and relevant to reporting, not project management. Shortcomings in management have implications for the new accreditation process developed by AusAID in consultation with NGOs.

In any event AusAID cannot exercise responsible appraisal and oversight of NGO projects until the design requirements are strengthened. The importance of design as the foundation for monitoring was referred to as a key lesson in AusAID's cluster evaluation of NGO projects in Vietnam and this study repeats this finding. It also applies to AusAID managed projects.

Achievement of outputs and objectives

Two projects are fully satisfactory in terms of their achievement of outputs and objectives and a further two are satisfactory overall. Even so, the majority of projects included in the cluster are below target in terms of planned outputs and three have not or are unlikely to realise their major development objectives. Problems encountered by projects in achieving objectives include deficiencies at conception (including technical assessments), unrealistic targets (not revised), inadequate staffing, failure to resolve management problems and delayed implementation. In a number of cases however the problem was simply an inability to deliver on a meaningful scale. Some projects will need more time to achieve their objectives and deal with sustainability issues.

Poverty

The objectives of all projects evaluated are consistent with two of the major planks of AusAID's poverty reduction framework: 'to increase the productivity of people in developing countries, including the poor; and to overcome structural disadvantage and discrimination against the poor'. Although none of the project designs include an explicit poverty reduction strategy or indicators, alleviation of the impact of poverty can be readily inferred from the target groups and component objectives. Four of the projects, including the two ANCP projects, address poverty directly. Two were fully satisfactory in the way they did so.

Gender

All of the projects evaluated meet AusAID's requirement that a gender perspective be incorporated in all activities. The designs of the Country Window projects include a more detailed gender analysis, which is not required in the ANCP project proposal format. Gender inequality is a crucial issue in interventions aimed at preventing HIV/AIDS. *The Factory Workers AIDS Project* has gone the furthest in trying to bridge the communication gap between men and women through challenging male peer educators about cultural stereotypes about relationships. The *Shosholoza AIDS Project* is aiming to address issues of sexuality and behavioural change with male soccer players but lacks the resources to fully implement. Other projects have adopted gender mainstreaming[6] or, in the case of K*wetu Women and AIDS* and the *Winterveld Child Nutrition Project*, have an exclusive focus on women and children.

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6   Gender mainstreaming means ensuring that the needs, priorities and interests of women as well as men are considered at all levels and stages of development activities.

Family planning

None of the projects evaluated included a specific family planning component although one of the performance indicators for the *Kwetu Women and AIDS Project* was a reduction in the number of unplanned pregnancies in commercial sex workers. All of the HIV/AIDS projects promote condom use to reduce the transmission of HIV/AIDS. The prevention of pregnancy through condom use is a secondary goal and is voluntary and based on informed choice.

Environment

Only the rural water and sanitation project *(TAWASA)* required evaluation from an environmental standpoint and it was only partially satisfactory in this regard.

Australian identity

Australian identity was the strongest in the *TAWASA Project* due to World Vision's long involvement in the project area with Australian Government support. Elsewhere, acknowledgement of Australian support was both appropriate and adequate.

Empowerment, capacity building and governance

The projects have generally made a contribution to empowerment at the individual level, although often on a limited scale. The most difficult challenge has been giving practical recognition to the rights of the most disempowered, including people living with HIV/AIDS (PLWHA). The NGOs have difficulty in fully demonstrating their claimed advantage in involvement of communities and strengthening of civil society or what may be termed 'primary governance'. All projects have the potential to contribute in this area but only one is fully satisfactory.

The evaluation also found that beneficiary groups and communities have been involved only superficially in project conception, design and implementation and as a consequence the projects have done little to strengthen the capacity of communities and groups to plan, implement and evaluate interventions for themselves. This would have been particularly important in relation to community responses to the HIV/AIDS pandemic. Efforts have been made towards capacity building through the training of peer educators, establishment of Water User Groups etc, but these achievements are vulnerable beyond the life of the projects concerned. As noted above, AusAID should endeavour to provide longer notice of Country Window funding deadlines to enable more time for NGOs to consult with beneficiary groups and communities and prepare participatory designs.

Human rights have not been addressed directly in any of the projects although some do impact on rights. It is evident from a number of projects that more conscious attention should be paid to advocacy at the policy level. The NGOs and AusAID appear to be uncertain about the role human rights protection and promotion should play in Australian funded projects.

Sustainability

Five of the seven projects have funding antecedents and the remaining two are regarded by the NGOs concerned as first phase activities. It is evident that the NGOs concerned do not anticipate projects achieving sustainability in the short-time frame of one funding round, highlighting an apparent conflict between the formal requirement for sustainability within the funding period and common practice. Although the team agrees sustainability within short timeframes is generally not feasible, more attention should have been paid in the projects evaluated to the sustainability of benefits and to those activities that are essential to sustain benefits by the end of the funding period. None of the NGOs had an exit strategy[7].

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7   Appendix 22 of *NGOPI* (1997) states under "Activity Description and Analysis", "explain how Activity achievements (related to outcomes and objectives) will be sustained when this funding ends. Describe how the Activity plans to achieve sustainability".

Impact

Two of the projects have been instrumental in raising Government and community awareness of key target groups for HIV interventions – urban workers through the *Factory Workers AIDS Project* and commercial sex workers through the *Kwetu Women and AIDS Project*. The *Factory Workers Project* is considered to have had the greatest impact overall due to the effectiveness of its peer education program and the impact on workers. It has the advantage of having a strong empirical basis in an early research project with a control group. The *Kwetu Women and AIDS Project* has had less impact on its target group, although given the inherent difficulties, impact is considered satisfactory overall.

The *Social Empowerment Diploma* has modest objectives compared to the other projects in the cluster but was well conceived and had a satisfactory impact on the students who did the course and on their communities. The *TAWASA Project* is expected to have a satisfactory impact on the health of its target population. It has the advantage of building on the combined impact of two previous AusAID funded projects.

The *Shosholoza AIDS Project* has considerable potential but has not yet reached it due to under-resourcing. Its impact is considered marginally satisfactory to date. The impact of the two remaining projects, *Winterveld Child Nutrition* and *Winterveld Community AIDS* is also considered marginally satisfactory as a consequence of poor performance in relation to outputs and objectives. The most difficult challenge for HIV/AIDS projects in Africa is that of bridging the 'KAP gap' (the gap between knowledge, attitudes and practice). The level of awareness about HIV/AIDS is now quite high although a number of myths and misconceptions remain. HIV/AIDS projects should go beyond awareness and information to promote and measure behaviour change.

Overall value for money of the seven projects was not established. The NGO projects evaluated showed some evidence of savings in establishment costs and access to administrative services although the team was unable to accurately assess value for money. There was apparent equity in the distribution of benefits in the projects reviewed.

Key lessons and recommendations

Project Design and Management

1. AusAID officers cannot adequately appraise project proposals or reliably assess performance if objectives, outputs and indicators are poorly defined. The issue here is not micro-management or the availability of resources to monitor NGOs. It concerns the need for a more reliable foundation for responsible appraisal and oversight, and for better informed dialogue between AusAID and NGOs about development practice.

2. The *NGO Guidelines and Package of Information (NGOPI)* produced by AusAID in consultation with NGOs do not go far enough in encouraging satisfactory design. As a consequence poor definition of objectives, outputs and indicators leads to difficulties in performance monitoring which compromise implementation. There is significant potential to improve implementation and risk management by improving design, provided the emphasis is on utilising design as a management tool and not as a rigid blueprint.

3. In consultation with NGOs, AusAID should give urgent attention to revising proposal proforma to require higher standards of project design. In particular a summary logframe should be used, in line with *AusGUIDE*, and performance indicators should be required at the objectives level.

4. AusAID should also endeavour to provide longer notice of NGO Country Window funding rounds to give NGOs sufficient time to consult with beneficiaries and stakeholders and prepare participatory, quality designs.

5. In view of the centrality of poverty reduction in the aid program, AusAID should encourage NGOs to include more explicit poverty reduction strategies in their project designs. This should involve identifying how an activity (eg HIV/AIDS prevention, child nutrition, rural water and sanitation) contributes to poverty reduction.

6. Equally important to the standard of design at entry is the ease with which project design documents can be revised to address flaws and/or changed circumstances and facilitate implementation. AusAID should clarify its position on revisions to design documents and what can and cannot be changed (beyond changes in budget lines). This could be achieved by requiring NGOs to more clearly indicate changes to design during implementation (rather than simply advising budget line changes) possibly through a 'change frame'.

7. For projects funded under NGO Country Windows, in appropriate circumstances AusAID should consider allowing an inception phase over the first 6–12 months to enable further development and modification of the project design in consultation with beneficiaries. This could include baseline and KAP studies and analysis, as appropriate. At the conclusion of the inception phase, the design should be reviewed (see Recommendation 8).

8. NGOs should be either encouraged or required to review projects funded under Country Windows towards the end of the first year of implementation. This should include a review of the accuracy and efficacy of design documents. Facilitation of the review would be the Australian NGO's responsibility through a participatory process in-country. AusAID should consider ways to strengthen NGOs' capacity in this area.

9. AusAID and the NGO community need to address deficiencies in the use of performance information as a management tool. This could be through training and/or future revisions to *NGOPI*.

10. Shortcomings in project management and oversight identified for some projects suggest that AusAID should ensure that accreditation reviews strengthen the integrity of criteria relating to design and management issues.

11. To further strengthen risk management, spot checks and/or reviews should be undertaken at regular intervals utilising resources available in-country, including appropriately trained PASU, local contractors or Australian organisations with local offices.

12. In most cases, Australian Government funds should only be used to support established NGOs with a proven track record in-country and not unknown or high risk local NGOs or community-based organisations. Where an Australian NGO makes a case for supporting an unknown or high risk local partner to implement a worthwhile development activity, an appropriate risk management strategy should be included in the project design.

Empowerment, capacity building and governance

13. The participation and empowerment of target groups and communities cannot be tacked on to projects – their input has to be secured at conception and design and facilitated throughout implementation *inter alia* by negotiating roles and responsibilities in monitoring and reviewing performance. Sufficient time is needed to do this properly.

14. AusAID and the NGOs should review their empowerment and capacity building strategies, particularly in terms of involving target groups, communities and local stakeholders in project conception, design and implementation. These are fundamental issues in primary governance that should be more adequately addressed at design and appraisal.

15. AusAID should clarify the role human rights protection and promotion should play in Australian Government funded NGO projects and how this should be assessed upon appraisal.

Sustainability

16. A clearer distinction needs to be drawn between the sustainability of activities and the sustainability of benefits and applied at conception, design and appraisal.

17. AusAID should clarify what is required of NGOs in relation to sustainability through discussion and subsequent amendment to *NGOPI*. The issue of sustainability should thereafter be addressed more rigorously at appraisal.

18. At the same time, the issue of sustainability should be addressed more realistically by AusAID at both a policy and project level in line with *AusGUIDE* definitional and procedural guidelines. AusAID should continue to expect project benefits and activities supporting benefits to be sustainable, but a one to three year time frame will not always be appropriate.

19. AusAID should consider if it should anticipate funding proven NGO projects for longer periods (eg as a second phase). If this became the practice it would nevertheless be appropriate to require applications for extensions and to assess them on their merits in equal competition with new proposals.

Impact

20. A consideration of the impact of projects is vital but it remains difficult to measure. There will not be any progress on this issue until definitions and methods are agreed between AusAID and NGOs. Once these matters are clarified, it should be reasonable to require NGOs to include consideration of impact in design and an assessment of impact in project completion reports.

21. It is the team's view that consideration should be given to a 'sunset' approach to funding in South Africa where the major issue is the government's handling of redistribution rather than the lack of resources.

Sector specific

22. AusAID should not provide funding for HIV/AIDS projects that consist solely of awareness and information activities. HIV/AIDS projects must go beyond awareness to promote and measure behaviour change. AusAID needs to be more stringent in its appraisal of HIV/AIDS activities to ensure that they have a realistic strategy for bridging the KAP gap.

23. The problem of HIV/AIDS in Africa is of such proportions that there is a strong case for supporting innovative, cutting edge projects. Similarly, the problem of mother-to-child transmission of HIV is of such importance that consideration should continue to be given to projects that address this issue. Mainstreaming reproductive health education in schools and the media would be an effective strategy for addressing HIV/AIDS.

24. The design and appraisal of water and sanitation projects should take account of the context, existing facilities and the role of the private sector, local institutions and communities in the development, operation and maintenance of water supply systems.

NGO comments on evaluation report

The main issues raised by the NGOs whose projects were evaluated in response to this report are:

- that the evaluation team applied the *AusGUIDE* quality standards to NGO projects whereas under the *NGOPI* guidelines, NGOs have only been required to report to AusAID on the achievement of objectives and delivery of outputs. *(Response: AusAID is seeking to more rigorously assess and improve the quality of all activities funded through the aid program, including NGO activities. A key theme of AusAID's new NGO policy statement,* Working With Australian NGOs *(1999), is that the Government and NGOs need to know more about the performance of activities to improve and demonstrate impact. The* AusGUIDE *quality standards were also used in the Vietnam NGO cluster evaluation);*

- that as part of the evaluation process, the team recast the objectives of some of the projects to make it easier to assess achievements against objectives and outputs. *(Response: This was considered necessary because in many cases what the NGOs presented as "objectives" and "outputs" were really activities. The recasting involved "unpacking" the project proposals to identify the goal, purpose and objective(s) of the projects and distinguishing between component level objectives, outputs and activities. This enabled the team to assess the extent to which objectives and outputs had actually been achieved, not merely whether activities had been implemented);*

- that the emphasis on project design and logframes in the report suggests a shift back to a blueprint approach to development. *(Response: Lesson/recommendation 6 states that "equally important to the standard of design at entry is the ease with which project design documents can be revised to address flaws and/or changed circumstances and facilitate implementation". Lesson/recommendation 8 states that "NGOs should be either encouraged or required to review projects funded under Country Windows towards the end of the first year of implementation. This should include a review of the accuracy and efficacy of design documents");*

- that the team constructed a new category of "targets" and assessed projects against targets rather than against the outputs defined in the project proposals. *(Response: The Activity Report and Financial Acquittal Pro Forma set out in Appendix 28 of* NGOPI *(1997) requires NGOs to report on the extent to which the major activity outputs are likely to be achieved, using numeric measures if the performance indicators set out in the project proposal are quantifiable. In most cases, NGOs do provide numeric measures of proposed outputs in their funding proposals. These equate to targets);*

- that AusAID was inflexible about the timing of the evaluation. *(Response: AusAID gave the NGOs the full four week's notice required under its Umbrella Agreement with NGOs);*

- that the evaluation team wanted to conduct, as far as possible, randomised site visits, not stick to a pre-arranged itinerary by the NGOs. *(Response: the approach of the team was made clear to the NGOs during telephone interviews the week prior to the team's departure for Africa)*; and

- One of the Australian NGOs has complained that their program officer, who was in Africa at the time of the evaluation, was not invited to participate in the site visits but only to attend the opening and closing meetings between the evaluation team and the project staff. *(Response: the team explained to the Australian NGO representative that to include him in the site visits would be unfair to the other Australian NGOs who did not have representatives present at the time of the evaluation.)*

1   INTRODUCTION

This is the second of two cluster evaluations undertaken by AusAID of projects funded through Australian Non Government Organisations (NGOs) as part of AusAID's NGO accreditation risk management cycle and response to the recommendations of the NGO audit reports of the Australian National Audit Office (ANAO) (1996,1998). The NGO cluster evaluations serve important accountability and learning functions for both AusAID and the NGOs. Further information about AusAID's management of NGO programs is provided in the Terms of Reference for the evaluation at Annex 1 of this report.

The first evaluation was of NGO projects in Vietnam.[8] Africa was chosen as the location for the second evaluation because of the relative size and importance of the NGO program in the overall Africa program and because it offers a representative spread of NGOs involved in development projects both through Country Windows and the ANCP[9]. The Africa evaluation has followed the recommendation of the Vietnam evaluation to only include projects funded under the current NGO accreditation and funding guidelines introduced on 1 July 1997[10]. This was seen as being of most value to AusAID and the NGO programs as lessons arising from the evaluation will be directly relevant to current implementation and reporting guidelines. It will also serve an important accountability function by interrogating a sample of NGOs' self-assessments of project performance, which under the current arrangements form the basis of AusAID's reporting to Parliament on the performance of NGO programs.

Seven projects were selected with a view to achieving a geographic and sectoral balance as well as examples of both ANCP and NGO Country Window projects implemented since July 1997. The views of the African posts, AusAID's Africa and NGO Sections and Sector Groups were sought on the final selection. An Advisory Group was established comprising representatives from these program and sector areas and from the Australian Council for Overseas Aid (ACFOA), the NGO peak umbrella organisation in Australia.

The restricted timeframe led to more HIV/AIDS projects than water and sanitation projects being included in the evaluation for the reason that the HIV/AIDS projects were more advanced in implementation. It also meant that it was only possible to do ex-post evaluations of the two single year ANCP projects funded in 1997-98. Real-time evaluations (or reviews) were undertaken of the five Country Window projects that were at various stages of implementation. Summaries of the seven projects included in the cluster appear on the facing pages. All of the Australian NGOs concerned are fully accredited with AusAID.

The report includes many generalisations about the performance of Australian funded NGO projects in Africa based on the seven projects. Although the cluster evaluation approach is credible and relatively cost efficient, there are limitations, principally related to the representativeness of the sample in each case and the depth of the analysis. Notwithstanding these caveats, and the mix of real time and ex-post evaluations, the team submits that the findings, lessons and recommendations of this report are of general relevance to NGO programming in Africa. As well, a number of the projects evaluated were designed prior to AusAID introducing enhanced performance, management and operational standards which are now used to assess the performance of bilateral projects and programs.

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8   *Assisting Local Communities: Evaluation of Government Funded NGO Projects in Vietnam*, AusAID Quality Assurance Series No 18, March 2000

9   Country Windows are NGO programs funded through AusAID's country and regional programs, in this case Africa. There is normally a funding round calling for project proposals from NGOs addressing specific sectoral or other selection criteria. In 1997-98, there was a Country Window funding round for HIV/AIDS projects in Africa. This was followed in 1998-99 by water and sanitation and in 1999-2000 by food security. The AusAID NGO Cooperation Program (ANCP) subsides NGO projects that seek to alleviate poverty in a direct and tangible way. ANCP projects are generally smaller and of shorter duration than Country Window projects.

10   Set out in the *NGO Package of Information (NGOPI)*, available on www.ausaid.gov.au

As anticipated in the Terms of Reference, the evaluation report provides recommendations for future revisions of the *NGO Package of Information (NGOPI)* and program planning for Africa (particularly for South Africa, Zimbabwe and Tanzania). The NGO community, through the Committee for Development Cooperation (CDC) and other forums, has been informed of the outcomes of the evaluation so that lessons learned can be utilised by both NGOs and AusAID to improve more widely program performance and reporting.

1.1   Evaluation objectives

The main objectives of NGO cluster evaluations are to provide an independent assessment of NGO project performance in the field and anticipated development impact and to verify the self-assessments provided by NGOs to AusAID. Thus the NGO cluster evaluations serve important accountability and learning functions for both AusAID and the NGOs.

This evaluation had the following specific objectives:

- To assess the effectiveness, efficiency and impact of Australian Government-funded NGO projects in Africa including the achievement of their stated objectives, delivery of planned outputs and sustainability strategies.

- Drawing on the evaluation's field assessment, to corroborate the self-assessments provided by NGOs in their activity reports to AusAID on the achievement of objectives and delivery of significant outputs.

- To provide comment on program delivery aspects and the role of Australian NGOs in Africa.

- To distil lessons and best practice approaches for both the Africa program and NGO programs generally to improve the performance of NGO projects.

1.2   Method and approach

Quality frame

The team developed a quality frame for the evaluation with eleven attributes or standards based on the strengthened quality standards contained in *AusGUIDE*.[11] The team started with the quality frame developed by AusAID's Quality Assurance Group (QAG) for bilateral projects and programs and modified it to address the NGO context, for example putting more emphasis on empowerment and local capacity building and removing considerations relating to contract management and the contribution of the partner government.

The performance and quality standards used by the evaluation team are comparable to those used in the Vietnam NGO cluster evaluation, although the team decided not to use the same quality frame because the balance between the quality attributes did not appear entirely appropriate (eg sustainability constituted three out of the eleven attributes used in the Vietnam evaluation).

The team elected to disaggregate the QAG attribute 'appropriateness of objectives and design' and assess the standard of design separately. This assisted the team to identify key strengths and weaknesses (compare the scores in the second and third columns of Table 2.1). The team considered poverty focus, gender and the environment as separate standards (as did the Vietnam evaluation) but discussion of these attributes is included under appropriateness of objectives (Chapter 3) and impact (Chapter 9) in the report.

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11 The eleven attributes included by the team were: Appropriateness of Objectives; Poverty Focus; Gender; Standard of Design; Management; Coordination; Empowerment, Capacity Building and Primary Governance; Achievement of Objectives; Impact; Sustainability. See Table 2.1 (p 5).

Scoring

Box 1.1: Quality and performance scale	
5:	Best practice
4:	Fully satisfactory
3:	Satisfactory overall
2:	Marginally satisfactory
1:	Weak

To score each of the eleven attributes the team used the five-point rating scale now used to assess quality across the Australian aid program (see Box 1.1 above). The Vietnam cluster evaluation used the same scale and it is to be included in the revised *NGOPI* together with the guidance notes prepared by AusAID for the use of the terms employed by the evaluation team. This will replace the previous *NGOPI* scale (see below and Box 6.1).

NGOPI scale

Achievement of objectives, one of the eleven standards included in the evaluation team's quality frame, was treated somewhat differently in so far as the team first applied the self-assessment procedures and scale required of NGOs for self-reporting by the original *NGOPI* (see Box 6.1, page 33). This was then taken into account in determining performance and quality in relation to achievement of objectives. The form of assessment specified in *NGOPI*[12] derives achievements from the delivery of outputs, which is a fundamental and valuable exercise. It was also appropriate to utilise the *NGOPI* scale to provide a basis for discussing and comparing assessments with the implementing organisation and for assessing the accuracy of NGO reporting. To satisfactorily assess achievements against outputs and objectives, in some cases the evaluation team had to recast the outputs and objectives presented in project proposals in order to distinguish between activities, outputs and objectives and to assess the extent to which objectives had actually been achieved.

At AusAID's request, the team also considered two other aspects that were not included in the scoring - adherence to family planning guidelines and the Australian identity of the project.

Desk review and questionnaire

Before departing for Africa the evaluation team conducted a desk review of the projects included in the cluster and a questionnaire was sent to the six Australian NGOs concerned by which they were asked to self-assess their performance using both the *NGOPI* criteria and specified project quality standards (see *Questionnaire* at Annex 2). In the week before departure, telephone interviews were conducted with the project managers of each of the Australian NGOs.

Field work

The team spent one month in Africa (see *Itinerary* at Annex 3) and was able to devote three to four days to each project. The basic approach with each project included the following.

The evaluation team first met to agree on key issues and to divide writing responsibilities amongst team members (including the local consultant).

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12 See Activity Report and Financial Acquittal Pro Forma in Appendix 28 of *NGOPI* (1997).

A three-hour planning workshop was held with managers and staff of the implementing organisation to share ideas on key issues and agree the methods for evaluating them. Discussion also took place regarding number and composition of teams and the itinerary.

It was not intended that representatives of Australian NGOs be present during the evaluation however in the two cases where representatives made themselves available they were invited to attend the opening and closing sessions (but not the field work proper).

Managers and staff of implementing organisations participated fully in the field work. Two to three mixed teams were formed to maximise the number of sites/key informants/beneficiaries.

The evaluation team randomly selected the sites and beneficiaries visited, although a small number of pre-arranged visits were included.

A combination of strategies was used at each site (whether it was village, factory, brothel, etc) including key informant interviews or meetings, mapping exercises, focus group discussions and transects/inspections.

A three-hour debriefing workshop was held with the implementing organisation on the final day at which the five issues were discussed and the implementing organisations were asked to self-assess (and score) their performance against project objectives. The evaluation team also put forward and explained its provisional scores.

1.3   Evaluation team

The evaluation team consisted of:

- Team Leader (Consultant) – Mr Bernard Broughton, Project Design and Management P/L

- Team Member (Consultant) – Mr Doug Campbell, Development Consultant

- Team Member and Task Manager - Ms Irene Wettenhall, PIA Section, AusAID

- Team Members (short-term local consultants):
    - Tanzania - Mr Benedict Michael, Department of Rural Water Supply, Ministry of Water
    - Tanzania - Mrs Zebina Msumi, Head of Counselling and Social Support, National Aid Control Programme
    - Zimbabwe – Mr Alfred Chingono, Clinical Epidemiology Unit, University of Zimbabwe
    - South Africa - Mrs Yasmin Turton, Development Consultant

- Resource Person – Ms Vilaisan Campbell, NGO Section, AusAID

2   OVERALL QUALITY AND PERFORMANCE

Table 2.1: Overall quality and performance

Project/ Attribute	Appropriateness of Objectives	Standard of Design	Poverty Focus	Women and Children	Environ– ment	Manage– ment	Achievement of Objectives	Coordi– nation	Empower– ment and Capacity Building	Sustain– ability	Impact	Overall scores (averaged)
Factory Workers AIDS	5	3	3	4	n/a	4	4	3	3	3	4	3.60
Social Empowerment Diploma	4	1	4	3	n/a	3	4	3	4	3	3	3.20
Kwetu Women and AIDS	4	2	4	4	n/a	3	3	3	3	2	3	3.10
TAWASA (Water and Sanitation)	4	2	3	3	2	4	3	3	3	2	3	2.91
Shosholoza AIDS	4	2	3	3	n/a	2	2	3	2	2	2	2.50
Winterveld Child Nutrition	3	1	3	3	n/a	2	2	3	2	2	2	2.30
Winterveld Community AIDS	4	1	3	3	n/a	1	1	3	1	1	2	2.00
Average scores	4.00	1.71	3.29	3.29	2.00	2.71	2.71	3.00	2.57	2.14	2.71	2.80[13]

The average score is 2.81 if the environment is excluded.

2.1   Project quality ratings

Table 2.1 (above) records scores for each project against each attribute assessed by the evaluation team. Based on this comprehensive performance analysis, only three of the seven projects evaluated scored over 3 (satisfactory overall). Average project scores ranged from 2 (marginally satisfactory) to 3.5 (satisfactory overall but not quite fully satisfactory).

2.2   Areas of strength and weakness

Not surprisingly the strongest attribute of the projects assessed was **appropriateness of objectives,** which was fully satisfactory overall. All projects accorded with national needs and priorities and AusAID's policy settings. However, most projects had deficiencies in research/problem analysis, as well as project conception, detracting from the performance against this quality attribute.

The team separately assessed the contribution of each project to **poverty reduction** and to realising the **rights of women and children**. Both were more than satisfactory overall. Most projects mainstreamed poverty and gender but lacked strategies and specific performance measures, weakening their impact in these key areas.

A key weakness was the **standard of design** employed, which was less than marginally satisfactory overall. Only one project employed a design that the team considered satisfactory overall. Three projects had designs that the team considered weak, including the Social Empowerment Diploma which nevertheless performed well overall. This apparent anomaly is explained by the fact that AE Australia contributed funds to an ongoing course run by AE South Africa and the project proposal submitted to AusAID was not used as the basis of project implementation.

The second most problematic area was sustainability, only slightly better than marginally satisfactory overall. None of the projects had what could be described as an exit strategy and few really gave much attention to sustainability, other than expecting to be able to secure continued funding from AusAID and/or an alternative source. The team agrees that sustainability within short timeframes[13] is generally not feasible, but more attention should have been paid in the projects evaluated to the sustainability of benefits, as distinct from project funding, and to those activities that are essential to sustain benefits by the end of the funding period.

Management of the selected projects was less than satisfactory overall, as was **empowerment, capacity building and primary governance**. There was considerable variation across the projects in both categories, from weak to fully satisfactory. In one case the management problem that undermined the project was present at the outset but not noted as a risk by the Australian NGO. Although many projects made a contribution to the empowerment of individuals, including volunteers and peer educators, only two of the projects could be said to be based on existing community or group initiatives. Moreover across the seven projects communities and target groups have only been involved superficially in project design and implementation. One consequence is that the projects are doing little to strengthen the capacity of communities and groups to plan, implement and evaluate interventions for themselves.

The one attribute that NGOs are required to self-assess, **achievement of outputs and objectives**, was also less than satisfactory overall. Here also there was considerable variation across the projects. The most successful project achieved best practice in one of its components. The least successful failed to achieve most of its objectives.

A key factor in underachievement was a failure to reach quantitative targets and deliver at the output level. In some cases the targets were probably set too high from the outset and should have been revised. The accuracy and quality of reporting for the projects reviewed was often not strong. The NGOs reviewed are inclined to report on activities, not outputs and objectives, and to be positive about their performance to the extent that the information provided becomes misleading. In terms of risk management, AusAID clearly needs to work with NGOs to substantially improve reporting.

2.3   Impact

Development impact was less than satisfactory overall but with large variations across the projects. The *Factory Workers AIDS Project* is considered to have had the greatest impact because of effects at the national level in Zimbabwe, as well as on the target group. The peer educators recruited and trained in this project have made a significant contribution to removing the stigma attached to HIV/AIDS in their workplaces and they have helped workers to relate, at a personal level, to messages about risk behaviour and HIV/AIDS prevention. The project has a strong empirical basis in the earlier ZAPP project, which included a control group against which to assess impact. While it is tempting to infer a similar impact for the current project, ZAPP advised the team that bridging the KAP gap and establishing a link with reduced HIV/AIDS remains extremely difficult.

The *Kwetu Women and AIDS Project* has played a similar role to the *Factory Workers AIDS Project* by putting the situation of commercial sex workers on to the national AIDS agenda in Tanzania. Impact was considered satisfactory overall although the impact on the target group was limited, a result in part of not attempting a broader and more systematic coverage. *TAWASA* and the *Social Empowerment Diploma* are also considered to have satisfactory impact.

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13 Normally one year for ANCP projects and three years for NGO Country Windows.

The *Shosholoza AIDS Project* has the potential to reach a large number of young men through the soccer network and schools but is currently likely to have only a marginal impact without more attention to design and an approach that matches targets to resources. The two remaining projects, the *Winterveld Community AIDS* and the *Child Nutrition Project*, are only marginally satisfactory in terms of impact. In the latter case, it was unrealistic to attempt to improve access to nutritious foods and change feeding practices in a seven-month funding period, particularly by attempting to establish new methods that were not sustainable.

Four projects included in the cluster addressed poverty directly. Three encountered difficulties in the operation of self-help projects and/or income generating activities. The *Kwetu Women and AIDS Project* sought to assist former commercial sex workers to establish sustainable livelihoods through income generating activities, however the majority of activities have not been sustained and few of the loans involved are likely to be repaid. The *Winterveld Child Nutrition Project* sought to reduce the health impacts of poverty on children in part by establishing group gardens, income generating activities and savings groups. Neither was nearly as successful as hoped. The *Social Empowerment Diploma* envisaged raising the incomes of some marginalised communities and should make some contribution in this regard, but the very high levels of unemployment and lack of access to markets in rural areas limited income generation opportunities. However the *Diploma* also addressed important non-income dimensions of poverty.

Two projects focussed on women and children. The *Kwetu Women and AIDS Project* had a significant impact by raising the profile of the problems of HIV/AIDS and commercial sex work but had limited direct impact on this target group. The *Winterveld Child Nutrition Project* provided valuable advice on nutrition to women, but to a limited number and for a limited period. This is not surprising considering the small size ($37,500) and short timeframe (7 months) of the project.

The *TAWASA Project* potentially has the greatest impact on children in terms of reductions in infant mortality. It has the advantage of building on the combined impact of two previous AusAID funded projects in Kahama[14], however, the impact of the new project will be diminished unless WV can satisfactorily address hydrogeological constraints that have emerged in the installation of shallow wells in some areas.

The *Shosholoza AIDS* and *Factory Workers AIDS Projects* both sought to reach women through men but have found it difficult to do so and difficult to measure impact on the behaviour of men or women. HIV/AIDS projects all face fundamental difficulties in demonstrating changed behaviours and the linkage to reduced incidence of HIV/AIDS.

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14 The SANGOP funded Kahama Child Survival for Development Project and the ANCP funded Kahama Pilot Community Water Project.

3   APPROPRIATENESS OF OBJECTIVES

Findings

- Project objectives are fully appropriate in terms of their response to national needs and priorities, and broadly consistent with the focus of the Australian aid program and its sectoral priorities (including policies on poverty reduction, gender and family planning).

- However, shortcomings in the quality of research/analysis and project conception in six of the seven projects detracted from overall performance against this quality attribute.

- A small number of projects were not adequately resourced to achieve their objectives, most notably in terms of management structures and personnel.

- No project included an explicit poverty reduction strategy. However, the intention to alleviate the impact of poverty on target groups can be inferred.

- All of the projects evaluated meet AusAID's requirement that a gender perspective be incorporated in all activities although lacked gender strategies and performance measures.

- The one project requiring evaluation from an environmental standpoint was found to be only partially satisfactory.

Lessons

- There is a need for continuous innovation in information and education activities to ensure the message remains fresh, avoiding boredom and fatalism. An important technique, which has been used only in the Factory Workers AIDS Project, is involvement of the target audience in designing information, education and communication materials to ensure relevance and effectiveness, particularly through support and mentoring for peer educators.

- Mainstreaming reproductive health education in schools and the media would be an effective strategy for addressing HIV/AIDS.

- Notwithstanding the importance of information, education and communication activities, HIV/AIDS prevention has to include more attention to bridging the gap between knowledge, attitudes and practice (the 'KAP gap') and measuring performance in terms of behavioural change. The efficacy of relying solely on condom promotion deserves to be tested for each context, particularly in non-casual sex.

Recommendations

- In view of the centrality of poverty reduction in the aid program, AusAID should encourage NGOs to include more explicit poverty reduction strategies in their project designs. These should include identifying how an activity (e.g. HIV/AIDS prevention, child nutrition, rural water and sanitation) relates to poverty reduction.

- AusAID should not provide funding for HIV/AIDS projects that consist solely of awareness and information activities. HIV/AIDS projects must go beyond awareness to promote and measure behaviour change. AusAID needs to be more stringent in appraisal to ensure that there is an achievable strategy to bridge the KAP gap.

- The problem of HIV/AIDS in Africa is of such proportions that there is a strong case for continuing to support innovative, cutting edge projects. Similarly, the problem of mother-to-child transmission is of such importance that increased support should be given to projects that address this issue.

3.1   Introduction

The appropriateness of project objectives was evaluated against three criteria: a) the national development needs and priorities of South Africa, Tanzania and Zimbabwe; b) AusAID's overall aid program objectives, sectoral priorities and NGO guidelines (including policies on poverty reduction, gender and family planning); and c) the quality of research, analysis and project conception.

Table 3.1: Summary of project performance – appropriateness of objectives

Project	Rating
Factory Workers AIDS	Best practice (5)
Kwetu Women and AIDS	Fully satisfactory (4)
TAWASA	Fully satisfactory (4)
Shosholoza AIDS	Fully satisfactory (4)
Winterveld Community AIDS	Fully satisfactory (4)
Social Empowerment Diploma	Fully satisfactory (4)
Winterveld Child Nutrition	Satisfactory overall (3)

Table 3.2 (next page) summarises the team's analysis of the appropriateness of the objectives of each project. The team separately assessed project design (see next chapter, *Standard of Design*). If design is combined with appropriateness of objectives (as it is by AusAID's Quality Assurance Group – the QAG) the average score for appropriateness of objectives and design would be 2.85, less than satisfactory overall.

3.2   National needs and priorities in recipient countries

The HIV/AIDS statistics in all three countries present a graphic picture of individual suffering and gender inequality. The worst effects of the socio-economic and demographic impact of the pandemic are still to be felt. The NGO sector plays a critical role in attempts to control HIV and the objectives of the four HIV/AIDS projects evaluated are fully consistent with national AIDS control priorities in Tanzania, Zimbabwe and South Africa. Two have actually been influential in *shaping* government policies. The *Kwetu Women and AIDS Project* was the first to specifically target commercial sex workers in Tanzania and although commercial sex work remains illegal, the Government of Tanzania (GOT) now recognises that commercial sex workers are an important population for HIV/AIDS interventions. The Third Medium Term Plan of Tanzania's National AIDS Control Programme (NACP) has a major component focusing on commercial sex workers.

In Zimbabwe, the peer-education training component of the *Factory Workers AIDS Project* has been assessed as a best practice model[15] that Zimbabwe's NACP is now encouraging other factory owners to explore and adopt. The last review of HIV/AIDS activities undertaken country-wide[16] identified workers as an important target for HIV/AIDS prevention activities. The Government of Zimbabwe (GOZ) has enacted a Statutory Instrument (1998) that requires all employers to provide information and education on HIV/AIDS to their employees. While this has not been enforced, and is probably not enforceable in the foreseeable future, the *Factory Workers AIDS Project* has led the way in HIV/AIDS peer education in the work force.

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15   Dr Rene Loewenson, *Best Practices Company Actions on HIV/AIDS in Southern Africa*, 1999, and the current evaluation.

16   *Report of the Review of the Mid-term Plan*, March 1998

Table 3.2: Appropriateness of objectives

	TAWASA	Kwetu Women and AIDS	Factory Workers AIDS	Winterveld Community AIDS	Shosholoza AIDS	Winterveld Child Nutrition	Social Development Diploma
Consistent with national priorities	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Consistent with AusAID objectives	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Consistent with AusAID NGO guidelines	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Baseline study undertaken	Yes	1993 UNICEF study	Based on trial over 3 years with control group	1997 AMREF needs assessment	KAP study part of project to establish baseline for behaviour change	No	Primary data collected
Conception of objectives	Demand response approach but technically deficient	Income generation activity component problematic	Sound empirical basis	Not feasible	Not feasible relative to project budget/resources	Nutrition gardens problematic	Confusion between ANGO and local partner
Poverty focus	Direct	Direct	Indirect	Indirect	Indirect	Direct	Direct
Gender	Mainstreaming	Exclusive focus on CSWs	Mainstreaming	Mainstreaming	Focus on men but addressing gender inequality	Primary beneficiaries women and children	Gender balance achieved
Family planning	N/A	Informed voluntary	Informed voluntary	Informed voluntary	Informed voluntary	N/A	N/A
Environment	Technically deficient	N/A	N/A	N/A	N/A	N/A	N/A

National HIV prevalence rates in South Africa increased from an estimated 0.8% in 1990 to 22% in 1998[17]. The effectiveness of the Government of South Africa's (GSA's) response has been limited in part by the lack of a multi-sectoral approach and the location of the NACP in the Ministry of Health. In this context, NGOs have been a critically important force in the South African AIDS effort. The *Shosholoza AIDS Project* is a province-wide initiative in KwaZulu-Natal, which has the highest HIV prevalence rate in South Africa[18]. The focus on soccer players as the target group for peer education and counselling is unique and given the status of soccer plays as role models for youth, has considerable potential. The objectives of the *Winterveld Community AIDS Project* in North West Province are also fully appropriate in terms of national needs and priorities.

The objectives of *TAWASA* are consistent with the GOT's new draft Tanzania Assistance Strategy[19] which highlights poverty reduction, health and sustainable rural water supply as priority areas for the next five years. A major strength of *TAWASA* is that it is demand driven, and therefore consistent with the Dublin Principles[20], but the project appears to be out of step with several aspects of government policy. This is discussed below under *Analysis and Conception.*

The objectives of the two ANCP funded projects (the *Winterveld Child Nutrition Project* and the *Social Empowerment Diploma*) were also consistent with national priorities in terms of improving child nutrition, skills development and poverty reduction.

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17 Based on annual surveys of government ante-natal clinics and quoted in Hein Maris, *To the edge: AIDS Review 2000,* University of Pretoria.

18 This is attributed to the high level of political violence and social dislocation experienced over a number of years in the province. Infection rates among women attending antenatal clinics in KwaZulu-Natal reached 32.5% in 1998 (a 20.8% rise over 1997).

19 Ministry of Finance, *Tanzania Assistance Strategy,* Consultation draft, May 2000.

20 *The Dublin Statement on Water and Sustainable Development,* International Conference on Water and the Environment: Development Issues for the 21st Century (1992).

3.3   Poverty focus

Table 3.3: Summary of project performance – poverty

Project	Rating
Kwetu Women and AIDS	Fully satisfactory (4)
Social Empowerment Diploma	Fully satisfactory (4)
TAWASA	Satisfactory overall (3)
Winterveld Child Nutrition	Satisfactory overall (3)
Winterveld Community AIDS	Satisfactory overall (3)
Shosholoza AIDS	Satisfactory overall (3)
Factory Workers AIDS	Satisfactory overall (3)

The objectives of all projects evaluated were consistent with two of the major planks of AusAID's poverty reduction framework[21] which are to:

- increase the productivity of people in developing countries, including the poor; and

- overcome structural disadvantage and discrimination against the poor.

None of the project designs included an explicit poverty reduction strategy with specific poverty reduction indicators although the intention of alleviating the impact of poverty can be readily inferred from the target groups and component objectives. Project proposals all include general information on the socio-economic and health characteristics of the target populations, which in all cases are relevant from a poverty standpoint.

Four of the projects addressed poverty directly. The *Kwetu Women and AIDS Project* is directly targeting one of the poorest, most disadvantaged groups in Tanzania - commercial sex workers. The high level of poverty in rural areas is the primary factor leading young girls and women to migrate to Dar es Salaam where many are forced to enter commercial sex work. Women and children in Tanzania bear a disproportionate share of the burden of poverty and poor health and more girls than boys do not complete primary school. This is borne out by the very low educational level of the commercial sex workers.[22] The project has attempted to provide an alternative source of income for commercial sex workers as an incentive for them to leave commercial sex work. The project has also tried to overcome discrimination against former commercial sex workers by assisting with their repatriation to their homes of origin and reintegration into community life. Neither the income generation activities (IGA) nor the repatriation components have been successful in terms of meeting quantitative targets but assessed in qualitative terms, there is no doubt that the project has made a significant difference to the lives of some individuals.

Both ANCP projects also directly addressed poverty. The *Social Empowerment Diploma* (KwaZulu–Natal) aimed to provide training for disadvantaged black South Africans to improve their employment prospects and enable them to assist their communities establish income generating activities. The training also addressed important non-income dimensions of poverty. The *Winterveld Child Nutrition Project* design sought to minimise the health impacts of poverty on children.

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21 *Better Aid for a Better Future*, Seventh Annual Report to Parliament on Australia's Development Cooperation Program and the Government's Response to the Committee of Review of Australia's Overseas Aid Program (November 1997).

22 Over half of the CSWs accommodated at Kwetu over the period 1995–97 had not attended school at all, 25% had completed primary school and 1% had attended secondary school. This compares with a national average in Tanzania of 78% for primary school enrolments and 5% for secondary school enrolments.

In *TAWASA's* case it can be argued that improved community health will impact directly on poverty reduction. The lack of safe water and sanitation was identified as a primary cause of poor community development and poverty in the villages surveyed as part of the baseline study.[23] The relative poverty of the project area can be inferred from the fact only 17% of the target population have access to clean water compared to a national rural average of 46 per cent (1998).[24]

There are no specific links to poverty or indicators to measure impact on poverty in the design of the *Factory Workers AIDS Prevention Project*, however in trying to reduce HIV transmission among workers and their partners the project will help contain the socio-economic impacts of HIV/AIDS. The onset of AIDS-related illnesses leads to loss of employment for people living with AIDS. At the time of the evaluation it was conservatively estimated that a paid worker in Zimbabwe supports at least 8 people. Widows and orphans are especially vulnerable. Similar if less direct links can be inferred between socio-economic impact and the *Shosholoza AIDS Project* with its focus on community and professional male soccer players. The *Winterveld Community AIDS Project* also did not include a specific link to poverty reduction or poverty indicators, however Winterveld is an extremely poor township with unemployment at nearly 70 per cent.

3.4   Gender: rights of women and children

All of the projects evaluated meet AusAID's requirement that a gender perspective be incorporated in all activities. The designs of the Country Window projects include a more detailed gender analysis, which is not required in the ANCP project proposal format. Progress reports for both ANCP and country window projects require gender disaggregated data however this was not often provided.

Table 3.4: Summary of project performance – rights of women and children

Project	Rating
Kwetu Women and AIDS	Fully satisfactory (4)
Factory Workers AIDS	Fully satisfactory (4)
Winterveld Child Nutrition	Satisfactory overall (3)
TAWASA	Satisfactory overall (3)
Social Empowerment Diploma	Satisfactory overall (3)
Winterveld Community AIDS	Satisfactory overall (3)
Shosholoza AIDS	Satisfactory overall (3)

HIV/AIDS infection rates in Southern Africa are highest among adolescent girls and young women. In Tanzania, for example, women between the ages of 15-22 are four times more affected than men.[25] Women and girls are more vulnerable because they are more readily infected and have far less control over the circumstances that give rise to risk. Their subordinate status makes it very difficult for them to take measures to protect themselves and negotiate safe sex. Women also bear the risk of transmitting the disease to their babies and play a key role as carers of other family members with HIV-related illnesses.

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23 "TAWASA KAP/Baseline Survey report" prepared for World Vision by WEDECO LTD, Shinyanga, Tanzania

24 This national figure (46%) is overestimated because only 60% of completed water schemes are working and 40% are non-functioning due to technical and management problems. As a result, other estimates indicate that less than 29% of the rural population in Tanzania have access to clean and potable water.

25 Government of Tanzania, Ministry of Health, *National AIDS Control Programme HIV/AIDS/STD Surveillance,* Report No 13, Dec 1998

AusAID's gender and development policy emphasises that 'in areas of reproductive health, it is evident that an exclusive focus on women is insufficient when men may have control of resources and decision making'[26]. The *Factory Workers AIDS Project* has gone furthest in trying to bridge the communication gap between men and women through challenging male peer educators about gender inequality and cultural stereotypes about relationships between men and women. While the project is targeting a predominantly male workforce, it includes female workers in several factories and 18% of the peer educators trained are women. The *Shosholoza AIDS Project* has the intention to address issues of sexuality and behavioural change with male soccer players but lacks the resources to follow through.

AusAID's gender policy recognises that separate programming for women may still be essential for advancing their status and promoting human rights such as in the *Kwetu Women and AIDS Project* targeting street girls and other commercial sex workers. The principal strategy adopted by Kwetu to promote and protect the rights of commercial sex workers has been to offer them an alternative to commercial sex work through counselling, vocational training and income generating activities and facilitating their re-unification with families and communities of origin. Men are included (to a limited extent) in the counselling and activities associated with re-unification and Kwetu extension officers have reported some success in changing traditional practices in rural areas that are high risk in terms of HIV transmission.

The approach taken to gender in *TAWASA* is a mainstreaming approach with the exception of the sanitation training that specifically targets women. The project largely meets AusAID's *Gender Guidelines for Water Supply and Sanitation*[27] with the qualification that it could do more to encourage women's participation in leadership roles and to target both women and men with sanitation messages. Gender mainstreaming has also been adopted in the *Winterveld AIDS Project* where schoolgirls and women are targeted along with their male peers in drama performances and in the project's limited support and counselling services. In practice, the project has found the majority of people seeking support and counselling are women and there has been a need to include a single sex focus in support groups and counselling. The only support group the project has managed to establish is made up of six women.

Women and children were the primary beneficiaries of the *Winterveld Child Nutrition Education Project* and gender balance was achieved in the *Social Empowerment Diploma* where of the 30 students funded, 16 were women.

UNAIDS now estimates that up to a third of the children under 15 in the countries of southern Africa will die of AIDS.[28] The issue of mother-to-child transmission of HIV is emerging as one of the toughest ethical dilemmas. It raises the issue of the rights of the unborn child as well as those of the mother. In practice, the cost of antiviral drugs and infant formula will remain prohibitive for most African women. It was suggested to the evaluation team by an officer of Zimbabwe's NACP that this issue needs to be stressed in programs directed at behavioural change in men, emphasising their responsibilities to their unborn children and appealing to their interest in the survival of their family lineage.

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26 AusAID, *Guide to Gender and Development* (March 2000), available at www.ausaid.gov.au

27 AusAID, *Gender Guidelines Water Supply and Sanitation*, available at www.ausaid.gov.au

28 Reported in *The Canberra Times*, 3 July 2000, p 7

3.5   Family planning

None of the projects evaluated included a specific family planning component although one of the performance indicators for the *Kwetu Women and AIDS Project* awareness component was a reduction in the number of unplanned pregnancies in commercial sex workers. All of the HIV/AIDS projects included the promotion of condom use to reduce the transmission of HIV/AIDS and other STDs. The prevention of pregnancy through condom use is a secondary goal but where condoms are used for this purpose, it is voluntary and based on informed choice.

The protocol for all projects is that all people electing to be tested for HIV receive pre and post-test counselling. If a woman is found to be positive, she will be advised about the risks of transmitting the virus to her baby either during pregnancy or through breastfeeding. She will also be advised that pregnancy may weaken her immune system and hasten the onset of AIDS-related illnesses. In view of these risks, she may choose to avoid pregnancy however the reality is that many HIV positive women continue to have children due to their powerlessness in negotiating protected sex with their partners.

3.6   Environment

Only the rural water and sanitation project (*TAWASA*) required evaluation from an environmental standpoint and it was only partially satisfactory in this regard. The use of shallow wells and roof catchment are considered appropriate technologies for the project area[29]. If more boreholes are required, due to difficult hydrogeology in some areas for shallow wells, there appears to be no issue of depletion of underground water in Kahama District[30].

The project design includes an environmental assessment matrix. This identifies the potential impact of, for example, the spread of diseases and bacteriological pollution from seepage if the environment surrounding the well is dirty. The mitigation measures include separating human and animal use and establishing a maintenance committee. Although these are appropriate considerations, the project lacks a management plan, including monitoring and follow-up. None of the risks in the environmental assessment matrix are reflected in the project logframe or linked to it, which does not facilitate management of risk. Quarterly testing of water quality is however included as an activity in the logframe and if this is instituted may at least provide a trigger for identifying contamination.

A further concern is the potential risk of contamination of water supplies due to the siting of latrines constructed under the project. The containment measure given in the Risk Management Matrix is 'siting according to GOT recommendations but at least 30 metres from any groundwater source'. However, the local consultant on the evaluation team (who works for the Rural Water Supply Department) advised that the recommended distance is 100 metres from any groundwater source (wells, soakways, etc). If 100 metres is the standard, wells established under the project could become contaminated.

TAWASA also does not address the rehabilitation of existing sources of water, including ponds. This is a significant deficiency given that the project objectives are health related and that existing sources, including springs and ponds, are very likely to continue to be used after shallow wells are established (by preference, convenience or during periods of maintenance). World Vision Australia has subsequently advised AusAID that the issue of rehabilitation of existing water sources (wells

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29   Environmental study conducted by DHV consultants, April 1997

30   Mr Christopher Sayi, national Director of Rural Water Supply.

and ponds) was discussed at the project planning stage with the District Water Department (DWD) in Kahama. The DWD advised WV not to include a rehabilitation component in the *TAWASA* project because alternative funding sources were available. According to WV, they were instructed not to duplicate the activities of the Government of Tanzania.[31]

A further risk identified by the team is that inadequate attention may be given to training in environmental health, for example in the training of Water User Groups which appears to have an emphasis on maintenance.

3.7   Analysis and conception

While project objectives were found to be fully consistent with both national and Australian priorities, shortcomings in the quality of analysis and conception of objectives resulted in some projects being rated as less than best practice or fully satisfactory in terms of appropriateness of objectives. The strongest project in terms of analysis and conception of objectives is the *Factory Workers AIDS Project*, which has a strong empirical baseline from an earlier research project[32].

In relation to *TAWASA*, although a generally sound baseline/KAP study was undertaken during the first year, it was deficient in attention to the fundamental aspect of hydrogeology. There is now the risk that the project may not be able to meet community expectations in terms of the installation of new wells. The conception of objectives for *TAWASA* also failed to take account of recent GOT policy directions. First, the design does not give sufficient attention to the role of the private sector which is to be the main source of goods ands services as communities, through Water User Groups, are expected to pay 100% of operational and maintenance costs. Second, the GOT's new rural water supply policy gives higher priority to rehabilitation and upgrading of existing water points than to installing new water points. The current project does not presently include any provision for protection or rehabilitation of existing water points. As stated above, World Vision Australia has subsequently advised AusAID that they were instructed not to include a rehabilitation component by the DWD as other funds were to be used for this purpose[33].

The conception of the income generation (IGA) component of the *Kwetu Women and AIDS Project* was, at the outset, experimental and risky. The original design provided for loans to individual former commercial sex workers on a 50% grant, 50% loan basis with no interest. This was increased to 110% on AusAID's advice[34] that unless the women learnt to operate within the general market the income generating activities would not be sustainable. While this was correct in terms of micro-finance theory, it was unrealistic given the circumstances of the young women and girls concerned who in many cases were HIV positive with short life expectancies. It also did not take account of the fact that the Salvation Army (SA) was more interested in providing an alternative to commercial sex work than running a sustainable micro-finance facility. The team concluded that the SA should have sought to justify their position to AusAID and the original grant component should have been retained.

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31 The evaluation team acknowledges this advice from WVA but states that neither the TAWASA project staff, the local consultant (from the Department of Rural Water Supply, Ministry Water) or District officials (including the District Water Engineer) advised the team of this during their visit to Kahama.

32 The earlier ZAPP project (1993–97) conducted a randomised trial in 40 factories in Harare utilising a control group (provided with HIV counselling and testing alone) and an intervention group (provided with counselling, testing plus HIV/AIDS peer education). Impact of the intervention was assessed by comparing HIV seroconversion between the two groups of projects and through yearly KAP surveys.

33 The evaluation team acknowledges this advice from WVA but states that when the team raised this issue with TAWASA project staff, the local consultant and District officials, nobody advised the team of this background.

34 Minutes of Project Coordinating Committee meeting of 18 May 1998.

A KAP study was undertaken for the *Shosholoza AIDS Project* to establish a baseline for behaviour change. The findings of the study are also being used to finalise the training manual for peer education. However, while this analysis of gender inequality and sexuality has the potential to break new ground, there is a fundamental mismatch between the objectives and province-wide reach of the project and its budget and staffing resources. CAA acknowledged in its questionnaire response to the evaluation team that the project was seriously under budgeted for training, mentoring, travel and research.

Similarly, while the formulation of objectives for the *Winterveld AIDS Project* drew on the experience of the earlier SANGOP project and a community needs assessment conducted by a competent medical NGO[35], the objectives were unrealistic because of the limited capacity of the small implementing community-based organisation. In hindsight, the conception of the nutrition satellite gardens component of the *Winterveld Child Nutrition Project,* run by self-help groups, was fundamentally flawed as the acute shortage of water in Winterveld meant that the nutrition gardens were not sustainable. Water was provided by the project for the vegetable gardens for the duration of the project. It was also unrealistic to try to establish sustainable nutrition satellite gardens run by self-help groups in such a short timeframe (7 months).

In response to these findings, APHEDA has advised that at the time of project planning (late 1997), it was hoped that the Presidential Lead Project in Water Supply would result in good access to water in the Winterveld. It was a time of optimism in South Africa and it was hoped that a whole range of services in the townships would improve. However the last few years in the Winterveld have seen many developmental setbacks including decreased water supply, the rapid escalation of the HIV/AIDS pandemic, increasing unemployment and increasing crime.

The objective of the *Social Empowerment Diploma* was to provide disadvantaged South Africans with a broad foundation of theoretical and practical development skills to improve their own lives and help transform their communities. The approach was based on research and the conception was sound although more provision could have been made for ongoing support and guidance for the graduates.

More rigour is required in the conception of HIV/AIDS projects seeking to reduce risk behaviour. It is now well recognised that efforts have to go beyond information and education to bridge the "KAP gap" (the gap between knowledge, attitudes and practice) but there is considerable uncertainty about how to achieve this and there are considerable difficulties in measuring performance (in terms of behavioural change). Only the *Factory Workers Project* has reached the stage of grappling with this problem. If additional staff resources can be secured for a more comprehensive approach, the *Shosholoza AIDS Project* could also begin to do so.

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35 AMREF (1997)

4   STANDARD OF DESIGN

Findings

- Project design was the least satisfactory aspect of the projects reviewed, weakening monitoring, management and reporting. Of the seven projects only one was rated as satisfactory, while three were rated as marginally satisfactory and three as weak.

- Project objectives and outputs were often confused with activities, and performance indicators were generally weak. Means of verification were not stated and risk assessment and risk management was not satisfactory overall.

- Weaknesses in design extend to the design process. No implementing organisation involved stakeholders or intended beneficiaries in the design of the projects concerned. The Australian NGOs have cited the short notice provided by AusAID of closing dates for Country Window funding rounds (generally six weeks) as a major constraint to undertaking participatory designs.

- NGOs seem reluctant to amend designs and implementing organisations are left to ignore or 'work around' design deficiencies. This appears to be grounded in uncertainty about AusAID's receptiveness to design changes.

- The foregoing are systemic problems that can and should be addressed. AusAID does not presently require sufficient rigour in the design of NGO projects to ensure high quality and has not provided clear procedures facilitating revisions.

Lesson

- The accuracy and meaningfulness of NGO reporting cannot improve until the formulation of objectives, outputs and indicators improves (although this alone is not necessarily a sufficient condition). There is also significant potential to improve implementation by improving design but for this to happen the emphasis has to be on utilising design as a management tool.

Recommendations

- In consultation with NGOs, AusAID should give urgent attention to revising proposal proforma to require higher standards of project design. In particular,

    - a summary logframe should be used (which is consistent with *AusGUIDE*);

    - guidance should be provided on the formulation of objectives, outputs and indicators;

    - performance indicators should be required at the objectives level.

- AusAID should endeavour to provide longer notice (3 months) of Country Window funding rounds to give NGOs sufficient time to consult with beneficiaries and stakeholders and prepare participatory, quality designs.

- AusAID should clarify its position on revisions to design documents and what can and cannot be changed (beyond changes in budget lines). This could be achieved by requiring NGOs to more clearly indicate changes to design during implementation, possibly through a 'change frame'. Guidance should be provided in *NGOPI*.

- For projects funded under NGO Country Windows, in appropriate circumstances AusAID should consider allowing an inception phase over the first 6–12 months to enable further development and modification of the project design in consultation with beneficiaries. This could include baseline and KAP studies and analysis, as appropriate. At the conclusion of the inception phase, the design should be reviewed (see below).

- NGOs should be either encouraged or required to review projects funded under Country Windows towards the end of the first year of implementation. This should include a review of the accuracy and efficacy of design documents. Facilitation of the review would be the Australian NGO's responsibility through participatory processes, including workshops, in-country. Such processes should involve key stakeholders and representatives of beneficiary groups. AusAID should consider ways to strengthen NGOs' capacity in this area.

4.1   Design issues

The team's view is that the current system agreed by AusAID and the NGO community does not go far enough in encouraging satisfactory project design. Shortcomings are apparent in the lack of clarity of objectives and the selection process for Country Window funded projects. The problem is that the funding proposals submitted to AusAID for consideration are not necessarily proper design documents and consequently do not lend themselves to proper appraisal or subsequently to proper implementation, monitoring, reporting or oversight. AusAID's NGO Section advised the team that it is expected that NGOs will appraise their own project designs before submitting funding proposals to AusAID for consideration.

NGOs and AusAID need to renew their investment in the standard of design of NGO funded projects and programs as part of risk management and, most critically, to improve aid delivery because better designed projects have a higher probability of sustained development impact. The team recommends that *NGOPI* be revised to require more rigour in design. It should be possible to achieve this without increasing the overall length of *NGOPI*. It may even by possible to reduce the length by simply referring to relevant sections of *AusGUIDE*.

Table 4.1: Summary of project performance – project design

Project	Rating
Factory Workers	Satisfactory overall (3)
TAWASA	Marginally satisfactory (2)
Kwetu	Marginally satisfactory (2)
Shosholoza	Marginally satisfactory (2)
Winterveld AIDS Prevention	Weak (1)
Winterveld Child Nutrition	Weak (1)
Social Empowerment Diploma	Weak (1)

The quality of proposals varied considerably from the comprehensive documentation provided for the *TAWASA Project* to that for the *Social Empowerment Diploma* funded under the ANCP scheme. No doubt AusAID and NGOs wish to differentiate between the ANCP and other schemes but it should be noted that the *Diploma* proposal was so minimal that it omitted the most significant dimension of the activity – the contribution that students make to their communities in terms of social development and income generation.

4.2　Clarity of objectives

In most cases it was apparent what the projects sought or are seeking to achieve. Nevertheless the team had to recast most objective statements and sometimes infer them, to arrive at satisfactory statements of the actual intent of the project. The objectives listed in most of the proposals were actually statements about strategies and activities and should not have been offered as objectives. A common failing is to describe activities like training, research and education as objectives.

There were similar problems with the description of outputs, which were also frequently merely restatements of activities. As a result they rarely specified the quality of the output, weakening the vital link between objectives and outputs and failing to provide a meaningful basis for project monitoring and management. These problems were discussed with managers and staff of implementing organisations who generally welcomed the evaluation process as a means of clarifying project objectives and consequent action.

4.3　Conceptual framework

All projects demonstrated to varying degrees that the NGOs reviewed have difficulties differentiating goals, objectives, outputs, performance indicators and means of verification, ie the fundamentals of project design. In the worst case, activity statements were recycled as objectives, outputs and even performance indicators. The failure to adequately differentiate outputs and objectives from activities is undermining the meaningfulness of NGO reporting and inhibiting dialogue between NGOs and AusAID about development practice.

The requirement for a logframe to be submitted with project proposals is being introduced into the revised *NGOPI*, but at the time of the evaluation there was no such requirement. The evaluation strongly supports this development. In the team's view, a summary logframe should be included for the objectives and outputs levels (it should not be necessary to include the activity or input levels in the proposal). The logframe has long been recognised as a useful discipline and a valuable management tool and there is no reason why it should not be utilised in NGO programming. While the requirement for a logframe will interpose more challenging consideration of means and ends at the initial stage, it should lead to a stream of benefits in improved implementation, monitoring and reporting.

4.4　Performance indicators and means of verification

Very few projects included satisfactory indicators and even the best were patchy in this regard. Most projects specified performance indicators that are no more than quantified activities or targets, such as '120 men trained'. Others restated outputs, such as '43 village committees will be strengthened', which begs the question: what will indicate that they have been strengthened? While the specification of quantities is positive, the lack of attention to qualitative indicators meant that there was no basis for assessment of, for example, the competency of people trained.

With regard to the HIV/AIDS projects, performance indicators are lacking at important points in relation to tracking changes in sexual behaviour. The *Shosholoza AIDS Project* seeks to increase communication between young men and women about risk behaviour but no indicator is suggested to demonstrate increased communication.

Current procedures do not require NGOs to specify performance indicators at the objective level and NGOs generally infer the achievement of objectives from the delivery of outputs at the component level. Relying on progress in the delivery of outputs to gauge likely achievement of objectives is only sound if the projects are so well designed that the delivery of outputs will be sufficient to achieve development objectives. These linkages are often missing and even with

improvements in design may remain problematic. Requiring performance indicators at the objective level will provide a secondary test of performance and will help identify any deficiencies in the linkages between outputs and the component objective.

Because procedures do not require specification of means of verification, they were not referred to in project proposals and therefore were not addressed by the NGOs concerned in any other form. This is a significant gap. The four HIV/AIDS projects promote safe sex and include condom distribution as an activity or output. In some cases it is included as an indicator. However none of the projects indicated whether risk behaviour and condom use in the target group was to be verified by their own efforts or by reference to information collected by others. It is important to specify means of verification if only because it tests the practicability and cost of performance indicators.

None of the designs include indicators or means of verification to directly measure impact on poverty and AusAID does not presently require them to do so, despite the focus on poverty in the Australian aid program.

4.5   Risk assessment and management

Risk assessment and management was less than satisfactory overall. Risk was addressed in all project proposals, as required by AusAID, but the treatment varied widely. Some proposals included a risk management matrix (but not necessarily linked to stated assumptions) while at the other extreme an NGO simply stated that no risk was anticipated. A number of NGOs listed particular risks but made no attempt to manage them; others simply omitted important risks. APHEDA did not adequately assess the risk that serious project management problems (identified in the project completion report for the previous SANGOP funded *Winterveld AIDS Project*) would persist into the new funding period or more generally that it would prove difficult for a small community-based organisation in a difficult environment to satisfactorily implement the *Winterveld Community AIDS Project.* At the technical level, World Vision did not consider the risk that the hydrogeological conditions of parts of Msalala Division might differ from that of the areas covered by the pilot project and that it might be difficult to identify suitable sites for shallow wells in all villages. AVI's partner in Harare clearly identified key risks, including the cooperation of factory management. However it is now clear that more was required in relation to the risk that the factory owners may not put the peer education activities 'on their budgets'.

African Enterprise, which stated simply that 'no significant risk is anticipated', did so on the basis that it regarded the project simply as a training activity, when the objectives of its partner in South Africa went well beyond this. This meant that important risks were not noted, most notably that income generating activities could fail for lack of markets. The *Winterveld Child Nutrition Project* recognised that lack of water for gardening was a risk but proceeded in the hope that the water supply situation in the Winterveld would improve over the project period. For reasons outside the project's control this did not happen and vegetable gardening became untenable for almost all women. There was also insufficient consideration of the backgrounds of the women, few of whom had previous agricultural experience.

In a few cases AusAID's appraisal identified additional risk factors or sought further comment, but generally appraisal of this and other aspects of design was unsatisfactory.

4.6   Participation in design and monitoring

In all cases, the projects reviewed originated in Africa and the role of the Australian NGO was mostly to ensure that the proposal/design met AusAID's requirements. The Australian NGO is generally removed from the context in which the project will be implemented and is to a greater

or lesser extent interpreting what is intended. Although this is understandable, the disadvantage is that if the implementing organisation does not 'own' the proposal submitted to AusAID it is unlikely to use it as the basis for implementation. Moreover, the Australian NGO is not really in a position to stipulate how the implementing partner will implement the project, although it has a right to insist that reporting requirements are met. It is suggested that these limitations can be addressed by more emphasis on participatory design processes with the Australian NGO playing a facilitating role where whenever possible and appropriate.

It is striking that none of the implementing partners of Australian NGOs involved stakeholders or intended beneficiaries in project design (or subsequently in monitoring – see *Empowerment, Capacity Building and Governance*). Australian NGOs should do their best to ensure that there are design workshops involving key stakeholders and representatives of beneficiary groups and that everyone has a common understanding of the design. A number of NGOs commented to the team that insufficient time and resources were the major constraints. AusAID should endeavour to provide longer notice of NGO Country Window funding rounds in order for Australian NGOs to undertake a participatory design process. This would help to overcome the present disjunctions between target groups and implementing NGO on the one hand and implementing and funding NGOs on the other.

4.7   Revising design documents

Many development projects involve experimentation and all have at least some areas of uncertainty. Having the means to revise a project design to rectify deficiencies, incorporate what is learned and deal with problems that arise is as important as the quality of the original design. Nevertheless it is evident that the NGOs whose projects were evaluated don't expect to revise project designs. Although significant changes occurred in a number of projects, none of the projects submitted, or planned to submit, a revised design to AusAID following approval of funding. In some cases this is because the implementing organisations took charge and used their own frameworks for implementation, including annual plans based on the funded proposal.

A more significant factor is the NGO perception either that AusAID does not expect and does not welcome changes to design, or that once funding is obtained, the NGO can get on with the project without the need to consult about a revised design. As a result implementing organisations tend to ignore or 'work around' deficiencies in the original design rather than address them. Implementing NGOs such as World Vision and the Salvation Army in Tanzania noted significant redirection of their projects and acknowledged the value of redesign but it had not occurred to these teams that AusAID might require this. CAA's implementing partner has reconsidered aspects of the *Shosholoza AIDS Project* which will result in changes at the output level but had not anticipated revising the original design or raising the issues involved with AusAID through its Australian partner. These de facto changes should be formalised to maintain the relevance of the design and to ensure that reports to AusAID are comprehensible.

The reluctance to amend design documents suggests that the procedures should be clarified between AusAID and NGOs. It would seem that NGOs require clearer guidance on the extent to which changes can be made. Revised procedures are required to encompass revisions to project designs. Improvements in design should be welcomed by AusAID provided they serve implementation and do not breach the contractual obligations entered into by the NGO.

For projects funded under NGO Country Windows, in appropriate circumstances AusAID could consider allowing an inception phase over the first 6–12 months to enable further development and modification of the project design in consultation with beneficiaries. This could include baseline and KAP studies and analysis, as appropriate.

Change should be further 'institutionalised' by encouraging (perhaps requiring) NGOs to periodically review project designs and where changes are necessary to submit a revised design to AusAID (in an appropriate format). It is suggested that such a review should be conducted towards the end of the first year prior to finalising the following year's annual plan and the annual report to AusAID. This could coincide with the annual monitoring visit of the Australian NGO project manager that is budgeted for in most proposals. A mid-term review would be too late to fully implement the changes.

The suggested reviews would provide significant opportunities for Australian NGOs to assist their implementing partners by workshopping the design with project managers and staff. Conducting the review by the end of the first year offers an opportunity to familiarise staff with the design and to engage them in testing it and ensuring that their roles and responsibilities are congruent with it. Such a process also lends itself to involving stakeholders and representatives of beneficiary groups in a practical and mutually beneficial way.

5   MANAGEMENT

Findings

- AusAID's screening of NGO projects submitted for Windows funding was generally inadequate.

- The implementing organisations concerned are generally not effectively able to utilise design, including monitoring systems, as a management tool.

- The oversight by Australian NGOs of their African counterparts tended to be limited but in most cases appropriate.

- The accuracy and quality of reporting has in a number of cases been poor and may be inadequate for AusAID's monitoring purposes. All NGOs scored the achievement or likely achievement of their objectives higher in their reports to AusAID than the evaluation team did.

- Coordination was satisfactory overall but more could be done, particularly in the HIV/AIDS projects at the district and national levels.

Lesson

- The accreditation process alone cannot guarantee the quality of projects. Accreditation has to be complemented by responsible appraisal and oversight. However, AusAID officers cannot begin to adequately appraise projects or reliably assess performance if objectives, outputs and indicators are not clearly defined. The issue here is not micro-management or the availability of resources to monitor NGOs. It concerns the need for a more reliable foundation for responsible appraisal and oversight, and for better informed dialogue between AusAID and NGOs about development practice.

Recommendations

- AusAID and NGOs should invest more in the 'quality at entry' of activities implemented through NGOs including more attention to design standards (as recommended earlier) and a more rigorous appraisal of Window funded projects (which improved design would facilitate).

- The inadequacy of NGO reporting for monitoring purposes suggests there may be a valuable role for spot checks/reviews utilising resources available locally including appropriately trained PASU, local contractors and/or Australian organisations with local offices.

- AusAID and the NGOs need to address the limited extent of performance reporting and the weaknesses or unreliability of the performance information collected and therefore its use. This could be through training and/or future revisions to *NGOPI*.

- In most cases, Australian Government funds should only be used to support established local NGOs with a proven track record in-country. Where an Australian NGO makes a case for supporting a high risk or unknown local partner to implement a worthwhile development activity, an appropriate risk management strategy should be included in the project design.

5.1   AusAID's appraisal of NGO projects[36]

AusAID's appraisal of the five Window funded projects included in the cluster appears to have been superficial. In one case, an appraising officer noted that it was not clear what the project was trying to achieve but did not request the NGO to rectify it. Indeed no NGO was asked to revise any

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36 In this report, an appraisal is an assessment of a project proposal by AusAID against the agreed selection criteria and policy framework for the particular NGO program. It is normally undertaken by a panel.

aspect of the design of any of the projects included in the cluster. On a number of occasions when the evaluation team criticised project designs, NGOs responded by pointing out that AusAID had 'let it through'. AusAID staff at the African posts commented on the very limited time given for their comments on proposals.

AusAID's NGO section informed the team after presenting a draft of this report that NGO proposals are assessed by AusAID, not formally appraised and that NGOs are expected to appraise projects before submitting them for funding. Nevertheless, AusAID has to screen projects and the team strongly recommends that AusAID invest more in the 'quality at entry' of activities funded through NGOs, in line with bilateral development projects. This should include more attention to the standard of the designs presented, as recommended in the previous section, and a generally more rigorous assessment/appraisal process (which improved design would facilitate). NGOs should be asked to resubmit proposals if there are serious deficiencies in the conception or design of the project.

Ensuring quality at entry is critical in the context of AusAID's front-end risk management approach to working with NGOs. The front-end risk management strategies have included a five-yearly accreditation process, initially focussing on financial systems and accountability, and during the five years, a system of audits, financial spot-checks and cluster evaluations. The assumption has been that these strategies will enable AusAID to fund NGOs that are capable of independently contributing to Australia's aid objective. However, this evaluation has found that the accreditation process alone cannot guarantee quality at entry. The recent addition of performance as a key accreditation criterion is strongly supported by this evaluation. It is recommended that this include standard of design and utilisation of design for management and monitoring.

If there is a concern about the requirement for higher standards of design, it will probably be expressed by Australian NGOs, rather than their implementing partners. NGOs spoke of the formidable length of *NGOPI* and the requirements of various procedures and processes including accreditation. Many expressed the view that AusAID was becoming more rather than less 'hands on'. It is the view of the team, however that appraisal processes are indispensable and that AusAID has to scrutinise designs.

It may be that some NGOs will agree to improve the quality of designs submitted but still not adequately utilise design as a project management tool. This is a fundamental issue that deserves further discussion with the NGO community. One way of ensuring that design documents remain relevant is to encourage NGOs to assist their implementing partners to revisit the design documents and where necessary revise them to ensure their ongoing utility in implementation (see 4.7, *Revising design documents*).

5.2   AusAID's oversight of NGO projects

AusAID's briefing to the evaluation team indicated that an important reason for the use of NGOs for projects in the bilateral program to Africa was that, due to resource constraints, it is unable to monitor a portfolio of relatively small projects in these countries. AusAID officers repeatedly stated that they were not in a position to 'micro-manage' NGO projects. With relaxed standards of design which do not provide clearly defined objectives, outputs and performance indicators, neither AusAID or NGO staff are in a position to monitor effectively. A reliable assessment of performance cannot be made when the objective is stated as, for example, to provide peer education for HIV/AIDS[37], or to conduct research on the knowledge, attitudes and practices in relation to safer sex[38]. Thus the issue is not one of micro-management, which implies involvement at frequent periods and in detail, but the need for more meaningful objectives and outputs and a reliable basis for assessing performance.

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37   Factory Workers AIDS Project

38   Shosholoza Aids Project

NGO projects in Africa funded by AusAID are not closely monitored and should not be, but the trade-off for AusAID's delegation to NGOs is that it should insist on a more rigorous standard of design that facilitates responsible appraisal and oversight.

5.3   In–country interventions

No advantage is seen in a return to the former procedures under which AusAID participated in the meetings of Project Coordinating Committees. While there could be a clear advantage in on–going involvement by AusAID if staff resources at Posts permitted, this is not true of occasional involvement through attendance at Project Coordinating Committee meetings. Projects can give too much weight to this occasional participation, as for example at a *Kwetu Women and AIDS* Project Coordinating Committee meeting where the project adopted the suggestions of a visiting AusAID officer. Although project staff did not agree with the suggestion, they did not contest it because it was assumed to have the status of an instruction from the donor (see 3.7 *Analysis and Conception*). In this case, there may have been some confusion about the status of AusAID participation in Project Coordinating Committee meetings because under the previous SANGOP funded *Kwetu Project*, AusAID had a mandate to directly monitor NGO project implementation and a formal role at Project Coordinating Committee meetings. In consultation with NGOs, in 1996-97 AusAID took firm decisions to implement a front end risk management approach through the accreditation process. These arrangements should now be given the chance to work.

Nevertheless the evaluation indicates that aspects of NGO projects may need to be tested periodically in country. Besides evaluation, which is infrequent and expensive, there may be advantage in the use of locally available resources to check on aspects of projects of concern to AusAID, or to undertake field performance spot checks on a regular interval as part of the risk management approach to NGO management. For example the Winterveld AIDS Awareness Trust is a small vulnerable community-based organisation without the status and resources to manage a foreign project with confidence. A more thorough check at the local level would have contributed to the appraisal of the project. There is also potential for project progress to be reviewed utilising local resources. Consideration could be given to the use of three possible resources charged with specific tasks: appropriately trained PASU staff; local consultants on short term contracts; and/or appropriate Australian organisations with a local base.

5.4   ANGO support to implementing partners

The oversight by Australian NGOs of their African counterparts tended to be limited but in most cases appropriate. Obviously the stronger the implementing partner, the less input is required from Australia. The World Vision *TAWASA Project* appeared to strike a satisfactory balance. Tanzanian staff were competent across all aspects of the project and advised that their queries to Australia on technical matters were answered promptly by the Australian Program Officer. The only project with an Australian member of staff is the *Factory Workers AIDS Project* in which an AVI-appointed person acts as Program Liaison Officer. The job description of the Program Liaison Officer includes tasks, such as monitoring, that are more appropriate for, and in fact are carried out by, Zimbabwe staff. However the experienced Program Liaison Officer had recognised weaknesses in other aspects of management and has made a valuable contribution to the project team.

The APHEDA projects in South Africa encountered difficulties and needed guidance and support from the Australian NGO. APHEDA's project manager met with staff a number of times during monitoring visits and discussed the management problems besetting the *Winterveld Community AIDS Project*. The principal strategy used to address the problems appears to have been through staff training but there was no resolution and the project continued to flounder. In the team's view

APHEDA could have been more proactive in seeking AusAID's support to do so. Although APHEDA's proposal referred to assistance in providing examples of policy and strategy development, there is no evidence that this was done or even that it would have been feasible in relation to a difficult local situation.

Evaluation of this cluster of projects suggests that the most that implementing partners can expect of the Australian NGO at the operational stage is prompt back-up when needed, possibly on a limited range of subjects, such as the provision of technical information on request, guidance on reporting requirements and significant project reviews. But given the period between visits and the distance from Australia it may be unrealistic to expect more sustained support or a closer relationship. This in turn suggests that AusAID support for NGOs in Africa should be through well-established counterparts with a proven track record in project management. Where assistance is sought for a deserving project to be implemented by a partner without this background, careful attention should be given to its credentials, particularly in the risk analysis.

An important consideration is the formal status of the NGO. For accountability purposes, it should be a legal entity that meets local requirements in terms of registration and auditing. While there may be many thousands of community-based organisations that are deserving of support, the situation of remoteness from Australia and inability of the Australian NGO to be involved on an on-going basis means that Australian Government funds should not be directed to these organisations with a higher level of risk.

The *Factory Workers AIDS Project* supported by AVI is unusual in that the implementing partner Zimbabwe AIDS Prevention Program (ZAPP) is not an NGO but a program. The project is one of a program of projects originated by the Department of Community Medicine of the University of Zimbabwe. The partnership has been satisfactory to date for what might be regarded as a pilot project well designed by the University Department. But without the status of a legal entity or without a separate management and administrative capacity, ZAPP is possibly not the appropriate vehicle for extension or replication of the project on a larger scale. This study strongly supports the expansion of the peer educator approach to other worksites (including mines) but suggests that alternative organisational structures be explored for any future phase.

Apart from the improved attention to design and review by the Australian NGOs, the team saw no evidence to suggest a stronger or more frequent presence of Australian personnel. Projects can only be managed reliably by those on the ground giving their full attention to the local situation. The APHEDA and African Enterprise projects provide evidence of poor accountability from the Australian NGO to AusAID, the latter in respect of reporting on project objectives. It should be noted that these defects applied both to the Country Window, as well as the ANCP scheme. Improvement would be facilitated by improved design and a review at the end of the first year as well as the proposed quality spot check procedure discussed above.

5.5   Performance of implementing organisations

Table 5.1 rates the implementing partners in terms of project management and indicates that management varied considerably. World Vision Tanzania has an effective, cohesive, self-developing approach to management. The Zimbabwe Aids Prevention Program (ZAPP) is led by professional social workers, assisted by a Program Liaison Officer placed by AVI, and has good back up from the University of Zimbabwe. African Enterprise (South Africa) is an assured, fully professional organisation. Not least among its attributes is its fundraising capacity, which raises the issue whether it is in need of Australian Government funds. The one deficiency is African Enterprise's limited capacity to mentor students and graduates in their communities.

Each of the four HIV/AIDS projects clearly had strongly motivated personnel, particularly the Salvation Army *Kwetu Women and AIDS Project* working with commercial sex workers. In the case of the CAA and APHEDA supported projects however, motivation and dedication are not enough to achieve a satisfactory level of management. In the latter case the team strongly recommended to the implementing partner that priority should be given to a new records system and conducting an immediate audit by a properly qualified external auditor. As noted above, it is suggested that AusAID's remote mode of support should be confined to stronger NGOs with a formal status and an established record. Consideration could be given to the use of some locally based expertise to make assessments of the status and strength of NGOs proposed as implementing partners.

Table 5.1:　　　Summary of project performance – management by implementing partners

Project	Rating
TAWASA	Fully satisfactory (4)
Factory Workers AIDS	Fully satisfactory (4)
Social Empowerment Diploma	Satisfactory overall (3)
Kwetu Women and AIDS	Satisfactory overall (3)
Shosholoza AIDS	Marginally satisfactory (2)
Winterveld Child Nutrition	Marginally satisfactory (2)
Winterveld Community AIDS	Weak (1)

Management was often weak in terms of monitoring which goes back to weaknesses in design, specifically in this case monitoring systems. Effective self-monitoring by NGOs is not feasible until this is rectified. The staff of many of the implementing NGOs involved in the evaluation acknowledged that shortcomings in design made it difficult for them to monitor performance and thereby improve the implementation of the project concerned. The importance of design as the foundation for monitoring was also referred to as a key lesson in AusAID's cluster evaluation of NGO projects in Vietnam:

> "The definition of simple and achievable objectives, outputs and performance indicators contribute to reliable monitoring of project performance and implementation of activities."[39]

As noted earlier, none of the implementing organisations have sought to revise the project design documents to address shortcomings and provide a more effective foundation for implementation. This points to the need to introduce processes for the review and amendment of project designs. Quality at entry is important but it is equally important for implementing organisations to have mechanisms by which they can deal with design problems and facilitate improvements during implementation. This requires flexibility from AusAID and more attention to 'servicing the design' from the Australian NGOs.

5.6　　Performance information

The *TAWASA Project* appears to have in place an adequate system for the collection of information on mortality rates and the incidence of water-borne diseases, principally through the monitoring forms completed by Village Health Workers[40]. These pass from the Village Health Workers to the

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39　*Assisting Local Communities: Evaluation of Government Funded NGO Projects in Vietnam,* AusAID Quality Assurance Series No 18 March 2000, page IX

40　The Village Health Workers were trained as part of the WV Kahama Child Survival Project, also funded by the Australian Government. Data collection under the TAWASA project will build on the systems established under the Child Survival Project.

local health posts, then to district, regional and national level health authorities for analysis and reporting. The *Factory Workers AIDS Project* also appears to have access to reasonably adequate information, at least in relation to the performance of the peer educators, condom distribution, counselling and testing.

However the approach taken in the remaining five projects ranges from partially adequate (*Kwetu Women and AIDS* and *Social Empowerment Diploma*) to inadequate (*Shosholoza AIDS Project*) to poor (both *Winterveld Projects*). The *Kwetu Project* has produced a number of aggregated quantitative reports on different aspects of the project but the team found the record keeping at the Kwetu Centre to be somewhat chaotic. It was difficult to verify the basis of the aggregated reports. Individual case files are kept on commercial sex workers registered as clients of the Centre but when the team identified a random sample to examine, not all the files were available. In some cases, the NGOs had identified performance indicators but had not appeared to follow up with the collection of data, such as data on loan repayments (*Kwetu*) or on malnutrition rates (*Winterveld Child Nutrition*). African Enterprise reported on numbers of students completing the *Social Empowerment Diploma* but made inadequate provision to monitor the performance of graduates on their return to their communities of origin in terms of income generation and community development. In the case of the *Winterveld Community AIDS Project*, the team was unable to access any records at all.

It appears that NGOs are generally not using performance information as a management tool and are still inclined to regard monitoring as a reporting exercise imposed by donors. Reporting is only a secondary function of a monitoring system. The primary function is to provide project managers with critical information on which to base implementation decisions. This is an area that could be usefully followed up by AusAID and the NGO community through training and future revisions to *NGOPI*.

5.7   Accuracy and quality of reporting

The accuracy and quality of reporting in the projects reviewed has often been poor, although as far as the team is aware AusAID has not complained about any of the reports submitted. Several projects have moved in significantly different directions but this was not reflected clearly in project reporting. In most cases, changes made were sensible project management, which is to be commended. However, NGOs appear to feel locked in to reporting what they were supposed to be doing, whether or not they were doing so in fact. As noted in the preceding chapter on *Standard of Design*, this is at least partly because NGOs and some A-based and PASU staff are unsure about the extent to which changes can be made. Revision of procedures to encourage periodic review as recommended earlier would also encourage improved quality of reporting

Accuracy and quality are compromised in several other ways. Many NGOs focus on activities and omit to adequately address the achievement of planned outputs. The usefulness of these 'activity' reports is further weakened by the fact that they are usually narratives and don't compare achievements against quantitative targets. Reporting is also often compromised by a lack of performance information – there is no data to draw on (see *Performance Information* above).

A large proportion of the performance indicators in the designs assessed are merely a rewording or a quantification of an activity. Problems with indicators go back to deficiencies in the way objectives and outputs are formulated. Poor indicators and means of verification result in poor performance information. Again the quality of reporting and dialogue between NGOs and AusAID cannot improve until design improves.

Records management at the local level is also a factor. During the course of visits to the *Winterveld Community AIDS Project*, project staff were unable to provide the team with any records to confirm

the status of progress reports to AusAID. They advised that some records were in the house of the former project coordinator, who had been murdered, and that his family would not allow the project staff to take them back. The *Kwetu Women and AIDS Project* collected some information, but it was difficult to determine how data had been aggregated to report on the delivery of outputs.

Some reports have simply not been frank enough. The *Winterveld Community AIDS Project* encountered serious management and personnel problems that threatened outputs and ultimately undermined the project. In reporting on the project APHEDA made reference to a series of incidents and their effect on staff, but the reporting lacked substantive analysis of the institutional implications and the impact of the incidents on the project outputs. In relation to this project, the representative of APHEDA maintained that *NGOPI* does not require reports on the achievement of objectives to be linked to the delivery of outputs, and does not require reporting against targets. The Activity Report and Financial Acquittal Pro Forma set out in Appendix 28 of *NGOPI* (1997) requires NGOs to report on the extent to which the major activity outputs are likely to be achieved, using numeric measures if the performance indicators set out in the project proposal are quantifiable. In most cases, NGOs do provide numeric measures of proposed outputs in their funding proposals and it is valid to treat these as targets when assessing the extent to which project outputs have been delivered.

The team's understanding is that AusAID expects NGOs to report on the achievement of objectives on the basis of the delivery of outputs and that a project should not be reported as being likely to achieve its objectives if it is unlikely to deliver on significant outputs. Clearly this needs to be clarified by redrafting the proposal format to make plainer the logical hierarchy from activities to outputs to objectives.

As with other aspects of reporting, financial reporting is not meaningful when it is not related to well defined outputs. Oversight by AusAID tends to be confined to two aspects of the budget. First, the achievement of 75% of expenditure which affects the payment of the next tranche. Second, officers also tend to note significant variations in major heads of expenditure and to agree to transfer to another item. For example, due to a late start up and a favourable currency fluctuation, the *Factory Workers AIDS Project* was able to divert funds to activities which contributed to the project exceeding targets for the training of peer educators and the workers reached. However there is a frequent and significant movement of expenditure between items within reporting periods that are reported on after the event.

The *Kwetu Women and AIDS Project* reported greater emphasis on work through its extension centres in rural areas but this did not show up in accounts at all until the project accountant revised the budget headings. It should be stressed that the team found that transfer of funds between expenditure items within projects was sensible, good project management and that it was only the reporting aspect which was at fault due to inadequate project design.

In every case NGOs scored the achievement or likely achievement of their objectives higher in their reports to AusAID than the evaluation team did at evaluation. This divergence ranged from 0.8 to 2 points overall and averaged 1.5 points overall (Table 5.2).

Table 5.2: Achievement of project objectives (NGOPI scores) – comparison of assessments

Projects	Australian NGO reports	Implem partner's workshop response	Evaluation team's assessment
Factory Workers AIDS	4.8	4.63	4
Social Empowerment Dip	5	3.5	3.5
Kwetu Women and AIDS	No scores provided	3.25	3.2
TAWASA	5	3.5	3
Shosholoza AIDS	4	3.5	2.33
Winterveld Child Nutrition	4.5	4	2.75
Winterveld Community AIDS	3.8	3.2	2.2

Although the implementing organisations still rated their achievement of objectives higher than the evaluation team in all but one case, there was a considerable degree of convergence in the evaluation workshop (second column). In some cases, agreeing to tighten up project objectives contributed to lower assessments of achievement.

5.8   Coordination

The team rated each of the seven projects as satisfactory overall in relation to coordination. In some cases this assessment was based largely on qualitative criteria and in others because the project was well coordinated at one level but not at others. The African Enterprise *Social Empowerment Diploma* is unique in that it is self-contained and totally coordinated with its own contacts of church communities and groups supporting the church. However, because it is so self-contained, it has minimal contact with national and provincial authorities and with relevant university programs. Although it operates as an extremely efficient "island" and is responsive to national priorities for social empowerment and community development, the team felt that it could be more connected to other related activities.

Coordination required at the national level is often a problem for NGOs as relatively small organisations that lack political weight. In the case of projects relating to HIV/AIDS, each of the three countries visited has a national AIDS coordination mechanism, in which NGOs can participate and a forum managed by and for NGOs themselves. In Tanzania, these mechanisms have been slow to start but are now receptive to contributions from NGOs. This is an area for greater attention by the *Kwetu Women and AIDS Project*. It has established the need for special attention to the commercial sex workers and acknowledged their right to welfare. It is now positioned to play more attention to advocacy on behalf of commercial sex workers in relation to community support and human rights and for training of other groups in these fields.

In Zimbabwe, national mechanisms have greater experience and the value of the *Factory Workers AIDS Project* is acknowledged. The project can now use the coordination mechanism to build on this recognition and achieve wider influence in both national and NGO programs for education in the workplace. In South Africa there is great diversity in the quality of services from the most sophisticated treatment and information campaigns to limited access to poorly equipped clinics and education programs. Coordination mechanisms are weak and contribute little to a more even level of standards. Both the NGO projects reviewed (*Winterveld Community AIDS* and *Shosholoza AIDS*) need external support but this is not readily available to them.

Paradoxically, although World Vision has established good linkages with district authorities, it cannot rely on the in-kind contribution of the District Water Department and this may further delay survey work. Some other NGOs and bilateral donors still pay for these services and as a result get first priority. It appears that, at least in the short term, there is no prospect of a more cohesive approach from NGOs and World Vision will have to contend with the problem for the life of the project.

Coordination has important implications for sustainability and for this reason needs constant attention in project management. There is a tendency for a project with a short duration to internalise its effort and to "go it alone". Projects should be prepared to take the initiative in coordination. In Tanzania the national AIDS strategy now requires a strategy at district level. This provides both a challenge and an opportunity for the *Kwetu Women and AIDS Project* to work far more closely with district authorities and to shift its emphasis from welfare at the individual level to training at the district level.

Coordination is also important for measuring district and national level impacts of aid interventions. NGOs must ensure that relevant data collected through their projects is fed into national level surveillance of HIV/AIDS and other sexually transmitted diseases (STDs). Apart from the *Factory Workers AIDS Project*, where testing is done in the ZAPP clinic, the other projects provide pre and post-test counselling but refer their clients on to government clinics for actual testing. The data is recorded by the clinics and fed into district and national level surveillance reporting. ZAPP clinic data is provided directly to the National AIDS Coordination Program. This provides important supplementary information to the HIV and STD prevalence data obtained through blind testing of pregnant women in antenatal clinics which is standard practice in all three countries.

5.9   Australian identity

Australian identity was strongest in the *TAWASA Project* due to World Vision's long involvement in Kahama District with Australian Government support. Elsewhere, Australian identity was less known at this point but efforts were being made by all implementing partners to identify the source of funding.

The team considers that acknowledgement of Australian support is both appropriate and adequate. It is noted that acknowledgement of a contribution from the Australian people is preferable to a reference to AusAID, which is not a widely known entity or likely to be and which is consequently not readily identifiable as Australian.

Box 5.1: Alternative suggestions from Advisory Group

Members of the Advisory Group assisting the evaluation team suggested that there may be other ways of improving project quality and performance. One suggestion was contracting out the management of a funding round (ie Window or Scheme) eg to ACFOA. It was suggested that the funding round could include a capacity building component and regular reviews to continuously improve quality. Monitoring could be improved by either enhanced PASU capacity, the scheme managers or both. It was suggested that this approach would allow AusAID to focus on getting the parameters right in order to improve quality and measure impact.

Other suggestions for AusAID included:

- Fund designs (as was the case under the former Southern Africa NGO Program - SANGOP);

- Give NGOs longer lead times (3 months) to produce a design and during this period consult with NGOs and provide training if necessary;

- Add a design expert to selection panels;

- Revise the selection criteria in guidelines for funding rounds to put more emphasis to design (along QAG lines) and to build up management and self-assessment processes;

- Tighten quality benchmarks, fund NGO capacity building and tie project funding to a quality assurance process; and/or

- Contract out training for ACFOA to organise.

6 ACHIEVEMENT OF OUTPUTS AND OBJECTIVES

Findings

- Achievement/likely achievement of objectives on the *NGOPI* scale ranged from 'mostly achieved' (80-99%) to 'not achieved' (<50%). The mean score across the projects was exactly 3 or 'partially achieved' (50-79%).

- Performance on the broader qualitative scale used by the team reflecting *AusGUIDE* ranged from 'fully satisfactory' to 'weak'. The mean score for achievement of objectives across the projects was 2.7, just below 'satisfactory overall'.

- Most projects ended or are currently well below target in terms of the delivery of planned outputs. In some cases delayed implementation was/is the cause while in others the targets were set too high at the outset and should have been revised. However the commonest problem has been an inability to deliver on a meaningful scale.

- One component of one project was regarded as best practice, a function of sound conception and implementation. Problems encountered by projects in achieving objectives include deficiencies at conception (including technical assessments), inadequate resourcing/limits to capacity (particularly personnel) and unrealistic objectives given resources and project duration. Particular challenges have arisen in HIV/AIDS projects in the implementation of behavioural change interventions.

Lesson

- Outputs are critical in the achievement of objectives and should provide the bridge between activities and objectives. It is particularly important that they are realistic in a quantitative sense and adequately linked to objectives in a qualitative sense.

Recommendations

- Some projects will need more time to achieve their objectives and deal with sustainability issues. In these cases AusAID should consider granting no-cost extensions if requested.

6.1   Quantitative scale

Over the time period of the projects covered by this evaluation, AusAID has required NGOs to report primarily at the outputs level and to include a self-assessment of achievement or likely achievement at the objectives level using a quantitative scale (Box 6.1). The evaluation team applied this form of assessment, to mirror what is required of NGOs and to compare assessments, before assessing overall quality and performance. It should be noted that this *NGOPI* scale has now been replaced by the new five-point quality rating scale (see Box 1.1, p 3) in the revised *NGOPI* that was launched in July 2000, following the evaluation.

Box 6.1: NGOPI Scale – required by AusAID for NGO self-assessment

The component objective was/is:

5: Fully achieved or exceeded / likely to be fully achieved or exceeded (100%)

4: Mostly achieved / likely to be mostly achieved (80-99%)

3: Partially achieved / likely to be partially achieved (50-79%)

2: Not achieved / not likely to be achieved (<50%)

0: Dropped during implementation

Most of the projects included in the cluster evaluation rely on statements of activities at the output and even objective levels in their designs. The objectives were so unclear in many cases that the evaluation team had to recast the objective level, and sometimes output statements, to be able to assess project achievements. In some cases this involved inferring objectives where none had really been provided. The team consulted implementing organisations about these changes and in almost all cases there was general agreement that the revisions better described their projects.

Following *NGOPI*, the team rated each objective on the basis of the delivery of planned outputs, although where the linkage between outputs and objectives proved deficient the team relied more on a direct assessment of the achievement or likely achievement of the objective. The scores for each objective were then added and divided by the number of component objectives to arrive at project averages (Table 6.1).

Table 6.1: Achievement of objectives on NGOPI scale

Project	Average component scores
Factory Workers AIDS	Objectives likely to be 'mostly achieved' (4.0)
Social Empowerment Diploma	Objectives 'partially' to 'mostly achieved' (3.5)
Kwetu Women and AIDS	Objectives more than 'partially achieved' (3.2)
TAWASA	Objectives likely to be 'partially achieved' or better (3.0)
Winterveld Child Nutrition	Objectives less than 'partially achieved' (2.75)
Shosholoza AIDS	Objectives risk being less than 'partially achieved' (2.33)
Winterveld Community AIDS	Objectives 'not to be achieved' (2.2)

6.2   Overall achievement of objectives

The team then considering performance against objectives using the broader qualitative scale used throughout this report (see Chapter 1, Box 1.1, *Quality and performance scale*, page 3). This took the *NGOPI* scores into account but also included consideration of the quality indicators developed for the evaluation (reflected in the *Self–Assessment Questionnaire for NGOs* at Annex 2).

Table 6.2: Summary of project performance – achievement of objectives

Project	Rating
Factory Workers AIDS	Fully satisfactory (4)
Social Empowerment Diploma	Fully satisfactory (4)
Kwetu Women and AIDS	Satisfactory overall (3)
TAWASA	Satisfactory overall (3)
Shosholoza AIDS	Marginally satisfactory (2)
Winterveld Child Nutrition	Marginally satisfactory (2)
Winterveld Community AIDS	Weak (1)

The peer education/awareness component of the *Factory Workers AIDS Project* is very strong. However, it remains very difficult to assess the impact on men's behaviour and it is recognised that the KAP survey soon to be completed will not necessarily solve this problem. Sustainability is addressed as a project component but this was conceived very narrowly and more is needed to get

factory management to take responsibility for their peer education programs. Nevertheless the team regards overall performance as more than satisfactory to date and likely to be fully satisfactory at completion.

The one component regarded as representative of best practice by the team was the use of peer educators to raise awareness of risk behaviour in the *Factory Workers AIDS Project.* This success can be attributed to sound conception and implementation, just as the weaker performance of the *Shosholoza AIDS Project* (see below) that also involves peer educators can be attributed largely to underbudgeting and a lack of staff for adequate mentoring of the peer educators. But both projects highlight the potential of peer education in HIV/AIDS awareness and prevention.

The *Social Empowerment Diploma* supported by African Enterprise with ANCP funds has achieved its training objectives but it was agreed that the limiting factor is capacity to follow up and mentor graduates. Nevertheless in terms of overall performance the team regards the project's achievements as fully satisfactory.

The *Kwetu Women and AIDS Project* funded through the Salvation Army will have slightly more than partially achieved its objectives at completion. Performance is considered satisfactory overall. The most successful component has been risk reduction through the promotion of condoms, treatment of STDs and (latterly) attempts to prevent young women migrating to the city to enter commercial sex work in the first place. However, the project will not have achieved its objectives in relation to offering alternative incomes through income generating activities, repatriating commercial sex workers to their home of origin or establishing support networks for former commercial sex workers.

The *TAWASA Project* funded through World Vision has only completed one year. At this point it appears likely to only partially achieve its objectives mainly because it may not be possible to meet all targets in relation to sustained access to clean water due to hydrogeological problems and maintenance issues. These difficulties are largely a result of inadequate technical assessments. The project has the potential to improve considerably over the remaining two years and should be at least satisfactory overall if not better at completion. *TAWASA* exhibits good attention to process, and project managers are well organised and capable.

The achievements of the *Winterveld Child Nutrition Project*, supported with ANCP funds, are less than satisfactory overall. A key output, the establishment of self-help nutrition groups focussing on small gardens and income generating activities, was not realised. This was only a seven-month intervention and the objectives were unrealistic given this timeframe.

The *Shosholoza AIDS Project* in KwaZulu-Natal has just over a year to completion and is in danger of falling short of its outputs and objectives (<50%), although it is hoped that additional resources will be secured by CAA to prevent this. The key weakness is that the resource demands of 'servicing' a peer education project were seriously underestimated at conception, particularly in relation to ongoing training and mentoring. Another important weakness has been the failure to date to develop a strategy to get the key stakeholders (the soccer associations) to agree to include the maintenance costs of the project in their budgets.

The weakest project, the *Winterveld Community AIDS Project*, is nearing completion and is very unlikely to achieve its objectives. The most promising aspect has been raising awareness of risk behaviour through drama and puppetry - the volunteer dramatists won two awards for their performances. Unfortunately this strength was not transferred to the schools system in a systematic way. Moreover the project failed to achieve 50% of its planned outputs in four out of five components, including those dealing with the formation of HIV peer support groups, counselling and home based care. In terms of quality the team regards the project as 'weak'.

Most projects ended or are currently well below target in terms of the delivery of planned outputs. In some cases delayed implementation was the cause, in others the targets were set too high at the outset and should have been revised. A more serious problem has been the inability to deliver on a meaningful scale, most notably in the case of the two HIV/AIDS projects that sought to establish HIV peer groups and provide home based care.[41] Some projects will need more time to achieve their objectives and deal with sustainability issues. In these cases, it is recommended that AusAID consider granting no-cost extensions if requested (ie no additional funding from AusAID).[42]

Challenges have arisen in the implementation of behavioural change interventions. Condom promotion is working in the commercial sex industry in Dar es Salaam and seems to be leading to reduced risk in casual sexual encounters. However there are signs of a negative backlash against condoms amongst the youth in South Africa and it is clear that condom usage is low between established couples, including boyfriends and girlfriends, and complementary strategies are required. None of the projects reviewed have satisfactorily addressed these specific issues. Two of the HIV/AIDS projects, *Factory Workers AIDS Project* and *Shosholoza AIDS Project*, are attempting to assist women indirectly by improving men's willingness to discuss risk behaviour with their partners. While this is promising the projects concerned have yet to demonstrate that it is effective. They should probably also work directly with men's sexual partners.

In scoring the projects the team observed that while the *Social Empowerment Diploma* rated well on a number of criteria relative to other projects, this is because of the institutional capacity of African Enterprise in South Africa and the simplicity of the undertaking. Other projects set themselves more ambitious objectives in more difficult circumstances and performed below expectations. Nevertheless some of the riskier projects are in challenging areas and have the potential to break new ground. They were worthy of funding.

There were some very different perceptions of overall performance and quality. The evaluation team generally rated the projects lower than the Australian NGOs and their implementing partners, although there was some acceptance of the team's view by local implementing partners in the evaluation workshops. (See Annex 4: *Overall quality and performance – comparison of NGO self-assessments and evaluation team assessments.*) The team acknowledges that the recasting of objectives (in order to distinguish between activities and objectives) affected the rating of some of the achievements of some projects insofar that it is harder to achieve objectives than complete activities.

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41 Kwetu Women and AIDS Project; Winterveld Community AIDS Project

42 TAWASA; Shosholoza AIDS Project

7   EMPOWERMENT, CAPACITY BUILDING AND GOVERNANCE

Findings

- The projects in the cluster have generally made a contribution to empowerment at the individual level although often on a limited scale. The most difficult challenge has been giving practical recognition to the rights of the most disempowered, including PLWHA.

- Beneficiary groups and communities have been involved only very superficially in project conception, design and implementation and as a consequence the projects have done little to strengthen the capacity of communities and groups to plan, implement and evaluate interventions for themselves. This would have been particularly important in relation to community responses to the HIV/AIDS pandemic. NGOs cited the relatively short notice provided by AusAID for Country Window funding rounds (generally six weeks) as a constraint to undertaking a participatory planning and design process.

- Efforts have been made towards capacity building through the training of peer educators, establishment of Water User Groups etc, but these achievements are vulnerable beyond the life of the projects concerned.

- Weaknesses in capacity building mean that the projects have not realised their potential in relation to the strengthening of civil society or what may be termed 'primary governance'. All projects have the potential to contribute in this area but only one is fully satisfactory.

- The NGOs and AusAID both appear to be uncertain about the role human rights should play in Australian funded projects.

Lesson

- The participation and empowerment of target groups and communities cannot be tacked onto projects – their input has to be secured at conception and facilitated throughout implementation inter alia by negotiating roles and responsibilities in monitoring and reviewing performance.

Recommendations

- AusAID and the NGOs should review their strategies in relation to empowerment and capacity building, particularly in terms of involving target groups, communities and local stakeholders in project conception and implementation. These are fundamental issues in primary governance/strengthening civil society that should be more adequately addressed at design and appraisal. AusAID should endeavour to provide longer notice of Country Window funding rounds so that NGOs have sufficient time to consult with target groups, communities and stakeholders.

- AusAID should clarify the role that human rights protection and promotion should play in Australian funded NGO projects and how this should be assessed upon appraisal.

7.1   Empowerment of individuals

All projects reviewed are concerned to some extent with empowerment at the individual level. The *Social Empowerment Diploma* is succeeding in empowering those individuals who pass through the diploma course and many of the people with whom they work. The four HIV/AIDS projects all make some contribution to the individual's knowledge to make better-informed choices in relation to sexual practice and/or reproductive health or health care. The *TAWASA Project* and the completed *Winterveld Child Nutrition Project* have both commenced a contribution to empowerment through education in their respective fields.

The peer educators and other volunteers involved in the four HIV/AIDS projects are highly motivated and clearly find the work personally rewarding. Some have gone on to paid employment or achieved greater job security. In the *Winterveld Community AIDS Project,* however, an unresolved conflict within the organisation undermined the prospects of benefits to the unemployed youth and secondary school students involved. Some volunteers are also discouraged by the limits to what they can achieve, whether they are counselling girls to leave the commercial sex industry[43] or trying to assist people suffering at home with AIDS.[44]

Table 7.1: Summary of project performance – empowerment, capacity building and governance

Project	Rating
Social Empowerment Diploma	Fully satisfactory (4)
Factory Workers AIDS	Satisfactory overall (3)
Kwetu Women and AIDS	Satisfactory overall (3)
TAWASA	Satisfactory overall (3)
Shosholoza AIDS	Marginally satisfactory (2)
Winterveld Child Nutrition	Marginally satisfactory (2)
Winterveld AIDS	Weak (1)

Two projects attempted to establish groups for PLWHA and one also for former commercial sex workers.[45] Such groups have the potential to give practical recognition to the human rights of some very disempowered individuals. However there was very little success in this area and those few groups formed have a tenuous existence due to the stigma attached to their situations, usually exacerbated by the extreme poverty of their communities.

7.2   Empowerment of communities and groups

Only two of the projects could be said to be based on existing community or group initiatives - the *Winterveld Community AIDS Project* and the *Social Empowerment Diploma.* It is notable across all seven projects that communities and target groups have only been involved very superficially in project conception and implementation. One consequence is that the projects are doing little to strengthen the capacity of communities and groups to plan, implement and evaluate interventions. This would have been particularly important in relation to community responses to the HIV/AIDS pandemic. The Salvation Army extension officers helping to implement the *Kwetu Women and AIDS Project* are perhaps beginning to have some success in stimulating this capacity in rural areas. The *TAWASA Project* relies most on local capacity in implementation through training of Village Health Workers and Water User Groups but progress has been handicapped by some confusion of roles.

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43 Kwetu Women and AIDS Project

44 Winterveld Community AIDS Project; Kwetu Women and AIDS Project

45 Winterveld Community AIDS Project; Kwetu Women and AIDS Project

None of the implementing partners could demonstrate a real effort to involve stakeholders and beneficiaries in monitoring performance. They are not involved in collecting information nor in analysing it and acting on it. Arrangements should have been set in place to secure the input of stakeholders and representatives of beneficiary groups during conception and design. This would provide a practical form of empowerment in relation to the implementation of the project and provide invaluable feedback. It would also be a valuable investment in sustainability.

There are no structures in place in either the *Kwetu Women and AIDS Project* or the *Winterveld Community AIDS Project* to shift the burden of support from the NGOs to the communities, although in the former case there is some prospect that the project could at least partially achieve this outcome through enlisting support at district and community level. This is intended as a future direction.

7.3 Capacity building

The *Factory Workers AIDS Project* has made a firm, well-defined contribution to capacity building, particularly through those peer education teams linked to in-house clinics. However the ranks of the peer educators will need constant replenishment due to attrition and the changing interests of the peer educators as individuals. The project has had a limited impact on the development of support of factory management but the evaluation team did not have access to baseline data on the attitudes of management, nor the opportunity to survey the managers of all factories. Those interviewed, together with comments of project staff indicate that the attitudes of managers vary considerably from enthusiastic support to passive support with few converts from the passive to the enthusiastic.

Many of the efforts made towards capacity building are vulnerable. Water User Groups in the *TAWASA Project* are expected to empower people to improve their lives through access to clean water and sanitation. This will not occur until the various inputs of the project, in the form of water installations, training and back-up support, are brought together within a short time frame. In the case of the *Winterveld Child Nutrition Project* women learnt about improved child nutrition and will retain these lessons. However, the group gardening and income generating activities of the project were not well designed and did not provide a foundation for capacity building or sustainable structures.

Capacity building in the *Shosholoza AIDS Project* has been extremely limited because of lack of resources. Moreover the present level of training given to peer educators is vulnerable without follow-up training and mentoring.

The Australian NGOs have a mixed record in relation to strengthening the capacity of their implementing partners. In some cases their partners are already quite strong. For example, African Enterprise is a strong institution in South Africa as are World Vision and the Salvation Army in Tanzania. ZAPP is a collaborative effort of a Zimbabwean and an American university to which AVI has provided a staff member. The smaller organisations of WAAT and TAI implementing the *Winterveld Community AIDS* and *Shosholoza AIDS Projects* respectively have needed more help. An Oxfam regional AIDS coordinator backs up TAI but given her responsibilities can only allocate 10% of her time. WAAT, a small community based organisation in a difficult socio-economic environment, has been most in need of support to resolve its management difficulties. APHEDA helped with some management training but did not go far enough in preventing the demise of the project.

7.4   Primary governance

Weaknesses in capacity building in almost all projects mean that the projects have not realised their potential in relation to the strengthening of civil society or what may be termed 'primary governance'. An exception is the *Social Empowerment Diploma* where trainees already in community development situations have benefited from the course and moved back to their work situations, providing a basis for the strengthening of civil society. In other projects the contribution to civil organisation is limited either because of limited progress with primary objectives or a narrow focus. These two factors can be related as, for example, in the *Winterveld Child Nutrition Project* where the general failure of the gardens has led to the almost total failure of the groups, tenuously held together by an interest in contributions to funds needed for burials. A broader approach might have led to a more exhaustive exploration of other means to improve nutrition.

In the comparatively well-designed *Factory Workers AIDS Project*, there is still a weak link between the well-organised peer education and the dependence on the employers to come to the party and to be answerable for the project's sustainability. A linkage should be made in the organisation of the workers themselves to expect the continuation of project services under the protection of the existing government legislation. This linkage has not been developed at all.

Australian NGOs emphasise the importance of a strong civil society and generally maintain that they can make a valuable contribution at the primary governance level. However, the projects reviewed do not support this claim. NGOs should be asked to address the issue in their proposals for government funding. This might involve including the strengthening of civil society at the objective level in design. Alternatively it could be incorporated as outputs under each component objective where it is relevant. To do so, NGOs need to develop a deeper understanding of what is involved in strengthening civil society and how it relates to particular interventions. AusAID also needs to be clearer about its expectations and the strategies it supports.

7.5   Human rights

Although the projects reviewed have not specifically addressed human rights issues, the *Kwetu Women and AIDS* and *Factory Workers AIDS Projects* have had an impact at the national level and could in any future phases play influential roles in advocacy and training in relation to protection and promotion of the rights of their respective target groups. At the local level the *Kwetu Project* is making a contribution in the promotion of community support for PLWHA and for the reintegration of former commercial sex workers in their communities, although the Salvation Army has not advocated rights as such. It would have been appropriate if it had done so, particularly in relation to the legal status of commercial sex workers and occupational health and safety. The *TAWASA* proposal does address the right to water and the Water User Groups have the potential to give practical recognition to this right.

The NGOs and AusAID both appear to be uncertain about the role human rights should play in Australian funded projects. This is evident from the notes of appraisers as well as responses to AusAID's Activity Management System checklist question *Does the activity promote human rights?*[46] It is answered inconsistently for similar projects and in three out of the four HIV/AIDS projects it was answered in the negative, as if there are no human rights issues involved in HIV/AIDS prevention and care. Clarification is needed.

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48   Under 'Other Markers' in the AMS Marker Checklist attached to NGO proposals

8 SUSTAINABILITY

Findings

- It is often the case that NGOs do not generally expect projects to be sustainable within one funding period and instead seek funding for individual projects for longer periods whether by extensions or using funding from other sources. This highlights an apparent inconsistency between AusAID's formal requirement for sustainability within the funding period and common practice.

- Although the team agrees sustainability within short timeframes is generally not feasible, more attention should have been paid to the sustainability of benefits and to those activities that are essential to sustain benefits by the end of the funding period. None of the NGOs concerned had an exit or phase-out strategy.

Lesson

- Performance in relation to sustainability will not improve until more clarity is brought to the subject. A clearer distinction needs to be drawn between the sustainability of activities and the sustainability of benefits and analysed at conception, design and appraisal. Activities also deserve differentiation - some activities must be sustained to achieve lasting benefits, others are merely project activities in which investments should not be continued beyond a reasonable period.

Recommendations

- AusAID should clarify what is required of NGOs in relation to sustainability through discussion and subsequent amendment to *NGOPI*. The issue of sustainability should thereafter be addressed more rigorously at appraisal and assessment.

- At the same time, the issue of sustainability should be addressed more realistically by AusAID at both a policy and project level consistent with *AusGUIDE* definitional and procedural guidelines. AusAID should continue to expect project benefits and activities supporting benefits to be sustainable, but a two to three year time frame will not always be appropriate.

- AusAID should consider if it should anticipate funding proven NGO projects for longer periods (eg as a second phase). If this became the practice it would nevertheless be appropriate to require applications for extensions and to treat them on their merits in equal competition with new proposals.

8.1 Sustainability issues

Although two of the projects were regarded as satisfactory overall, sustainability was not a strong point of the projects and most were only marginally satisfactory (see Table 8.1, following page). Few gave serious attention to sustainability, other than looking to secure continued funding from AusAID and/or an alternative source - see *Ongoing Funding* below).

Students undertaking the *Social Empowerment Diploma* pay only 10% of their costs. AE Australia informed the team that the course would become sustainable when students pay the full cost. This may be unrealistic – very few students could pay even half the costs of the course and there are no plans to institute cost-recovery. Fortunately, African Enterprise has a strong funding base in South Africa so the course is likely to continue.

More importantly the benefits to students who have completed the course are likely to be sustained and most appear to be confident self-starters who will continue to assist their communities. The limitation is that AE lacks the capacity to follow-up graduates and their projects and so there is a risk that the benefits of the training will fall off over time.

Table 8.1: Summary of project performance – sustainability

Project	Rating
Social Empowerment Diploma	Satisfactory overall (3)
Factory Workers AIDS	Satisfactory overall (3)
TAWASA	Marginally satisfactory (2)
Kwetu Women and AIDS	Marginally satisfactory (2)
Shosholoza AIDS	Marginally satisfactory (2)
Winterveld Child Nutrition	Marginally satisfactory (2)
Winterveld Community AIDS	Weak (1)

The sustainability of the *Factory Workers AIDS Project* is linked to the commitment of management to budget for training and refresher training of peer educators. Enabling legislation and policy as well as the state of the Zimbabwe economy and the performance of the businesses concerned will also be critical. The project took a phased approach to sustainability, setting out in the current project to 'define those elements of a peer education program most likely to be supported by industry'. The intention is to build on this in a following phase of activities (for which AVI apparently seeks AusAID funding). A six year horizon is reasonable (assuming that is the intention), however the team were of the view that more could have been done within three years to get managers to put peer education activities onto their recurrent budgets.

The *Shosholoza AIDS Project* faces similar challenges in relation to the 'institutionalisation' of the project. It was agreed in the project evaluation workshop that it was not enough for the soccer leadership to be 'sensitised and supportive' and that the objective was rather to obtain their commitment to carry the project forward, an appropriate performance indicator being whether or not the soccer associations put HIV/AIDS activities, including support for the ongoing training of peer educators, on their budgets. At this stage, the prospects for this development are not promising.

The sustainability of the water supply component of the *TAWASA Project* relies on the capacity of the Water User Groups to raise the level of funding needed from their members to meet maintenance costs, their ability to motivate the trained pump mechanics and the interest and capacity of the private sector to supply parts and services. World Vision is addressing capacity at the community level with the formation of operation maintenance funds and the training of pump mechanics. The biggest risk identified by the team concerned the supply of spare parts. World Vision has subsequently advised that there is a reliable hand pump spareparts dealer in Kahama who has been the source of spare parts for the pilot Kahama Community Water Project and District Water Engineer activities for a number of years.[47] The sustainability of a related activity, health promotion, depends to a large extent on the willingness of the Village Councils to honour their obligations and pay incentives to the Village Health Workers (which some have been failing to do to date).

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47 The team was not advised about this when they raised the issue of a private sector spare parts supplier during their visit to Kahama.

The *Kwetu Women and AIDS Project* has continued for a total of seven years[48]. The project has adopted a social work caseload approach and tried to reach as many individual women as possible. The Salvation Army appears not to have a strategy for sustaining this assistance and extending it to more women as they enter the commercial sex industry other than perhaps to secure funding to continue. Staff told the team that when funding ceases many activities may be curtailed including condom supply, follow up of loans for income generating activities and support groups for PLWHA. The benefits to many of the women reached will be sustained to the extent that they protect themselves from exposure to HIV/AIDS. A very small proportion has actually left the commercial sex industry.

The *Winterveld Child Nutrition Project* failed to give attention to major aspects of sustainability and the project had no strategy for funding recurrent services other than to look for another donor. Fortunately, it seems likely that the child nutrition aspect of the project will continue as part of the services provided by St Peter's Clinic, the non-government local clinic that implemented the project, with the support of the European Union. It appears the concept for the extension of nutrition services into the community in the form of nutrition satellites came from other organisations in the Winterveld area that have not made any further investment in the concept.

It should be noted that APHEDA included sustainability as a risk and in its 1998-99 report stated that activities were sustainable at the individual level of trainees retaining skills but that the training activities themselves were not sustainable without government support. In the circumstances this is tantamount to acceptance by AusAID that the project was not sustainable beyond the individual level.

The *Winterveld Community AIDS Project* is assessed as weak in terms of sustainability. The activities of the project's Vulingqondo Centre will not be sustained in the absence of further support for its recurrent budget, which is not assured. One positive feature is that in South Africa generally, and Winterveld in particular, there is a large number of unemployed youth with reasonable educational qualifications, providing a large pool of volunteers who hope for constructive and eventually paid employment. They could be drawn on to continue drama and other activities. Unfortunately the volunteers who have been involved to date have been demoralised by the turmoil created by management conflicts and it would take a really concerted effort by the trustees to turn the project around and establish Winterveld AIDS Awareness Trust (WAAT) as an effective and accountable organisation.

Overall, the assessment by the team in relation to sustainability must be regarded as unsatisfactory from the point of view of a funding agency. As with most other criteria assessed by the evaluation, considerable improvement could be effected by improved design. For example, the well-managed *TAWASA Project* is severely constrained by a design that lacked attention to important technical issues. Similarly, the *Shosholoza AIDS Project* could have had much firmer prospects of sustainability if the design had paid closer attention to the refresher training and mentoring requirements of an extensive peer education project.

On the other hand, the vulnerability of WAAT underlines the fact that the continuation of welfare related services including individual counselling about risk behaviour and home visits to PLWHAs depends largely on the capacity of the organisation to secure ongoing funding.

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48 Comprising the earlier SANGOP project and the current project funded under the 1997-98 HIV/AIDS Country Window round.

8.2   Ongoing funding

It is apparent that, frequently and realistically, NGOs do not expect projects to be sustainable within one funding period and that they intend to secure further funding by extensions or from other sources. All but two of the projects in the cluster carried on from previous projects. The *Kwetu Project* was clearly regarded by the Salvation Army as an extension of a long-standing activity (previously funded under SANGOP). The *Social Empowerment Diploma* simply involved the remittance of funds to cover one year of an ongoing course. *TAWASA* carried on from two similar projects which it will 'enhance'. The *Winterveld Community AIDS Project* constitutes ongoing funding to the Vulingqondo Centre and the *Winterveld Child Nutrition Education Project* filled a seven-month gap in funding experienced by St Peter's Clinic.

The *Shosholoza AIDS* and *Factory Workers AIDS Projects* are not extensions of previous activities, except in so far as the latter project builds on a research project. However, the NGOs concerned clearly expect to extend the projects. The *Shosholoza Project* is regarded as a pilot and the NGO is seeking further funding. The *Factory Workers Project* is exploring the activities which management will support, thus putting sustainability off to a further funding period. Thus none of the projects in the cluster were intended as stand-alone sustainable development activities. All four NGOs undertaking HIV/AIDS activities told the team that they were applying for further funding under the second AusAID NGO Country Window HIV/AIDS round in 2000-2001.

The team considers that the NGO approach is realistic, notwithstanding the fact that more attention should generally be paid to sustainability from the outset. This highlights an apparent conflict between AusAID's formal requirement for sustainability within the funding period and the reality and raises the issue of whether or not AusAID should offer NGOs opportunities for a continuation of funding of a project. At the moment ongoing funding is not supposed to be available, although this 'rule' is obviously frequently broken. If the Window funding rounds continue to repeat the same sector every three years (HIV/AIDS, water and sanitation, food security) there are clearly opportunities to provide ongoing funding. The team considers that the issue of sustainability should be addressed realistically both at policy and appraisal levels. While it will remain an important consideration, it may be unrealistic to dogmatically expect projects to be sustainable within a short 'projectised' time frame. It would be helpful at design and at appraisal if a clearer distinction was drawn between the sustainability of key activities and the sustainability of benefits.

9 IMPACT

Findings

- One project was considered fully satisfactory by the team, three satisfactory overall and three only marginally satisfactory. Two projects have had a significant impact on government awareness and policy in relation to HIV/AIDS prevention and a third has this potential.

- Impact was limited by poor performance in relation to planned outputs/targets; weaknesses in conception, strategy and design; inadequate resourcing; unrealistic objectives given the short duration of the activity and local project management problems.

- Four projects addressed poverty directly, two of which were fully satisfactory in the way they did so and satisfactory in terms of overall impact.

- The NGO projects evaluated evidenced savings in establishment costs and access to administrative services although the team was unable to accurately assess value for money. There was apparent equity in the distribution of benefits in the projects reviewed.

Lesson

- A consideration of the impact of projects is vital but it remains difficult to measure. There will not be any progress on this issue until definitions and method are agreed between AusAID and NGOs. Impact measurement does not have to be complex, but it can involve 'stepping outside' the design of projects and asking broader questions.

Recommendations

- AusAID should provide more guidance on impact measurement to NGOs but once definitions and method are clear it would be reasonable to require NGOs to include consideration of impact in design and an assessment of impact in project completion reports.

- Given the difficulty of verifying impact in HIV/AIDS projects, it is all the more important that NGOs develop strong linkages with other NGOs and agencies to make use of information gathered by others and ensure they are adopting a best practice approach.

- It is the team's view that consideration should be given to a 'sunset' approach to funding in South Africa where the issue is the government's handling of redistribution rather than the availability of resources.

9.1 Definitions

There is evidently some uncertainty amongst NGOs about AusAID's use of the terms 'outcomes' and 'impact'. The team equates 'outcomes' to achievements at the objective level in design. Under *NGOPI* (1997), AusAID has required NGOs to assess achievements at this level by applying a score based on the level of achievement which provides a ready basis for assessing outcomes. If anything more is required to assess outcomes it is arguably a more qualitative assessment of these achievements.

Impact is a more difficult concept to tie down. It is sometimes taken to equate to the purpose and goal levels in a design (see Box 9.1 next page). It is certainly relevant to assess impact at these levels. However, impact can also be assessed at the objective level by going beyond an assessment of achievements or outcomes to consider simply: *What difference has the project made?* To some

extent such an assessment involves stepping outside the design and the performance measures provided and devising additional quantitative and qualitative indicators to assess impact. This process may throw up unintended impacts, both beneficial and negative. (Suggested changes to the format for NGO proposals that would assist with impact assessments are discussed at 9.7 below.)

Box 9.1: The relationship of goals and objectives to outcomes and impact	
	Water Supply
Problem	High morbidity and mortality attributed largely to water-borne diseases
Goal	Substantial reduction in water-borne diseases
Objective	Meeting demand for community managed potable water supplies
Output	Statement of quantity and quality of water to be made available to households
Activity	Installation of wells
Outcome and Impact	Sustained availability of adequate potable water for domestic use
Impact	Substantial reduction in water-borne diseases

For the purposes of the evaluation the team assessed the impact of each project by first considering the extent to which project objectives had been achieved or are likely to be achieved (as recast by the team where the original project proposals did not adequately distinguish between activities, outputs and objectives) and then by looking beyond this to assess what difference this made to the problem or situation addressed by the project. The team looked particularly for a sustained benefit to the beneficiaries or target group. Value for money was also considered.

9.2   Mixed performance

The *Factory Workers AIDS Project* is considered to have had the greatest impact because of effects at the national level, as well as on the target group. The *Kwetu Women and AIDS Project* has highlighted the importance of working with commercial sex workers in HIV/AIDS prevention but has had limited impact on the target group. Impact is considered satisfactory overall. *TAWASA* and the *Social Empowerment Diploma* are also considered to have satisfactory impact.

Table 9.1: Summary of project performance – impact

Project	Rating
Factory Workers AIDS	Fully Satisfactory (4)
Kwetu Women and AIDS	Satisfactory overall (3)
TAWASA	Satisfactory overall (3)
Social Empowerment Diploma	Satisfactory overall (3)
Shosholoza AIDS	Marginally satisfactory (2)
Winterveld Child Nutrition	Marginally satisfactory (2)
Winterveld Community AIDS	Marginally satisfactory (2)

The *Kwetu Women and AIDS Project* has had a very important impact by putting the situation of commercial sex workers on to the national AIDS agenda in Tanzania. This has been achieved

through dedication and persistence, which is to be greatly commended. Unfortunately, the impact on the target group was limited, a result in part of not attempting a broader and more systematic coverage. Likewise, the *Factory Workers AIDS Project* has had an important impact by putting workplace HIV/AIDS education on the national AIDS agenda in Zimbabwe.

The *Shosholoza AIDS Project* is similar to the *Factory Workers AIDS Project* in that it relies on peer educators, but the latter has been better designed and more adequately resourced in terms of personnel. Although the *Shosholoza Project* is at present only marginally satisfactory in terms of impact, the team recognises that it has the potential to reach a large number of young men through the soccer network and in schools and might achieve at least satisfactory impact at completion. This however is dependant on the project securing additional funding from another donor (to offset the under-estimation of budgetary requirements in the proposal put to AusAID) and a more systematic approach to match targets to resources.

The two remaining projects, the *Winterveld Child Nutrition* and *Winterveld Community AIDS Projects* are only marginally satisfactory in terms of impact. It was unrealistic to attempt to improve access to nutritious foods and change feeding practices in a seven-month funding period, particularly by attempting to establish new methods that were not sustainable. The way the project overcame the problem of water shortage during implementation was to provide water for the vegetable gardens. APHEDA has advised that at the time of the project (1997-98), it was hoped that the Presidential Lead Project in Water Supply would lead to improved water access in the Winterveld. This did not eventuate and the vegetable gardens proved unsustainable beyond the life of the project. The *Community AIDS Project* could have had more impact if management problems had been addressed and the approach had been more systematic.

9.3   Impact on HIV/AIDS

HIV/AIDS projects all face fundamental difficulties in demonstrating changed behaviours and the linkage to reduced incidence of HIV/AIDS. These are difficult problems methodologically and expensive ones to tackle. The emphasis should be on collaboration to ensure the best use of best practice. Baseline and follow up surveys of knowledge, attitudes and practice (KAP) play an important role but there are many variables and the data is difficult to verify and analyse. For instance, increased condom use does not necessarily mean increased protection against HIV if condoms are used incorrectly or for most but not all of the time. It is very important that data on HIV/AIDS and other STDs collected through individual projects is fed into national level surveillance of the pandemic.

The *Factory Workers AIDS Project* has achieved best practice in its awareness-raising component. The project has a strong empirical basis in the earlier ZAPP project which conducted a randomised trial in 40 factories in Harare utilising a control group (provided with HIV counselling and testing alone) and an intervention group (provided with counselling, testing plus peer education). Impact of the intervention was assessed by comparing HIV infection rates between the two groups of factories and through yearly KAP surveys. The results showed a 34% reduction in HIV incidence in the 20 factories where peer education was provided. Moreover, the greatest reduction was in the factories where peer education was most successfully implemented.

While these results are very encouraging and it is tempting to infer a similar impact for the current project, ZAPP advised the team that bridging the KAP gap and establishing a link with reduced HIV/AIDS remains extremely difficult. In the absence of a control group and in view of the many variables involved in behaviour change, ZAPP was not prepared to infer a similar impact for the current project. Nevertheless, it is a strength of the project that lessons from the peer education component of the earlier project have been incorporated. Peer educators trained through the

current project have contributed to removing the stigma attached to HIV/AIDS in their workplaces and have helped workers to relate, at a personal level, to messages about risk behaviour and HIV/AIDS prevention. The multimedia approach, the sustained presence, availability and accessibility of the peer educators as well as the user-friendliness of the project's STD clinic are, as a package, responsive to the needs of employees and can be presumed to be having an impact.

The Salvation Army, which implements the *Kwetu Women and AIDS Project*, acknowledged to the team that apart from making a significant contribution to raising the profile of the problems of HIV/AIDS and commercial sex work, the impact of the project will be 'moderate'. In the team's view this is mainly a function of poor performance in terms of planned outputs, most notably the poor performance of the income generating activities. It is also due to the fact there are an estimated 1,000 new entrants to commercial sex work each year in Dar es Salaam. In future, the Salvation Army plans to invest more effort into the rural areas to prevent young women from migrating to the city. The most efficacious component of the current project has perhaps been the distribution of condoms to commercial sex workers who told the team that they now insist clients use condoms (although the SA only provides a small proportion of condoms used). Commercial sex workers based in brothels said that the incidence of STDs has declined markedly.

The KAP survey undertaken of soccer players as part of the peer education program of the *Shosholoza AIDS Project* will assist with measuring impact on the peer educators and their partners. However, the project has already found that it is difficult to reach female partners through the soccer players and it will be difficult to verify behaviour change.

9.4   On women and children[49]

The *TAWASA Project* potentially has the greatest impact on children in terms of reductions in infant mortality. It has the advantage of building on the combined impact of two previous AusAID funded projects in Kahama which have reduced infant mortality from 106/1000 in 1990 to 52/1000 at the end of 1999 (compared to a national rate of 99/1000) in the areas served by the projects. This is reported to be due in part to a 56% decline in the incidence of water borne diseases in the project areas. The *TAWASA Project* is seeking to enhance the impact of these two projects in Kahama District by developing water and sanitation in Msalala Division. However, the impact of the new project will be diminished unless WV can satisfactorily address the hydrogeological constraints to installing shallow wells in some parts of Msalala (discussed above).

The impact on women of the *Kwetu Women and AIDS Project* is considered above under *Impact on HIV/AIDS* and the impact on women and children of the *Winterveld Child Nutrition Project* is considered below under *Impact on poverty*. In terms of numbers of mothers reached through the *Child Nutrition Project*, St Peter's Clinic advised the team that although the project may have reached a couple of hundred mothers, thousands of mothers in the Winterveld area needed to improve their feeding practices for children under five. Clearly it is not realistic to expect that a 7-month intervention would have much impact in terms of total numbers.

9.5   On poverty[50]

Four projects included in the cluster addressed poverty directly. The *Kwetu Women and AIDS Project* gave practical recognition to the link between poverty, commercial sex work and HIV/AIDS by assisting former commercial sex workers to establish sustainable livelihoods through income generating activities. However few of the loans involved will be repaid and there is no possibility

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49   See Table 3.4: *Summary of project performance – gender: rights of women and children*

50   See Table 3.3: *Summary of project performance – poverty*

of establishing a revolving fund to help others. The work 'at source' in the rural communities of origin of commercial sex workers is likely to have a greater impact although this will bear fruit after the completion of the current project.

The *Winterveld Child Nutrition Project* sought to reduce the health impacts of poverty on children by educating mothers about child nutrition and increasing their incomes and access to nutritious food through vegetable gardens ("nutrition satellites") and savings societies. While some improvements in weaning practices and introduction of solid foods may be attributable to the project, it failed to establish any savings societies and the vegetable gardens have not been sustainable.

The *Social Empowerment Diploma Project* envisaged raising the incomes of some marginalised communities and should make some contribution in this regard, but the very high levels of unemployment across KwaZulu-Natal and lack of access to markets in rural areas mean that income generation opportunities are limited. The evaluation concluded that African Enterprise has in fact undersold the benefits of the project in addressing important non-income dimensions of poverty. In the context of KwaZulu-Natal, which has experienced severe political violence and social dislocation, students and graduates are contributing to community development through improving negotiation and conflict resolution skills and assisting individuals and community groups to identify options and develop problem-solving skills.

In *TAWASA's* case it can be argued that improved community health will impact directly on poverty reduction. The lack of safe water and sanitation was identified as a primary factor in overall poor community development and poverty in the villages surveyed as part of the baseline study. The remaining three projects did not address poverty directly, although they were operating in areas of poverty or threatened poverty (see 3.3, *Poverty focus*).

Poverty and South Africa

The objective of Australia's aid to Africa is 'to build partnerships between Australia and selected African countries which reduce poverty and achieve sustainable development.'[51] The current strategy is to tighten the geographic focus which includes increased attention to South Africa. The consequence of the selected country status is that South Africa is eligible for AusAID support through NGOs. South Africa is unique in southern Africa, however, in that it has considerable resources. The basic problem is the redistribution of wealth. This problem is pervasive. It dominates government and the electorate and is a critical consideration and subject of debate on every aspect of development. For example, in relation to HIV/AIDS, the national budget for AIDS has been consistently underspent[52], despite the overwhelming seriousness of the problem and despite the fact that the Department of Health, hospitals, universities and relevant NGOs are capable of offering the most sophisticated standards of research and services. Underspending occurred because of the failure of decisions and strategies for distribution of funds.

While the situation in South Africa might suggest, for example, highly targeted bilateral interventions in some areas of governance, it also suggests that modest interventions from Australian NGOs at the services or welfare level may do little to contribute to the Australian Government's objective of reduction of poverty and sustainable development. This is the case with the four projects reviewed in South Africa, which have modest to minimal impact in situations that could be funded from national resources if appropriate government policies and strategies were in place.

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51 AusAID 1999, Australia and Africa: *Addressing the Challenges — in partnership 1999 – 2002*

52 Hein Marais, *To the Edge AIDS Review 2000*, Centre for the Study of AIDS, University of Pretoria

ACFOA's position paper on Africa[53] provides more specific direction for future NGO programs. South Africa is listed as one of 35 countries to which Australian NGOs directed funds in 1998 and the paper recommends a broader geographic focus for Australian official aid. The paper addresses problems on a thematic basis such as debt relief, disaster preparedness and human rights. Of the various themes discussed, human rights is the most pertinent. Australian NGOs could fund South African NGOs contributing to the protection and promotion of human rights, including those seeking to improve the redistribution of services. However in this field, the interventions of Australian NGOs would need to be very carefully targeted to add to the considerable experience and expertise of South African NGOs.

It is the team's recommendation that AusAID and NGOs reconsider the eligibility of South Africa for government funding for Australian NGO windows. One option, which would avoid disruption, would be to employ a 'sunset' approach to phase out subsidies to NGOs for projects in South Africa in 2004, ten years after the installation of the democratically elected government.

9.6   Value for money and distribution of benefits

NGOs make a general claim of value for money through lower overheads and rates than commercial contractors. Ultimately this depends on achievement of objectives but the NGO projects reviewed do show savings in establishment costs and access to administrative services. The *Social Empowerment Diploma*, for example, is fully dependent on the extremely well endowed African Enterprise Training Centre in Pietermaritzburg, South Africa and the *Kwetu Women and AIDS Project* is based at the extensive Salvation Army compound in Dar es Salaam. No charges are made to the projects for rent, utilities or access to facilities of the compound. Other projects also make use of their organisations' facilities. Similarly, in relation to services, the accountant of the Kwetu project is a Volunteer Service Officer funded by the International Labour Organization (ILO) with no charge to the project. The *TAWASA Project* has strong back up from the World Vision headquarters in Tanzania, including for audit and project monitoring by senior staff, while the *Factory Workers AIDS Project* benefits from association with the related activities of the University of Zimbabwe Department of Community Medicine and its Zimbabwe AIDS Prevention Program (ZAPP). The funding of projects like these with either substantial organisational backing and/or access to a technical network represents a significant contribution to value for money. On the other hand, projects with a weak and/or vulnerable base risk adding nothing to the value of the external contribution.

Comment on value for money on actual project performance is difficult, given design and reporting weaknesses mentioned earlier. It appears that the cost of the *Social Empowerment Diploma* was high by local standards, although it should be noted that, at the time of the Australian funding, there was no equivalent training available in the province. In terms of outreach and quality, the *Factory Workers AIDS Project* represents best value for money of the four HIV/AIDS projects, although the *Kwetu Women and AIDS Project* has faced much greater difficulty in reaching and maintaining contact with an officially clandestine target population of commercial sex workers. In this project as in the *Shosholoza AIDS* and two *Winterveld* projects, value for money has been undermined by shortcomings in relation to targets.

The *TAWASA Project* was appraised for AusAID as good value for money at an estimated cost of $15.88 for each of some 57,800 beneficiaries. The changes to the project include a possibly downward revision of the number of beneficiaries of safe water but also the addition of a cost benefit factor for the provision of sanitary latrines for school and other populations of probably 37

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53   *"Ubuntu": An Agenda for Australia's Involvement in Africa*, ACFOA September 1999

villages. These are significant changes with cost benefit implications. Consequently an estimate of value for money cannot be made at this stage or until the project is redesigned. Similar uncertainties relate to all of the ongoing projects.

There was apparent equity in the distribution of benefits in the projects reviewed. The target groups have been generally defined by location or membership of a large group except in the case of the *Social Empowerment Diploma* where students were selected on the basis of their work in the community and apparent leadership capacity.

9.7   NGO impact assessments

NGOs are not currently required by AusAID to report on outcomes or impact[54] and NGOs have limited experience in doing so. There should be no difficulty in reporting outcomes if it is accepted that this equates to the objective level (possibly with more emphasis on qualitative analysis). But consideration of impact is less straightforward. The AusAID format for NGO proposals[55] does not facilitate a consideration of impact at completion because it is difficult to make such an assessment based on the delivery of outputs and the inferred achievement of objectives (particularly if the outputs are really statements of activities and weak in qualitative terms). It would be helpful in this regard if the proposal format included performance indicators at the objectives level and a goal statement. However, NGOs also need to be encouraged to step outside the design and ask some broader questions about the value of their projects including: *What difference will this project make and how will we measure it?*

While impact assessment remains difficult, it is still reasonable to infer impact if the intervention was relevant to the development problem and if the NGO was successful in the implementation of each component objective. In HIV/AIDS projects in particular, it is often very difficult and expensive to go further than this. However, there is no reason why NGOs should not at least attempt to assess impact, especially in project completion reports to AusAID. It would be better for NGOs to do so, noting the limitations and making the caveats, than to not attempt to measure impact at all.

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54 *NGOPI*, Appendix 28, requirements for final reports

55 *NGOPI*, Appendix 22

ANNEX 1: TERMS OF REFERENCE

Introduction

AusAID is undertaking a series of cluster evaluations of projects funded through Australian Non Government Organisations (NGOs) as part of AusAID's NGO accreditation risk management cycle and response to the recommendations of the Australian National Audit Office's (ANAO) NGO audit reports (1996,1998).

In 1996, AusAID began implementing a package of managerial reforms for NGO funding in response to recommendations of an ANAO audit of the management of AusAID's NGO programs. The reforms included accreditation of NGOs for aid program funding, generic guidelines for NGO schemes, and the development of performance indicators to assess scheme performance.

However, the follow-up audit of NGO funding in 1998 raised some further concerns about the quality of the performance information being reported by NGOs. The ANAO recommended that AusAID:

- work with NGOs to improve the standard of performance information available to the NGO scheme, sufficient to assess achievements against individual activities; and

- develop performance measures, aggregating activity level information as appropriate, sufficient to assess overall NGO scheme performance and the efficiency of AusAID administration.

A key theme of AusAID's new NGO policy statement, *Working With Australian NGOs* (1999), is that the Government and NGOs need to know about the performance of activities to improve and demonstrate impact:

> "The Government expects NGOs' systems to give them the ability to measure their own performance. In addition, the Government will expand the number of cluster evaluations of NGO projects to allow NGO self-reported performance to be compared with that of their peers. (p.9)"

Consistent with the new policy direction, and the ANAO's recommendations, the main objectives of the NGO evaluations are to provide an independent assessment of NGO project performance in the field and anticipated development impact and to verify the self-assessments provided by NGOs to AusAID. This will assist NGOs to improve their monitoring systems and thereby improve the quality of the performance information reported to AusAID. It will also allow NGO self-reported performance to be compared with that of their peers.

The evaluation will assist AusAID in checking the integrity of the data used when aggregating activity level performance information (provided by NGOs) to scheme or program level to assess and report on the overall effectiveness of NGO schemes. This will enable AusAID to report more fully on results achieved through NGO programs in its Annual Report to Parliament and meet the new performance information reporting requirements that are an integral part of the introduction of outcomes-based accrual budgeting in 1999-2000 across the Commonwealth Public Service.

A cluster evaluation approach is the most cost-effective way of obtaining information about a representative sample of NGO projects upon which to base findings and recommendations. While not perfect, a cluster approach will enable relevant comparisons between peer NGOs to be made.

The evaluations include both activities funded through Country and Regional Programs, known as NGO Windows, and through the AusAID/NGO Cooperation Program (ANCP). The current evaluation

of NGO activities in Africa will be the second of these evaluations, following the evaluation of NGO activities in Vietnam undertaken in 1999.

The Africa NGO evaluation will follow the recommendation of the Vietnam NGO evaluation that future evaluations should target only those activities funded under the current NGO funding guidelines introduced on 1 July 1997. While in most cases this will preclude undertaking ex-post impact assessments, this will enable "real time" assessments to be made of performance in the field including the achievement of objectives and the major activity outputs delivered by NGO activities – and the appropriateness and reliability of the monitoring systems and performance measures used by the NGOs in reporting to AusAID - under the current guidelines.

Africa has been chosen as the location for this second evaluation because of the relative size and importance of the NGO program in the overall Africa program and because it offers a representative spread of NGOs involved in development projects both through Country Windows and the ANCP. Australian NGOs have a long history of working with local people in Africa to raise living standards. As part of the Australian Government's new aid strategy in Africa (AusAID, *Australia and Africa: Addressing the challenges – in partnership 1999-2002)*, participation by NGOs is expected to increase significantly as a share of Australian aid to Africa.

A three-year cycle of NGO Window competitive funding rounds for southern African countries commenced in 1997-98 for multi-year activities addressing HIV/AIDs (1997-98), water and sanitation (1998-99) and food security (1999-2000). These coincide with the introduction of the new NGO accreditation and self-monitoring arrangements in 1997-98.

South Africa will be included because it is a core program country in the new Africa strategy hence there will be maximum value to the program in terms of lessons learned through the evaluation. Mozambique was to have been included for the same reason as South Africa but has been withdrawn due to flooding. Zimbabwe is included because it remains a priority country in Africa for the Australian aid program. NGOs are currently the preferred delivery mechanism in Zimbabwe due to the Government of Zimbabwe's poor economic management and social policy performance. If the political and security situation in Zimbabwe deteriorates further, AusAID and the consultants acknowledge there is a risk that the evaluation visit to Zimbabwe may need to be shortened or cancelled. (Two additional points have been added to the objectives of the evaluation to cover this possibility.) Tanzania is included because as a southern African country it is eligible for NGO Window projects, as well as ANCP activities, and because of the need to include at least one country that is covered out of the Nairobi post.

Australian Government funded NGO activities in Africa have not been specifically evaluated since the 1993 *Review of the effectiveness of NGOs in Africa* or included in a general evaluation since the 1995 *Review of the Effectiveness of NGO Programs.*

Evaluation objectives

The evaluation has the following objectives:

1. To assess the effectiveness, efficiency and impact of Australian Government funded NGO projects in Africa including the achievement of their stated objectives, delivery of planned outputs and sustainability strategies.

2. Drawing on the evaluation's field assessment, to corroborate the self-assessments provided by NGOs in their activity reports to AusAID on the achievement of objectives and delivery of significant outputs.

3. To provide comment on program delivery aspects and the role of Australian NGOs in Africa.

4. To distil lessons and best practice approaches for both the Africa program and NGO programs generally to improve the performance of NGO projects.

5. If it is possible to visit Zimbabwe but the security situation precludes visits to project sites, the evaluation will assess the implications for implementation of Australian Government funded NGO projects of the current crisis. The evaluation will also consult with other donors in Zimbabwe to ascertain i) their views on the role of NGOs in Zimbabwe in contributing to development and the strengthening of civil society; and ii) their approaches to impact assessment and performance monitoring of donor funded NGO activities.

6. If it is not possible to visit Zimbabwe at all, the evaluation team will consult with other donors in Tanzania and South Africa to ascertain i) their perspectives on the role of NGOs in these countries in contributing to development and the strengthening of civil society; and (ii) their approaches to impact assessment and performance monitoring of donor funded NGO activities.

Lessons drawn from project experience will provide input to revisions of the *NGO Package of Information (NGOPI)* and program planning for Africa (South Africa, Zimbabwe and Tanzania). Furthermore, the NGO community, through the Committee for Development Cooperation (CDC) and other forums, will be informed of the outcomes of the evaluation so that lessons learned can be utilised to improve more widely program performance and reporting.

Scope of the evaluation

In order to produce relevant information for the above mentioned objectives, the projects will be assessed against their own performance criteria (ie those specified in the project design documents) and against AusAID's new Project Quality Standards, as set out in the *AusGUIDElines*. The *AusGUIDElines* are now available as part of *AusGUIDE* on AusAID's website.

The Project Quality Standards will be adapted by the evaluation team and used to draw up a questionnaire to be sent to all NGOs being included in the evaluation. Field visit formats and checklists will be prepared which, in addition to the questionnaire responses, will enable comparative assessments to be made of project performance. These will be based on the following criteria, as appropriate:

- **Appropriateness of project objectives and design**

    - Are the project objectives clear, realistic and measurable?

    - Are the objectives appropriate and relevant to the particular development situation? Have there been any changes to the objectives over the life of the project?

    - Are the objectives consistent with AusAID's sector policies on health, gender and the environment? Was an environmental assessment carried out, if appropriate?

    - If there is a family planning component in any of the activities, are they consistent with AusAID's guiding principles for family planning?

    - Did the design include a specific link to poverty reduction and appropriate indicators?

    - Was adequate baseline data collected on the development situation?

    - Were the stakeholders identified and stakeholders analysis completed?

    - Were participatory planning approaches used in defining the objectives and design development involving the target population and counterpart NGO staff?

- Did the objectives and design take account of activities by other NGOs or donors in the project area?

- Did the objectives and design take account of lessons learned from other NGO activities?

- Was a logframe approach used and if so was it clear and logical and did it present realistic and measurable component objectives, outputs and indicators?

- Were the intended outcomes and outputs clearly described and appropriate, including for implementation and monitoring purposes?

- Does the monitoring framework describe monitoring activities in terms of the logframe and detail the monitoring system, data requirements, analysis and reporting?

- Were risks identified and managed effectively?

- **Is the project being managed in a professional manner?**

  - Are the planned activities and outputs are likely to be completed on schedule and within budget?

  - What is the standard including timeliness of project monitoring and communications?

  - Are the respective roles and responsibilities of the Australian NGO and their counterpart local NGO clearly defined, appropriate and workable?

- **Performance against objectives**

  - To what extent have the objectives of the activity been achieved?

  - To what extent have the planned outputs been delivered?

  - What are the major activity outputs for the activity? To what extent do the outputs contribute to the achievement of the major development objectives of the activity?

  - What are the performance indicators (quantitative and qualitative) for achievement of objectives and delivery of outputs?

  - Are the performance indicators appropriate and measurable?

  - How is information obtained about progress in achieving objectives and delivering outputs?

  - What are the benefits to the target population?

  - Is an improved standard of living likely to occur where poverty reduction is a specific objective?

  - What is the distribution of benefits between different groups of people (rich, poor, men, women, landed, landless)?

  - Are the overall costs appropriate to the range, level and distribution of benefits?

  - Have gender and the environment been adequately addressed in implementation?

  - If there is a family planning component in the activity, has the activity adhered to AusAID's guiding principles on family planning?

  - What are the broad socio-economic, institutional and environmental impacts of the project?

  - Are there any unintended outcomes of activity, either negative or positive?

- • Sustainability of outcomes

    - Is there a sustainability strategy? Is there a phase-out strategy?

    - What is the sustainability of benefits to the target population? Does the project have the necessary support from beneficiaries, for example, in the form of active participation in operation of facilities and use of services? Are they likely to have sufficient improved knowledge, skills and resources to maintain system of benefits for themselves after Australian NGO involvement ends?

    - Has the most appropriate technology been used?

    - Has the management capacity of targeted institutions, including the local counterpart NGO, been strengthened in a sustainable way?

    - Are resources available to keep the activities going after external funding has finished? In terms of financial sustainability, what arrangements have been put in place to try to ensure recurrent cost funding to support follow-up activities?

The evaluation will identify the systems and methods used by the NGOs to compile reliable monitoring reports to meet AusAID's performance information requirements and NGO scheme guidelines. The methods used should be verifiable for audit and review purposes. The evaluation will comment on program delivery aspects and the roles of NGOs in the three African countries. It will also comment on whether the activity has an appropriate level of Australian identify and how that identity is demonstrated.

Methodology

To carry out the evaluation work within the specified time frame and achieve the evaluation objectives, the following methodology has been used to date and is proposed for the remaining work:

- • A broad consultative process has been followed. PIA Section has consulted extensively with AME (Africa and Middle East Section), NGO Section, and the African posts (Pretoria, Harare, Maputo and Nairobi) to seek their views on the countries and the appropriate projects to be included in the evaluation. The countries to be included and the rationale for that choice are described above.

- • An Advisory Group with representatives from AME, NGO, PIA, the Sector Groups and the Australian Council for Overseas Aid (ACFOA) has been convened to provide feedback and advice on the evaluation from the planning stage to the finalisation of the report. The ACFOA representative, Mr Graham Tupper, is a member of the CDC.

- • PIA Section has prepared Terms of Reference (TOR) and a draft issues paper for consideration by the Advisory Group and the Program Quality Committee. The TOR were sent to the consultants who expressed interest in the evaluation and a restricted tender was undertaken to assess the consultants' bids against the draft TOR.

- • PIA, with the assistance of AME and NGO Sections, has compiled a database of all Australian ANCP and NGO country window projects in Africa since the 1997-98 grouped by sector (key result areas). These will be annexes to the final report.

- • The final list of projects was negotiated and agreed between AME, NGO Section and PIA. PIA has assembled key project documents (designs, logframes, progress reports etc) for use by the consultants during the desk study to be undertaken during the first week of the consultancy.

- PIA has advised the relevant NGOs and provided them with one month's notice of the evaluation and project visits, as required under the Umbrella Agreement.

- The successful consultants are undertaking 6 days background research and desk work in Canberra prior to the field mission. The Team Leader, in consultation with the team, has determined the methodology for the field work including the questionnaire, the field visit format and checklist.

- The field work in Africa will utilise as many evaluation tools and techniques as possible in order to maximise the sources of information used to inform the evaluation.

  - These include the use of the standard questionnaire, based on the criteria set out under "Scope" above. The NGOs have been asked to self-assess their activities against these questions and return the questionnaire to PIA Section prior to the evaluation team's departure for Africa. The evaluation team will then undertake its own independent assessment during the field mission. This will assist verification. The field mission will also enable the evaluation team to assess the accuracy of the NGOs' progress reports submitted to AusAID under the NGOPI guidelines.

- The full evaluation team will participate in the field assessment in Africa over 30 days commencing 6 May 2000 to obtain the views of local staff and project beneficiaries on the performance of projects and their impact. The field mission will be the primary source of data for the evaluation and the basis of the verification of the NGOs' self-assessments.

  - It is envisaged that focus group meetings and rapid survey techniques will be used. Field assessment will be undertaken to obtain the views of local staff and project beneficiaries (both community and government) on the performance of projects and their impact. Due attention will be given to views of disadvantaged groups such as women, poorer community members and minority groups. Discussions will also be held if appropriate with representatives of other donor agencies.

  - The evaluation team will strive to obtain quantitative data on outcomes and impacts wherever possible. However, in practice the team might find it difficult to access relevant performance data in the time available. Thus, the team will supplement available data with qualitative information from field discussions and informed personal judgements.

- The evaluation will comment on appropriate assessment criteria and performance indicators against which to judge the performance of NGO activities in the future. This will be an input to the revisions of both the NGO accreditation process and to the NGOPI.

- The team will analyse the gathered information and prepare the evaluation report covering the elements outlined above in the Scope of the evaluation (see Section 3 of TOR) as well as any other points deemed important and relevant by the evaluators. A draft report should be prepared in Africa.

ANNEX 2: SELF-ASSESSMENT QUESTIONNAIRE FOR NGOS

The projects will be assessed against their own performance criteria (ie those specified in the project design document) and against AusAID's new project quality standards. Sections 1 and 2 of the following are based on the Activity Report contained in Appendix 28 of *NGOPI*, with which you will be familiar. The other sections are based on the "Project Quality Standards" included in the *AusGUIDElines. AusGUIDE* will be available on AusAID's website from mid-April.

Project title

Insert activity name; AusAID reference number, sector and commencement date

Organisation

Insert your organisation's name as well as the name of your implementing partner(s)

Achievement of project outputs

In this part we seek separate information on each planned output, dealt with within their relevant components. The format is very similar to that required for annual reporting. We are asking you to restate planned outputs and performance indicators to ensure that we cover any variations that have been made and to ensure there is no room for confusion in connecting your responses to the relevant outputs.

Name first project component

Planned output (1)

Insert as per proposal. Please indicate if revised.

Performance indicators

Insert as per proposal. Please indicate if revised.

Delivery/variations/problems

Is the output likely to be achieved? You may repeat material from your last Activity Report (paragraph 10) but please ensure information is full and up to date. Please also:

- use numeric measures if the performance indicator is quantifiable,

- disaggregate by gender and any target population,

- note any delays in achievement, variations proposed and variations to budget line of more than 10%.

Issues

Are there any problems with the standard of the output?

Will the achievement of component outputs be sufficient to fully realise component objectives?

Please indicate any issues that you think the evaluation team could usefully explore, including both positives (successes, opportunities, etc) and negatives (emerging or anticipated problems).

Planned output (2)

Continue with same format for all remaining outputs planned for the first component.

Name second component

Planned output (1)

Continue in same manner as for first component

Name third component

Etc ...

Achievement of planned development objectives

In this part we seek separate information on each component objective. This is at variance to *NGOPI* Appendix 28 in so far as paragraphs 11 and 17 therein request an overall assessment of major development objectives. We wish to deal with them individually. We will later ask you to aggregate performance in section 7, Quality Rating.

Name first project component

Objective(s)

Insert, as per proposal

Performance indicator

Please insert the performance indicators you use to measure performance against objectives.

Achievements/variations/problems

To what extent is the component objective likely to be achieved? Please include a narrative discussion in which you discuss achievements and problems. Ensure you:

- disaggregate by gender and any target population,

- note any delays in achievement, variations agreed or proposed to the original design, and variations to budget line of more than 10%.

Please use the following scale to assess the component objective:

- likely to be achieved (100%)   (5)

- likely to be mostly achieved (99-80%)   (4)

- likely to be partially achieved (79-50%)   (3)

- not likely to be achieved (<50%)   (2)

- dropped during implementation   (99)

You may repeat material from your last Activity Report (paragraph 11) but please ensure information is full and up to date

Issues

Do you still regard the component objectives and indicators to be clear, realistic and measurable?

Has there been any change to the component objective over the life of the project? Would you still regard the objective to be fully relevant to the development situation?

Have gender and the environment been adequately addressed in implementation?

Please indicate any issues that you think the evaluation team could usefully explore, including both positives (successes, opportunities, etc) and negatives (emerging or anticipated problems).

Name second component

Objective

Continue in same manner as for first component

Name third component

Etc ...

Appropriateness of design

Did you or your implementing partner or someone else design the project? How would you rate the quality of the final design document(s)? Was a Logical Framework used? What changes do you think could usefully be made to the design?

Who was involved in the design of the project? What role did the various participants play? Were there any limitations or constraints to the design process? Would you approach the design any differently if you were to start again?

What baseline data was collected? Was a stakeholder analysis completed? Were there difficulties in collecting baseline data and/or doing stakeholder analysis? Do you now regard the project identification process to have been adequate?

Were risks identified and incorporated in the project design? Which risks are still a real concern? Have new risks emerged? How are risks being managed?

What account did the objectives and design take of activities by other NGOs or donors in the project area? How did the objectives and design take account of lessons learned from other NGO activities?

Did the design include a specific link to poverty reduction? What indicators were specified?

What are the relevant gender and environmental issues and how are they addressed in the design? Was a gender analysis conducted? Was an environmental assessment carried out, if appropriate?

If there is a family planning component in the activity, has the activity adhered to AusAID's guiding principles on family planning?

Has the project design document (or the LogFrame if one was prepared) proved beneficial to implementation? Has it been a sufficient tool for project managers?

Has the monitoring framework incorporated in the design provided in-country project managers with adequate information to manage the project and report on progress? What performance indicators and means of verification have been relied on most?

Now that the project is well underway, have any shortcomings become apparent with the performance indicators and/or means of verification specified in the design document for the delivery of outputs and achievement of objectives?

Management and coordination

Is your implementing partner experiencing any difficulty in completing planned activities and outputs on schedule and within budget? What are the reasons for these difficulties?

Has your implementing partner been able to communicate adequately with your office and provide monitoring reports on time?

Have there been any difficulties with respect to the definition of roles and responsibilities between your organisation and your implementing partner? How have you contributed to strengthening the capacity of your implementing partner? What value does your organisation add to the project?

Have you had experienced difficulties or shortcomings in your dealings with AusAID (in Canberra or at the post)? If you have, how could these be overcome?

What are the in-country coordination arrangements with respect to other organisations, agencies and government departments? How well have these arrangements worked and could they be improved?

What level of support does the project have from the government?

How has the Australian identity of the project been made known?

Impact

What measures are being used or will be used to assess development impact?

What development impact do you envisage the project having at completion? What is the distribution of benefits between different groups of people? Who will benefit most?

If poverty reduction is a specific objective, is an improved standard of living likely to occur?

Are there or are there likely to be any unintended outcomes, either negative or positive?

Would you say the overall costs are appropriate to the range, level and distribution of anticipated benefits?

Sustainability

What is the sustainability strategy? Is there a phase-out strategy? What government or non-government institution or group are you relying on to carry the activity forward?

How will the benefits to project beneficiaries be sustained? Will the project have ongoing support from beneficiaries, for example, in the form of active participation in operation of facilities and use of services? Are they likely to have sufficient improved knowledge, skills and resources to maintain system of benefits for themselves after your involvement ends?

Has the management capacity of targeted institutions, including the local counterpart NGO, been strengthened in a sustainable way? What have been the main limitations?

In terms of financial sustainability, are resources available to keep the activities going after external funding has finished? What arrangements have been put in place to try to ensure recurrent cost funding to support follow-up activities?

What technologies have been used? Are they the most appropriate considering the sustainability of activities and benefits?

Are there any issues concerning sustainability that you think the evaluation team should pursue?

Overall quality rating

In this section we are asking for a score based on AusAID's new ratings. An explanation of the scores is attached. Please explain your rating in relation to the rating you gave each objective in section 3, which was based on the older *NGOPI* format. (We apologise for asking you to utilise somewhat different approaches to scoring but the agency is in transition as the *NGOPI* is currently being revised and new quality ratings are introduced.)

Upon completion do you think the project is likely to be:

* Best practice (5)

* Fully satisfactory (4)

* Satisfactory overall (3)

* Marginally satisfactory (2)

* Weak (1)

Please provide a brief explanation for the score you give. You may like to comment on any matters you believe the final outcome hinges on.

Lessons

In this section we invite more general comments about the development process and the context of the project.

How do you now regard the strategy and approach adopted? What are emerging as the strongest aspects of the project? What are emerging as the weakest? What are the main opportunities and constraints?

What development lessons has your organisation learned from this project so far? How can you or others act on them in the context of the activity you are implementing?

Is there any other matter that you would like to raise concerning the project that has not been addressed in this questionnaire?

Thank you for your assistance.

ANNEX 3:   FIELD WORK ITINERARY

Sat 6 May

Arrive Jo'burg	0620
Fly Jo'burg-Kiliminjaro	1305-1750
O/n Arusha	

Sun 7 May

Charter flight Arusha – Kahama
Meet with WV staff, Kahama
O/n Kahama

Mon 8 May

World Vision (WV) Tanzania Integrated Rural Water and Sanitation (TAWASA) Project
O/n Kahama

Tues 9 May

WV TAWASA
O/n Kahama

Wed 10 May

WV TAWASA
Debrief project staff
O/n Kahama

Thurs 11 May

Charter flight Kahama–Arusha
Meet with WV Arusha office
Fly Kili-Dar   1205–1330
PM: Meet with Salvation Army Kwetu staff
O/n Dar es Salaam

Frid 12 May

Salvation Army (SA)
Women and HIV/AIDS Kwetu Project
2 pm IW to meet Ministry of Water, Rural Water Supply Dept (Mr Christopher Sayi)
O/n Dar es Salaam

Sat 13 May

SA Kwetu Project
O/n Dar es Salaam

Sun 14 May

Report writing
O/n Dar es Salaam

Mon 15 May

Half the team visits rural area outside Dar to interview Kwetu project beneficiaries who have returned home.
Half the team has meetings   11 am NACP
                                  2 pm Ministry of Finance

O/n Dar es Salaam

Tues 16 May

    SA Kwetu Project
    Debrief SA project staff
    O/n Dar es Salaam

Wed 17 May

    Fly Dar–Harare   1025–1135
    Meetings with Harare Post, AVI and UNAIDS
    O/n Harare

Thurs 18 May

    AVI Factory Workers HIV/AIDS project
    O/n Harare

Frid 19 May

    AVI Factory Workers Project
    O/n Harare

Sat 20 May

    AVI Factory Workers Project
    Debrief project staff
    O/n Harare

Sun 21 May

    Report writing
    O/n Harare

Mon 22 May

    Meetings with Harare Post, NACP and Zimbabwe AIDS Trust.
    Fly Harare–Jo'burg   1315–1500
    Transfer by road to Pretoria.
    Telephone Winterveld.
    O/n Pretoria

Tues 23 May

    Meeting with Pretoria Post.
    Drive to Winterveld (30 mins).
    APHEDA Winterveld HIV/AIDS project.
    O/n Pretoria

Wed 24 May

    Drive to Winterveld
    APHEDA HIV/AIDS project
    O/n Pretoria

25 Thurs May

    Winterveld
    APHEDA HIV/AIDS project
    O/n Pretoria

Frid 26 May

    Winterveld
    APHEDA
    ANCP Child Nutrition Project
    O/n Pretoria

Sat 27 May

    Winterveld
    HIV/AIDS and Child Nutrition Projects
    O/n Pretoria

Sun 28 May

    Rest/ Report writing
    Fly Jo'burg–Durban   1300–1410
    Telephone African Enterprise to discuss evaluation.
    O/n Durban

Mon 29 May

    Drive to Pietermaritzburg African Enterprise "Social Empowerment and Development"
    Diploma Training Project
    O/n Durban

Tues 30 May

    African Enterprise
    Debrief project staff
    O/n Durban

Wed 31 May

    CAA Shosholosa – Men in Soccer HIV/AIDS project
    O/n Durban

Thurs 1 June

    CAA project
    O/n Durban

Friday 2 June

    CAA project
    Debrief project staff
    O/n Durban

Sat 3 June

    Fly Durban–Jo'burg   0900–1010
    Meet with AusAID Pretoria officers
    Report writing
    O/n Pretoria

Sun 4 June

    Report writing
    Flight departs 2125 hours for return to Australia

ANNEX 4: OVERALL QUALITY AND PERFORMANCE – COMPARISON OF NGO SELF–ASSESSMENTS AND EVALUATION TEAM ASSESSMENTS

Project	Response to questionnaire	Evaluation team's assessment
Factory Workers AIDS	4	3.6
Social Empowerment Diploma	5	3.2
Kwetu Women and AIDS	3	3.1
TAWASA	3 (but should reach 4)	2.91
Shosholoza AIDS	4 to 5	2.5
Winterveld Child Nutrition	4	2.3
Winterveld Community AIDS	4	2
Average	**4**	**2.8 (<3)**

ANNEX 5: NGO COUNTRY WINDOW PROJECTS IN AFRICA 1997/98–1999/2000

Country	Activity Number	Implementing Agency	Activity Name	Date Commenced	Date Complete	Total
Eritrea	970Q01	Fred Hollows	Fred Hollows Eritrean Eye Care Committee	1-Aug-1997	3-Aug-1997	
Kenya	982Q03	MSF	Ken MSFcare for PLWA in Kibera Project	23-Apr-1998	30-Jun-2001	$300,000
Malawi	992Q08	CARE	Mal Central Region Livelihood Security Project	22-Oct-1999	ongoing	$1,029,147
Mozambique	982Q0C	World Vision	Moz WV Com Initiat. to decr HIV/AIDS Project	28-Apr-98	31-May-01	$677,564
Mozambique	992M02	CARE	Moz-Inhambane Community Water & San	3-Apr-99	31-May-02	$1,907,442
Mozambique	992M03	World Vision	Moz-Tete Water and Sanitation Project	3-Apr-99	31-May-02	$1,523,616
Mozambique	942G08	CAA	Moz Chicomo Rural Development Project	1-Apr-95	31-Dec-00	$2,918,350
Mozambique	992Q04	ADRA	Moz Cashew Reforestation Project, Pebane	19-Oct-99	ongoing	$1,932,144
Mozambique	992Q07	CAA	Moz Mavume Food Security Project	22-Oct-99	ongoing	$958,719
Mozambique	992Q0A	World Vision	Moz Gaza Household Food Security Project	25-Oct-99	ongoing	$1,501,948
Mozambique	992Q0C	World Vision	Moz Nampula Integrated Food Security Project	25-Oct-99	ongoing	$1,516,206
Mozambique	982Q06	UNICEF	Moz UNICEF HIV/AIDS Prevention for Youth	24-Apr-98	30-Jun-01	$987,300
South Africa	982Q05	AVI	SA OSB YMCA Better Life Options Project	24-Apr-98	30-Nov-00	$402,322
South Africa	982Q09	AngliCORD	SA AngliCORD Soweto Care and Support Project	28-Apr-98	30-Jun-01	$247,484
South Africa	982Q0A	CAA	SA CAA Shosholoza AIDS Project	28-Apr-98	31-May-01	$284,729
South Africa	982Q0B	APHEDA	SA APHEDA HIV Support and Education Project	28-Apr-98	31-Dec-00	$140,700
South Africa	952G18	Mvula Trust	SA Water and Sanitation Project	1-Jun-95	30-Jun-99	$3,300,000
South Africa	992M08	World Vision	SA-Pambili Water and Sanitation Project	3-Apr-99	30-May-02	$870,799
Tanzania	982Q0D	Salvation Army	Tan Women and AIDS Kwetu Project	28-May-98	30-Jun-00	$461,797
Tanzania	992M04	PLAN	Tan Comm W&S Kibaha & Kisarawe Districts	3-Apr-99	28-Feb-02	$1,519,205
Tanzania	992M07	World Vision	Tan Integrated Rural Water & Sanitation Project	3-Apr-99	31-May-02	$1,100,000
Tanzania	992Q06	African Enterprise	Tan Magu Food Security Project	19-Oct-99	ongoing	$984,326
Tanzania	992Q0B	World Vision	Tan Sukumaland Innovative Food Security Project	25-Oct-99	ongoing	$955,929
Zambia	982Q07	UNICEF	UNICEF HIV/AIDS & STDs in Women Project	27-Apr-1998	30-Jun-2001	$750,000
Zimbabwe	982Q01	MacFarlane Burnet Centre	Zim Mother-to-Child HIV Prevention Project	22-Apr-98	1-Oct-01	$300,903
Zimbabwe	982Q02	CAA	Zim CAA Men in Service AIDS Program	23-Apr-98	31-May-01	$303,250
Zimbabwe	932C02	UNICEF	Zim AIDS Project	1-Jan-92	6-Jan-00	$2,558,880
Zimbabwe	982Q04	PLAN	ZimPLAN HIV Epidemic in Mutare Project	24-Apr-98	30-Jun-01	$535,322
Zimbabwe	982Q08	OSB	Zim OSB Factory Workers AIDS Prevention Project	27-Apr-98	31-May-01	$957,296
Zimbabwe	992M01	PLAN	Zim-Potable W & S Chipinge & Tsholotsho	1-Apr-99	28-Feb-02	$1,689,509
Zimbabwe	992M05	CARE	Zim-Rain Water Harvesting in Masvingo	3-Apr-99	31-May-01	$427,706
Zimbabwe	942J12	Opportunity International	Zim Zambuko Microenterprise Development Project	7-Jan-95	31-Dec-99	$1,991,332
Zimbabwe	992Q03	AFAP	Zim Forest Garden Zimbabwe Program	1-Jul-00	ongoing	$1,035,379
Zimbabwe	962Q01	Fred Hollows	Zim Intraocular Lens Training Project	1-Jan-96	30-Jun-99	$1,665,085
Zimbabwe	952G05	CARE	Zim Small Dams Project	1-Jul-94	30-Jun-00	$889,599
Zimbabwe	992Q05	Uniting Church	Zim Food Security in the Chesa Community	24-Nov-99	ongoing	$169,292
Zimbabwe	992Q09	CARE	Zim Community Based Food Security Project	25-Oct-99	ongoing	$1,155,979
					Total	**$39,949,259**

ANNEX 6: ANCP PROJECTS IN AFRICA 1997/98–1999/2000

Activities 1997–98

Country	NGO	Location	Project Name	A$	Activity Type
Ethiopia	NCCA		Rural Development Program	37,500	Water & sanitation, reforestation, microfinance
Ghana	AE	Accra, Ghana	Street Children Program	22,500	Vocational training
Kenya	ADRA		ADRA East Africa Food Security Support	74,250	
	AE		Soweto - Kayole Primary Health Care	12,750	Primary Health Care
	AE	Katwikira	Katwikira Primary Health Care Clinic	16,168	
	AE	Mathare Valley	Mathare Skills Training	18,750	Vocational training
	TEAR	Nakuru	South West Nakuru Community Based Development	63,750	Build capacity of community groups
Malawi	AE	Kauma, Lilongwe	Health Education and Sanitation Program	22,500	
	UNICEF		Robert Nestdale Water, Sanitation and Hygiene	215,089	Water & sanitation
Mozambique	ALWS	Tete Province: Angonia, Macanga, Maravia and Zumbo Districts	Tete Development Project	150,000	Capacity strengthening, revolving credit funds, water supply
	NCCA	Gaza Prov, Maputo Prov.	Rehabilitation and Training Programs	37,500	infrastructure, capacity building, food security
Namibia	NCCA		Training Programs - Namibia	37,500	Teacher training
South Africa	AE	Pitermaritzburg, KwaZulu-Natal	Social Empowerment and Development	70,500	Sponsor students in Social Empowerment and Development Diploma
	AngliCORD	Soweto	Soweto Income Generation Program for Women	28,372	
	APHEDA	Winterveld North West Prov.	Child Nutrition Education Project	37,500	Education and vegetable gardens to improve child nutrition
	CAA	KwaZulu-Natal and the Northern Prov	South African HIV/AIDS Program	34,060	Cap. building & education HIV/AIDS
	SA		South Africa Community Development Program	87,210	
Sudan	TEAR		Community Based Animal Health Care Program	67,500	
Tanzania	SA		Agricultural Extension Program	29,887	Ag extension
	TEAR	Morogoro, Inuti Village	Morogoro Reforestation Project	17,500	Environment
Uganda	AE	Kampala	Kampala Community Development	60,000	Water & sanitation
	CCFA		Cattle Dispersal in Seven Districts of Uganda	205,740	
	CCFA		Piggery Project for Three Villages	70,170	
Zaire	CMS		Equipment Maintenance of Community Health Work	12,050	
Zambia	CCFA		Water Supply and Sanitation Project	140,858	
	NCCA		Drought Recovery and Development Program	37,500	Water & sanitation, ag training
	SA		Kanyama Nutrition Centre and Playschool	7,829	
	AUSTCARE		Refugee Environment Protection Program	50,000	
Zimbabwe	AE	Harare	Skills Training for Women	9,750	Training in sewing etc to help est own businesses
	NCCA	Matabeleland South	Community Development and Training	37,500	Water & sanitation and health, environ, ag training
	SA	Matabeleland North Binga District	Zimbabwe Community Development Program	93,067	
	UNICEF		Robert Nestdale Memorial Project	225,000	
World -Unspecified	AUSTCARE		Mine Action Program	280,174	Not all activities in Africa
	AUSTCARE		Refugee Education Program	167,419	Not all activities in Africa
Regional-Other Africa and Middle East	WV		Africa Development Programs	2,097,191	
	PLAN		Access to Potable Water	31,282	
	PLAN		School Equipment and Furniture Improvement	103,448	
	CAA		CAA Community Development Program	190,737	
African NGO	CARITAS	Tanzania, Mozambique and numerous others	African Community Development Program	523,338	Ag and environ, microenterprise, health, institutional strengthening, educ. and training.

Activities 1998–99

Country	NGO	Location	Project Name	A$	Activity Type
Ethiopia	CCFA	Amhara Region (Region 3) North Shoa Zone: Keyit Wereda: Bakelo Farmers Service	Bakelo Food Security Project	45,092	
	NCCA	Tigray and North Gondar Provs	Rural Development Program	45,377	Water & sanitation reforestation, microfinance
	WV		Africa Development Programs Likimsi WS&S ($204,674), Tigray Soil Conservation and Reforestation ($191,664), Institution Capacity Building ($68,128)	464,895	
	PLAN	Bawjiase Village, Awutu Province	Diversification of Livelihood Opportunities	23,435	Income generation through pineapple cultivation
Kenya	AUSTCARE	Kakuma Refugee camp	Refugee Education Program	35,849	Provision of vocational skills
	TEAR	Rift Valley Province	Nakuru SW Community Development Program	63,750	Health, water & sanitation, agro forestry and livestock production
Ghana	IN		Micro-credit Scheme for Volta Region	50,000	
Malawi	UNICEF	Kasungu and Lilongwe Districts	Water Supply, Improved Sanitation	280,493	
	WV		Africa Development Programs (Nakumba AIDS project)	79,904	
Mozambique	ALWS	Tete Province: Angonia, Macanga, Maravia and Zumbo Districts	Tete Development Project	135,742	Cap strength, revolving credit funds; provide credit, water supply
	AngliCORD		Maciene Community Health Project	29,200	
	NCCA	Gaza and Maputo Prov.	Rehabilitation and Training Program	43,000	Infrastructure, capacity building, food security
	SA	Zavala	Zavala Integrated Development Program	41,250	infra., water supply, ag ext.
	WV		Africa Development Programs: Cahoro Basao Comm. Health ($98,278); Cahoro Basao Livestock Rehab ($82,346); Maciene Vision ($56,854)	237,478	
Namibia	NCCA		Childcare and Teacher Training	42,500	Teacher training
Nigeria	LM		Upgrading medical facilities, Okegbala	99,553	
Rwanda	WV		Africa Development Programs (Personal Development and Healing Workshops)	63,452	
South Africa	APHEDA	Jo-burg, Gaulang, Umlazi, Winterland	HIV Training for Youth	37,500	
	CAA		CBO Support Northern Province	40,323	HIV/AIDS
	SA		Community Health and Water Program	82,747	Water & sanitation and microcredit/ microenterprise
	WV		Africa Development Programs: Institutional Capacity Building Program ($42,750)	42,750	
Tanzania	SA		Agricultural Extension Program	24,070	
	TEAR	Gairo, Morogoro District	Gairo Reforestation Project	28,128	
	WV		Africa Development Programs: Kahama Water Program ($95,022); Kahama Community Development ($130,488); Arumeru AIDS awareness ($56571); Capacity Building Program ($32, 788); Kasulu Child Survival ($98,214)	413,033	
Togo	PLAN		Microenterprise Development Togo	32,681	
Uganda	CCFA	Apac, Soroti, Pallisa, Iganga, Mbale, Tororo and Luwero districts	Cattle Dispersal in Seven Districts	359,191	Provision of cattle
	LM		Upgrading Medical Facilities at Kumi	150,551	
	QSA		Organic Farming Training Centre	41,250	
	TEAR		Kumi District Devel Program	56,391	
	WV		Africa Development Programs (Iyolwa HIV/AIDS)	123,905	

Country	NGO	Location	Project Name	A$	Activity Type
Zambia	AUSTCARE	Northwestern and Western provinces (Meheba and Mayukwayukwa camps)	Environment Rehabilitation and Protection	48,387	Range of activities including food security, training and conservation activities
			Water Supply and Sanitation	224,758	
			Drought Recovery and Development Program	37,500	
			Zambia Community Development Program	56,629	
			Africa Development Programs	13,317	
Zimbabwe	NCCA	Matabeleland South and Masuingo Prov.	Community Development and Training	45,000	Water supply, community training in health, ag, environ
	SA	Matabeleland North, Binga	Community Development Program	20,304	Water & sanitation, ag extension
	UNICEF		Robert Nestdale Project – Phase 2	240,000	Water & sanitation
	WV		Africa Development Programs: Manzuire Food Security Project ($37,600)	93,018	
Sub-Saharan Africa Unallocated	ADRA	South Africa (and Kenya)	Africa Food Security	112,500	ag, health, nutrition educ., microcredit and microenterprise
	AE	South Africa + numerous others	Africa Community Development (Lots of activities)	212,643	
	CAA		Community Development Program	295,482	
	CARITAS	Mozambique, Tanzania + others	Africa Community Development Program	506,062	ag ext., microenterprise, health
	FHF		Cataract Microsurgical and IOL TP	26,752	Design of next phase
	PLAN		Child Trafficking Awareness and Prevention	62,728	
	WV		Africa Development Programs	666,794	
			Total	11,299,204	

Acronyms

NCCA	National Council of Churches Australia
AE	African Enterprise
ADRA	Adventist Development and Relief Agency
TEAR	The Evangelical Alliance Relief Fund Australia
UNICEF	UNICEF Committee of Australia
ALWS	Australian Lutheran World Service
AngliCORD	Anglicans Cooperating in Overseas Relief and Development
APHEDA	Australian People for Health, Education and Development Abroad
CAA	Community Aid Abroad
SA	Salvation Army
CCFA	Christian Children's Fund Australia
CMS	Church Missionary Society
AUSTCARE	Australians Care for Refugees
WV	World Vision
PLAN	Plan International Australia
CARITAS	Caritas Australia
IN	International Needs
LM	Leprosy Mission
QSA	Quaker Service Australia
FHF	Fred Hollows Foundation

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Evaluation of Australian Government Funded NGO Projects in Africa

NGOs are important partners of the Australian Government in providing assistance to improve the social and economic situation of poor communities in developing countries around the world, including in Africa. A key theme of the Government's last NGO policy statement, *Working with Australian NGOs* (1999), is that the Government and NGOs need to learn more about the performance of aid activities to improve and demonstrate impact and quality.

This independent evaluation of Australian Government funded NGO projects in Africa serves important learning and accountability functions for both AusAID and the NGOs. The evaluation examined the quality and performance of seven NGO projects in Tanzania, Zimbabwe and South Africa. Four of the projects addressed HIV/AIDS prevention and care. The remaining three were activities in water and sanitation, child nutrition and social empowerment training.

A key finding of the evaluation is that while the projects were targeted at priority needs, the overall quality of the NGO program in Africa would be improved considerably with stronger designs and more effective monitoring during implementation. The study makes recommendations for revision of AusAID's guidelines and quality criteria for NGO programming and reporting.