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# Final Performance Evaluation of Food For Peace-funded Development Food Assistance Programs in Democratic Republic of Congo

**Final Evaluation Report**

August 2016

This document was prepared for the United States Agency for International Development, Food For Peace – Democratic Republic of Congo Mission.

**Prepared by:**

The Mitchell Group, Inc. with the support of the Centre de Renforcement des capacités et d'Etudes sur la Santé, Population et Développement

Lans Kumalah, Program Coordinator  
Aboubekrine Kone, Program Manager  
John McCauley, Technical Manager  
Brandy Jones, Team Leader  
Barthelemy Kalambayi Banza, Technical Specialist  
Yves Reynaud, Technical Specialist  
Madeleine Kasay, Technical Specialist  
Christophe Alimasi, Technical Specialist

**Principal contacts:**

Lans Kumalah, Program Coordinator, TMG, Inc., Washington, DC, [lansk@the-mitchellgroup.com](mailto:lansk@the-mitchellgroup.com)  
John McCauley, Technical Manager, TMG, Inc., Washington, DC, [johnm@the-mitchellgroup.com](mailto:johnm@the-mitchellgroup.com)  
Brandy Jones, Team Lead, TMG, Inc., Washington, DC/Dakar, Senegal, [bjdrils@gmail.com](mailto:bjdrils@gmail.com)

**Implemented by:**

The Mitchell Group, Inc.  
1816 11th Street, NW  
Washington, DC 20001  
Tel: 202-745-1919

# **DEVELOPMENT FOOD ASSISTANCE PROGRAMS IN THE DEMOCRATIC REPUBLIC OF CONGO**

## Final Performance Evaluation Report

AUGUST 2016

### DISCLAIMER

The author's views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

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## LIST OF ACRONYMS

ADRA:	Adventist Development and Relief Agency
ANC:	Ante-Natal Checkup
CARG:	Comité Agricole et Rural de Gestion
CDC:	Community Development Committee
CEWS:	Communty Early Warning System
CF:	Comité Foncier
CIG:	Common Interest Group
CRESPoD:	Centre de Renforcement des capacités et d'Etudes sur la Santé, Population et Développement
CSB:	Corn Soy Blend
CSPA:	Community System for Priority Action
DTP:	Diphtheria, Tetanus Polio
ENA:	Essential Nutrition Actions
FBA:	Farmers Business Association
FC:	Congolese Franc
FFS:	Farmers Field School
FG:	Focus Group
HC:	Health Center
IDP:	Internally Displaced Persons
INERA:	Institut National de Recherches Agronomiques
IITA:	International Institute of Tropical Agriculture
IP:	Implementing Partner
ITN:	Insecticide-Treated Bed Nets
IYCF:	Infant and Young Child Feeding
LDC:	Local Development Committee
LIFEPACO:	League of Congolese Women Farmers
MV:	Measles Vaccine
NGO:	Non-Governmental Organization
OPV:	Oral Polio Vaccine
PM:	Producer Multipliers
PSC:	Pre-School Checkup
RAC:	Rural Agricultural Council
RECO:	Relais Communautaire (Community liaison worker)
RTNC:	Radio Télévision Nationale Congolaise
SBCC:	Social and Behavior Change Communication
SCU:	Solidarity Credit Union
SENASEM:	National Seed Service
SFCG:	Search for Common Ground
SYDIP:	Syndicat de Defenses d'Interet Paysans
VAA:	Village Agricultural Association
VSLA:	Village Savings and Loan Association
YFV:	Yellow Fever Vaccine

## **EXECUTIVE SUMMARY**

In December 2015, USAID commissioned The Mitchell Group (TMG) to conduct an evaluation of its Food for Peace (FFP) development programs in Eastern DRC. The USAID FFP portfolio consisted of three distinct Development Food Assistance Programs (DFAPs). The programs sought to address food security, maternal health, and improved livelihoods through five years of programming that totaled over \$150 million of inputs and programming for communities throughout North Kivu, South Kivu, and Tanganyika, with a complex set of development programming and activities. Broadly, the programs aimed to address challenges brought about by violence and displacement of citizens in the Democratic Republic of Congo since 1998.

To implement the DFAPs, USAID's FFP office partnered with three international non-governmental organizations (NGOs): Mercy Corps, Adventist Development and Relief Agency (ADRA), and Food for the Hungry (FH). The Implementing Partners (IPs) undertook separate projects related to food security. While each project addressed USAID/FFP's core food security activities (Agriculture and Livelihoods; Health and Nutrition; and Resilience), secondary goals included improvements related to USAID's cross-cutting areas of Governance and Gender.

This final evaluation is an independent review of the programs. To evaluate the success of the DFAPs with respect to the core and secondary objectives, the evaluation team focused on eight key components: 1) effectiveness of training models 2) links to markets and public services 3) changes in income and livelihoods 4) changes in nutrition practices 5) changes in gender norms 6) outputs of disaster risk reduction interventions 7) results of governance and conflict resolution initiatives and 8) the sustainability of program interventions.

Field data was collected during the period of February 1 - March 25, 2016 in North Kivu, South Kivu, and Tanganyika provinces. In total, the evaluation team visited 36 villages and conducted over 100 focus group discussions, 170 individual interviews, and over 300 mini-surveys and house visits. The data collection effort was undertaken by a team of five consultants with expertise in the relevant areas of agriculture, governance, gender, maternal health and nutrition. The analysis of the data suggests that the three DFAPs all performed reasonably well, but with some distinct strengths and weaknesses.

### **Mercy Corps' RISE Program**

The RISE program sought to reduce food insecurity among vulnerable families in North Kivu. The program was based on three key strategic objectives: 1) diversified production

and increased incomes for small farmers, 2) improved nutritional status of nursing mothers and children under 5, and 3) better governance of food security. Activities included livestock rearing, agricultural diversification, fighting plant diseases, pest control, access to markets, economic information provision, and credit programs.

Strengths:

- 1) The SBCC trainings were effective particularly in reaching direct beneficiaries.
- 2) Community Interest Groups helped to bolster production through improved market information.
- 3) Agricultural programs improved storage options, bolstering sales and incomes.
- 4) Village Savings and Loan Associations serve as a critical safety net for beneficiaries, providing access to capital that would not exist without program support.
- 5) Agricultural service roads and food-for-work initiatives provided access to markets and improved productivity.

Weaknesses:

- 1) Follow-on trainings were ineffective in reaching potential new beneficiaries.
- 2) A high level of duplication exists in the provision of health and nutrition programs.
- 3) Market access and value chain activities realized only limited success.
- 4) Programs suffered from a late start.
- 5) Communities perceive material handouts to be a central component of the program, which potentially can undermine sustainability and willingness to participate absent benefits.

### **ADRA's JENGA II Program**

The objective of the Jenga Jamaa II program was to reduce long-term food insecurity among vulnerable families in the Fizi, Uvira and Kalehe areas of South Kivu. The program was structured around four key strategic objectives: improving producer incomes, improving childhood nutrition, strengthening women's economic status, and improving community resilience to shocks. Specific activities included irrigation practices, access to credit, hygiene practice demonstrations, latrine construction, women's literacy training, plant distribution, and the training of CDCs among others.

Strengths:

- 1) Literacy trainings effectively improved opportunities for direct beneficiaries.
- 2) Soil and water projects assisted whole communities in bolstering production.
- 3) Farmers Business Associations (FBAs) helped producers to improve production and sales.
- 4) Women were empowered by literacy and health trainings and empowerment groups.

Weaknesses:

- 1) Literacy trainings did not spill over to non-beneficiaries.
- 2) Only direct beneficiaries benefited from improved market access.
- 3) Community Development Committees suffered from inadequate representation.
- 4) CDCs and CSPAs lacked clear action plans and strategies for autonomy.

### **Food for the Hungry's Tuendelee Pamoja Program**

The objective of the Tuendelee Pamoja program was to improve food security among vulnerable families in two ways: by improving socio-economic conditions, and by improving the health and nutrition of individuals, women, and young children. Specific activities included, among others, agricultural training, seed multiplication and distribution, rearing livestock to improve soil fertility, credit associations, tree planting, good cooking practices, and hygiene demonstrations.

Strengths:

- 1) Trainings with practical demonstrations were effective.
- 2) Agricultural and reforestation activities boosted production and improved soils.
- 3) Credit associations allowed women and small producers to generate income.
- 4) The program strengthened awareness regarding child care, sanitation, and nutrition.
- 5) Awareness regarding gender equality has improved.

Weaknesses:

- 1) SBCC training organization was often unclear and haphazard.
- 2) Cascade training did not effectively reach non-beneficiaries.
- 3) Interest rates were too high for many beneficiaries to effectively exploit credit opportunities.
- 4) Subsidization of seed multiplication centers undermined long-term sustainability.
- 5) CDC effectiveness was limited by concerns over representation and transparency.

### **Overall Recommendations**

- Literacy trainings should be replicated in future FFP programs, putting renewed emphasis on coaching and developing teacher trainers from the local population. The programs provide double benefits by expanding literacy and teaching substantive content, but improvements must be made in the cascading of skills.
- Nutrition, sanitation, and health awareness activities should be a centerpiece of FFP programs. The activities should focus on practical demonstrations for women, particularly pregnant women and mothers of young children. They should also include listening groups and creative exchanges of information.

- Community Development Committees and other local committees that address Disaster Risk Reduction and Conflict Management must be reformulated. The concept is practical and important, but future iterations must do a better job of ensuring transparent operating processes. Membership should be determined in a representative fashion.
- Farmers Business Associations and Reforestation projects should be reinforced and continued. FBAs can be given the lead in local agricultural initiatives, and regular awareness campaigns should be conducted by the FBAs to serve the interests of small producers. Reforestation can be coupled with food-for-work activities.
- Gender-based initiatives should be made more participatory. Awareness of the importance of gender equality seems to have improved among both women and men as a result of DFAP activities. However, in order to transform that awareness into behavioral change, men must actively benefit from women's gains and must see those gains in action.

## **I. EVALUATION DESCRIPTION**

### **1. Objective of the Evaluation**

The objective of this report is to evaluate USAID's Food For Peace (FFP) development initiative in Eastern Democratic Republic of Congo. With the broad goal of addressing the food security crisis in Eastern DRC, USAID's FFP office partnered with three international non-governmental organizations (NGOs): Mercy Corp, Adventist Development and Relief Agency (ADRA), and Food for the Hungry (FH). The three Implementing Partners (IPs) led separate consortiums that implemented food security programs. While each project addresses USAID/FFP's core food security activities (Agriculture and Livelihoods; Health and Nutrition; and Resilience), a secondary goal was that they also include in various ways, aspects related to USAID's cross-cutting areas of Governance and Gender. Specific activities under each sector differ, as well.

This final evaluation constitutes an independent review of the effectiveness of the FFP activities. It was conducted by The Mitchell Group (TMG), an independent international development consulting organization contracted by USAID. Through document review and seven weeks of field work, TMG has reviewed the work of each Development Food Assistance Program (DFAP). The joint evaluation of those DFAPs will enable USAID to assess program results; identify major barriers to achieving expected results; and document the best practices, strengths, weaknesses, and constraints involved in sustaining program achievements. The evaluation findings will ultimately assist USAID and its IPs, as well as DRC's national stakeholders, in the design and implementation of follow-on activities and lessons learned.

The evaluation centered on changes related to the following core themes: 1) effectiveness of trainings, 2) links to markets and public services, 3) changes in household incomes and livelihoods, 4) changes in nutrition, 5) changes in gender norms and equality, 6) disaster risk reduction (DRR), 7) governance and conflict resolution, and 8) sustainability of the interventions. In addition, the evaluation team sought to identify strengths, weaknesses, and lessons learned.

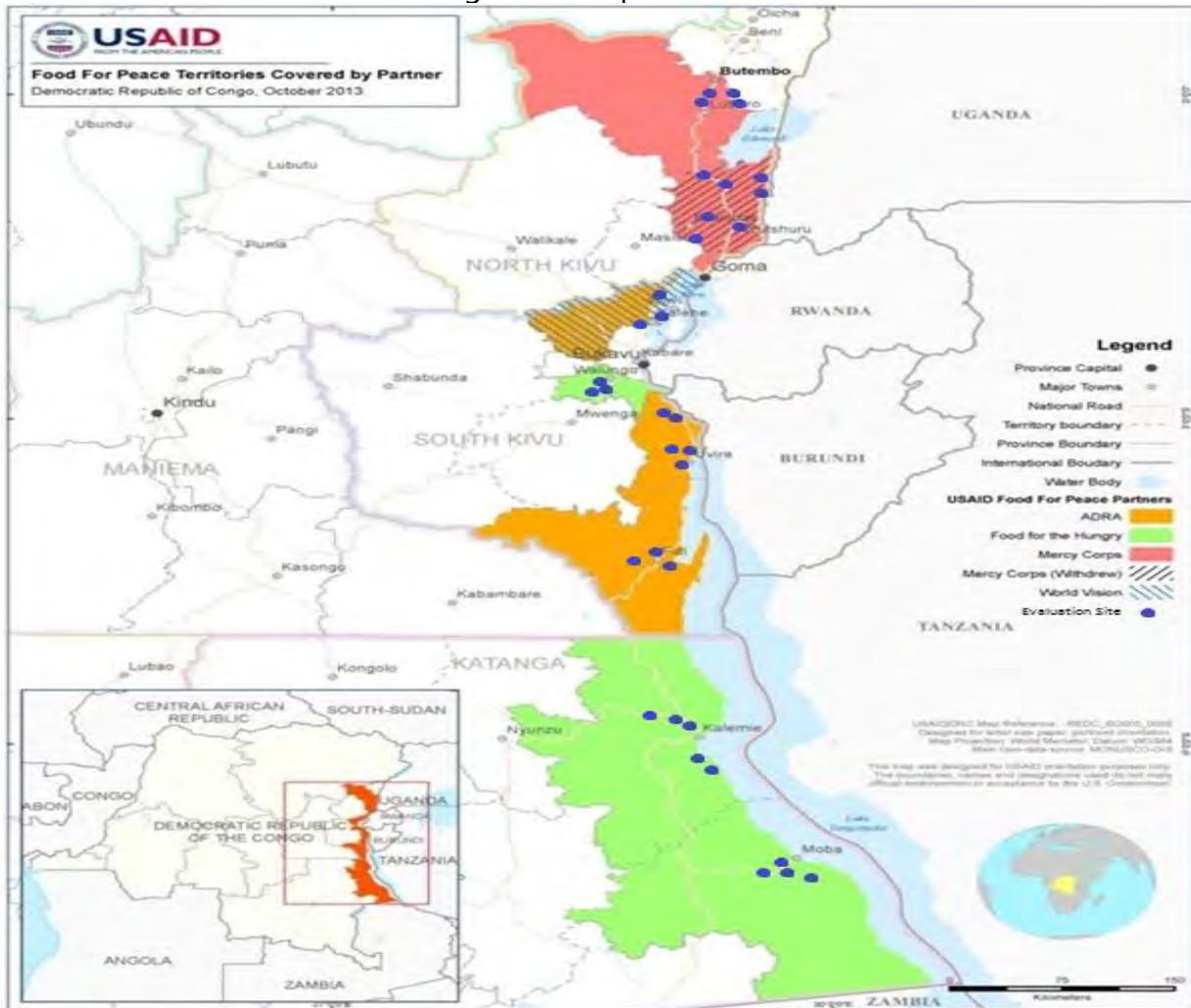
### **2. Map and Locations**

The joint evaluation took place across three provinces: North Kivu, South Kivu, and Tanganyika. In North Kivu, Mercy Corps (partnering with Catholic Relief Services) undertook its RISE program aimed primarily at addressing agricultural livelihoods, maternal and infant nutrition, and governance. In South Kivu, ADRA (partnering with World Vision and Johns Hopkins University) conducted its Jenga Jamaa II program, whose principal objectives were to address food security, nutrition, women's empowerment, and community resilience. Finally, Food for the Hungry (partnering with

Search for Common Ground) conducted its Tuendelee Pamoja program in both Tanganyika and South Kivu. The primary strategic objectives included food security, nutrition, sanitation and water, women’s empowerment, and community resilience.

See Figure 1 below for a map of the DFAP locations and the sites visited during the course of the evaluation.<sup>1</sup> The eastern part of the country suffers from ongoing instability, which complicated both the implementation of the programs and the evaluation. Not coincidentally, the region is also in dire need of food security assistance. The implementing partners thus had to balance security challenges against the imperative of providing thorough and consistent training and assistance to beneficiary communities.

Figure 1. Map of evaluation locations.



<sup>1</sup> See Annex A11 for GPS-based locations of the evaluation sites from Google Maps. Map includes all sites whose names were locatable with GPS software.

In each province, the evaluation team aimed to visit 12 villages to evaluate DFAP effectiveness. The exception was the FH program: because the work was spread across Tanganyika and South Kivu, the evaluation team visited 9 villages in Tanganyika and an additional 3 villages in South Kivu. All sites included in the evaluation are classified as rural, extremely low income lacking many basic services; this is to be expected given the objectives of the DFAPs and the targeted intervention areas.

Regarding the distribution of villages across provinces, USAID/DRC indicated that they wanted data collected in Fizi Territory, on the Plaine de Ruzizi and throughout the North Kivu intervention zones, as well as in a World Vision intervention zone. They also requested that we collect data on Food for the Hungry's work in both Tanganyika (Moba and Kalemie territories) and South Kivu (Walungu Territory). Based upon these requirements, the team distributed the number of villages proportionally across the three provinces and the three DFAPs. Thus, the evaluation team assigned 15 villages in South Kivu distributed between World Vision (three villages in Kale), ADRA (nine villages in Fizi, Uvira and the Plaine de Ruzizi), and Food for the Hungry (three villages in Walungu Territory). Twelve villages in North Kivu for Mercy Corps were divided between Lubero and Rutshuru territories. The nine remaining villages were selected in Tanganyika to evaluate Food for the Hungry programs.

To identify specific villages for evaluation, the team used health zone and administrative maps and randomly identified villages that were distributed throughout the intervention zones, going as far out as 100km, which were also on the IPs' participating site list and which met the distribution requirements outlined above. Before finalizing the list, the team then met with the USAID/DRC mission and the relevant IPs to confirm accessibility and security. Based upon feedback from the mission and the IPs, and in some cases dialogue with security officials and UN agencies such as the World Food Programme, the team finalized the list independently. See Table A1 in the Annex for a list of the villages that comprised the locations for the evaluation.

Regarding the program activities that took place in each province, not all strategic objectives were addressed at all locations for the Mercy Corps DFAP. Thus, the evaluation team visited some sites that received the full package of interventions and other sites that received only a limited set of interventions. The strategic objectives addressed at each of the North Kivu/Mercy Corps sites are as follows:

- Butare: Full package (Agriculture and Value Chains, PM2A and Maternal Health, and Governance)
- Bambo Centre: Full package
- Katendere: Full package

- Kivumu: PM2A and Maternal Health, Governance
- Magheria: PM2A and Maternal Health, Governance
- Rushege: Full package
- Rwabangi: Full package
- Muhangi: Agriculture and Value Chains, Governance
- Minoli: Full package
- Musienene: Agriculture and Value Chains, Governance
- Lukanga: Agriculture and Value Chains, Governance
- Ngeleza: Full package

### **3. Data Collection Methodologies**

The evaluation relied on four data collection methodologies: Focus group discussions, in-depth interviews, mini-surveys, and house visits.

Focus group discussions constituted the most intensive and data-rich component of the evaluation. In total, the evaluation team conducted 103 focus group discussions. The groups involved between 5 and 12 people and were formed with sector experience in mind (i.e. health, agriculture, DRR, and governance). In addition, the team conducted focus groups with exclusively female participants in order to better gauge the gender equality component of the DFAP activities. Finally, because the evaluation team was interested in determining the effectiveness of the programs in terms of their impact on beneficiary households and individuals, we also conducted a limited number of focus groups with non-beneficiaries in order to create a comparative point of reference. These focus groups covered the same broad issues but did not focus on specific DFAP activities. Details on the focus groups conducted for this evaluation can be found in Annex A7.

In addition to focus groups, the evaluation team conducted 170 in-depth interviews with key stakeholders. These included leaders of local groups associated with the DFAP programs (i.e. farmers' groups, women's groups, local governance structures), key beneficiaries (i.e. farmers who completed the trainings and followed through on recommended practices), and other leaders at the village level. Interviews explored topics similar to the focus group discussions—exploring outcomes related to the core objectives of the DFAPs—but were targeted based on the area of expertise or experience of the interviewee. Details on the in-depth interviews that the evaluation team conducted can be found in Annex A6.

Mini-surveys were the third instrument used in data collection. In total, the evaluation team conducted 308 mini-surveys, primarily with beneficiaries but also with non-beneficiaries. Given the small sample size per village and the irregularity with which direct trainees transmitted skills and knowledge to indirect beneficiaries, the mini-survey

component of the data collection focuses on changes to direct beneficiaries against a baseline of those who had no contact with the program to that point. Other data collection methods address impacts on indirect beneficiaries. Respondents included 207 women and 101 men. Finally, the evaluation team conducted 320 house visits in conjunction with the mini-surveys. They allowed the evaluation team a closer look at living conditions and practices potentially associated with DFAP programs. The survey instrument for the mini-survey and protocols for the house visits are located in Annex A9. Please see Annex A10 for tables of select findings from the mini-surveys and house visits, disaggregated by beneficiary status. The findings presented here are intended to offer insight into key outcomes related to health, gender, and livelihoods; some of those findings are also discussed in the body of the report.

To select households and respondents for the mini-surveys and house visits, the data collectors divided the village by quadrants, with each data collector taking two quadrants and randomly selecting two households in each quadrant via a random-walk procedure starting from key points of departure. As the evaluation was conducted during the rainy season (an active part of the agricultural cycle), it was often challenging to locate participants who were often in fields far from their village. In case of absences, data collectors continued to other households using a sampling gap of three households until they located a home with a head of household or spouse that was available to participate in the mini-survey. For each village, pre-established target numbers were assigned to each data collector in terms of women, men, beneficiaries and non-beneficiaries.

#### **4. Documents Reviewed**

In addition to data collection in the field, the evaluation also extensively documented the work of Implementing Partners. The evaluation team requested, received from the IPs, and reviewed, a range of documents including statements of work, project site descriptions, proposed indicators, and annual reports.

Technical Specialists for TMG reviewed documentation prior to undertaking field work to better understand the procedures established by the implementing partners, the challenges they faced, and the outcomes they sought to achieve. A listing of the documents reviewed, organized by DFAP, is included in Table A2 in the Annex.

Regarding training information disseminated by the IPs to beneficiaries, the IPs relied on health and nutrition, financial, agricultural, DRR, and local governance information viewed as standard in the international community (derived from, for example, the World Health Organization, the Food and Agriculture Organization of the United

Nations, and the World Bank). The evaluation team did not encounter instances in which the information conveyed in trainings differed from international standards and norms.

## **5. Activities in the Field**

In each province, the evaluation team began its work by making contact with Implementing Partners. Doing so was necessary for security and transportation purposes, to ensure that the evaluation team traveled to and remained in safe areas. In addition, contact with the IPs gave the evaluation team insight into the difficulties that the IPs faced: in some cases, activities were cut short due to security threats, and in other cases, IPs described related work conducted by other aid organizations in the province. The team of four Technical Specialists then separated into two groups of two, each supported by four locally hired assistants. The two groups conducted evaluation activities in separate villages simultaneously, while the Team Lead worked between the two locations. The evaluation team conducted 12 days of active research in Tanganyika (February 8 – 19), 14 days of active research in South Kivu (February 20 – March 6), and 17 days of active research in North Kivu (March 7 – 23).

In each village, the evaluation team followed protocols to obtain authorization and work effectively. The Team Lead met with local government officials and traditional leaders to explain the purpose of the visit. With cooperation from local leadership, Technical Specialists divided the tasks of facilitating focus groups, conducting in-depth interviews, and carrying out surveys and house visits. Local assistants provided translation support and other logistics.

A critical aspect of the evaluation was to identify key informants and targeted beneficiaries. The evaluation team typically started with a contact in a local DFAP beneficiary group such as an organization leader, and identified potential participants and interviewees with that contact's assistance. Using a snowball sampling procedure, the evaluation team was able to extend the set of participants beyond those identified by primary contacts, and the IPs had no input on the sources of data. Key informants generally included the following: farmers, producers, women farmers, local association members and leadership, and representatives of public institutions (health and agriculture). Beneficiary households were the primary focus of focus group and survey data, though as noted, non-beneficiaries were also represented in the data.

In total, the evaluation team undertook the following data collection exercises:

- North Kivu (12 villages): 36 Focus Groups, 50 Interviews, 110 Surveys/ house visits
- South Kivu (15villages): 44 Focus Groups, 79 Interviews, 128 Surveys/house visits
- Tanganyika (9 villages): 23 Focus Groups, 41 Interviews, 70 Surveys/house visits

## 6. Evaluation Team

To conduct the evaluation, TMG organized a team of experts with specialization in the substantive areas addressed by the DFAPs. During the data collection phase in the field, the evaluation team traveled together to Health Zones and then broke into two groups, each with two Technical Specialists and four supporting assistants (hired locally by TMG's local partner, CRESPOD). The Technical Specialists were responsible for facilitating focus groups and conducting in-depth interviews with key informants. The assistants provided language and logistical support in the field (as interpreters, note takers, etc.) and assisted with the mini-surveys. The Team Lead, Dr. Brandy Jones, supervised the evaluation team through the course of the data collection, moving between the two groups to provide oversight, ensure consistency, and address challenges as they arose. The Technical Manager, Dr. John McCauley, provided design input and supervised the evaluation output and reporting from TMG Headquarters in Washington, DC. Team members are listed below in Table 1.

**Table 1. Evaluation Team Members**

<b>Name</b>	<b>Title</b>	<b>Area of Expertise</b>	<b>Role on the Team/ Principal Activity</b>
John McCauley	Technical Manager	Research and Methodology	Provide technical guidance for planning and oversight of deliverables
Brandy Jones	Team Leader	Research, Methodology, and Field Coordination	Leadership of team in the field, presentation to donors and production of deliverables
Yves Reynaud	Technical Specialist	Agriculture and Governance	Field work, data collection, analysis and writing
Christophe Alamas	Technical Specialist	Nutrition and Gender	Field work, data collection, analysis and writing
Madeline Kasay	Technical Specialist	Nutrition and Gender	Field work, data collection, analysis and writing
Barthelémy Kalambayi	Technical Specialist	Agriculture and Governance	Field work, data collection, analysis and writing

## 7. Relationship with Implementing Partners

The evaluation team adopted a strategy of relying on the IPs primarily for initial logistical support from headquarters and for background information, with only limited logistical support in the field. As this was to be an independent evaluation, the evaluation team assured its own transportation and visited villages independently for data collection. The decision was made not to request input from the IPs on the successes or failures of their DFAPs, on the grounds that doing so would invite the

potential for reframing of program shortcomings. Thus, the evaluation team interacted with the IPs upon arrival in each province and obtained information on transportation strategies, security risks, and background related to the completion of tasks. The IPs proved to be willing and effective partners in these matters, and their familiarity with local conditions was important to the success of the evaluation, particularly with respect to movement, security, and context in the insecure areas of North Kivu. In Tanganyika, the IP was approached following approval from the USAID Mission to provide assistance with transport between Kalemie and Moba territories, using the project-purchased boat to travel more quickly by lake from one site to the other.

Aside from receiving IP assistance with information such as maps and security information and occasional support in terms of movements between territories, the evaluation team remained largely independent.

An exception was the evaluation work conducted in North Kivu. After careful and protracted discussions with the USAID/DRC Mission, it was decided that the evaluation team would be accompanied by Mercy Corps in both territories where data were to be collected. This decision was made primarily as a result of the heightened security risks due to kidnappings and communal violence in the region. The role of Mercy Corps during those field visits was to accompany the team to the villages in a separate vehicle in order to ensure increased security and support in case of any incidents. Once the evaluation team was on site, the Mercy Corps staff agreed to allow the evaluation team to work independently with no interference.

## **8. Challenges Encountered**

Several challenges arose that affected the ability of the team to conduct the evaluation of the three DFAPs. As we note below, the team found strategies to mitigate each of those concerns.

**First, infrastructural challenges** affected the ability of the evaluation team to move and communicate efficiently. Road conditions were a major impediment to the work. Furthermore, the field work was conducted during the rainy season and most roads were not paved, so their condition deteriorated following rainfall or use by large transport vehicles. Slow travel speeds required significant planning and coordination of logistics to ensure safe departure and return from the field. The team could not visit villages that were further than 100km out unless they were in more developed areas with secure housing in which the team could lodge overnight. Otherwise, the team conducted day trips to areas that were accessible in a maximum range of 100km. The team was able to collect data in all of the territories and locations that the mission identified as critical for their purposes, particularly in areas that are typically difficult to

access for various reasons such as Fizi Territory, Plaine de Ruzizi, Rutshuru Territory, and Lubero Territory.

Poor cellular coverage also posed challenges. To overcome this constraint, the team used thuraya phones to communicate in order to coordinate movements, share security information, and seek logistical support. Limited electricity posed yet another infrastructural challenge; in a proactive measure, the team charged its equipment before leaving reliable electricity areas.

The consequence of these infrastructural challenges faced by the evaluation team is that some of the most remote areas included in the DFAP areas were not included in the evaluation. To the extent that program implementation differed in those areas—which it may have since the IPs would have faced the same infrastructural challenges in implementing their programs—the results of this evaluation are likely biased in favor of the more accessible sites. The locations from which data were collected were themselves hard to reach, so the potential differences are likely to be of degree rather than kind.

**Second, insecurity** concerns were routine for the evaluation team. In 2012 and 2013, conflict related to the M23 Rebellion severely affected Eastern DRC. International staff from all NGOs evacuated Goma, and the conflict created more than 200,000 Internally Displaced Persons (IDP) in North Kivu alone. Consequences of the conflict persist, and the work of the evaluation team was affected. This was particularly true in North Kivu, where one team—in the Rutshuru/Birambizo health zone—had to be supervised remotely. In several areas, the team was advised to take precautions to avoid any security incidents. Below we highlight the most security sensitive areas and the actions taken to address the risk:

- In some areas of South Kivu, such as Fizi territory and Plaine de Ruzizi, it was advised that the team be mindful about the timing of movements and the areas in which they traveled. Areas such as Baraka in Fizi and some parts of Plaine de Ruzizi were excluded all together and the team avoided remaining in Plaine de Ruzizi beyond 15:30 per the advice of partners and locals. Where possible, if data collection was not complete, the team returned the following day.
- In parts of Tanganyika and South Kivu such as Walungu Territory, it was advised that the team remain vigilant for armed bandits and kidnappers. Data was collected in these areas but the team avoided spending the night outside of Moba and Kalemie to reduce any risks.

- Risks of kidnapping and violence in North Kivu required that the team adjust its approach completely. In Rutshuru, a team of local data collectors from the territory were remotely supervised to conduct the field work. It was advised that internationals would be targeted. As an added measure of security in both Lubero and Rutshuru, the team was accompanied by the Implementing Partner, Mercy Corps.

The consequence of various insecurity challenges could very well mean that the evaluation team may have been disposed to avoid areas that would best illustrate the impact of conflict resolution activities. However, while security was a constant concern, the above mentioned adjustments and proper planning allowed the team to both avoid any major security incidents while in the field, and also gather data from some of the more security-challenged areas of DFAP implementation.

**Third, uneven application of interventions** concerning the RISE program by Mercy Corps, complicated the evaluation team's work. As Mercy Corps did not implement the full package of activities across its intervention zones, the sites that received visits had to be selected with consideration for locations that received as many interventions as possible. This was compounded by the fact that Rutshuru was the only location that received PM2A, again as a result of the M23 violence that affected the region in 2013. As such, the evaluation team had to split the villages between Rutshuru (6) and Lubero (6) territories. Citing ongoing insecurity in parts of Rutshuru Territory, RISE made the decision (with donor approval) to significantly scale down activities in Rwanguba, Binza, and Rutshuru Health Zones (HZ) in Rutshuru Territory, and in Karisimbi Health Zone in Nyiragongo Territory. All activities were ultimately concluded except for a final season of seed multiplication, support to women and youth associations, and follow-up with Village Savings and Loan Associations (VSLAs). The shift did not entail any changes in the overall numbers of beneficiaries but did include scaling up activities in Birambizo HZ as well as geographic expansion to two new territories, Lubero and Beni (from the 2013 annual report).

The consequence of uneven application of interventions is that the results of the data collection for evaluation purposes could be biased against those programs that started late or were cut short, even if the implementation itself was effective. To address this concern, we have taken pains to note the cases in which implementation plans had to be altered, so as not to create inappropriate comparisons or expectations.

**Fourth, social desirability bias** can affect responses to sensitive topics. This is especially true regarding matters such as gender equality; men understand that gender equality is increasingly viewed as a desired norm, so they may express opinions in

keeping with that norm even if doing so does not reflect their actual opinion. There is little way of escaping this challenge short of experimental methods, but the fact that some males described behaviors contradicting their stated opinions suggests that some degree of social desirability bias exists in the evaluation. Biased responses may also arise when individuals discuss assets, as they may believe that their responses condition future material distribution. The evaluation team did not encounter obvious examples of this, but they worked hard to keep discussions and interviews as open as possible and to use non-judgmental language to mitigate potential bias in responses.

To the extent that social desirability bias affected responses to the evaluation team, the effects of gender interventions in particular may be weaker than they appear (since the most likely source of such bias would be males inflating their support for gender equity). This must be kept in mind when evaluating results; there is little proven strategy for overcoming such biases using observational methods.

## II. NORTH KIVU: MERCY CORPS DFAP

### A. Summary of Program Objectives

The Mercy Corps-led RISE/SIMAMA<sup>2</sup> program sought to **reduce food insecurity among vulnerable families** in North Kivu. The program is based on three key strategic objectives: 1) diversified production and increased incomes for small farmers; 2) improved nutritional status of pregnant and nursing mothers and children under 5; and 3) better governance of food security.

**The Strategic Objective of diversifying production and increasing incomes** for small farmers is structured around new agricultural practices, creating and strengthening value chains, and improving the technical and economic environment. Work on this objective covers eight activities: varietal improvement, livestock rearing, pest and plant disease control (including fighting cassava mosaic disease and Banana Xanthomonos Wilt), storing and processing produce, access to markets, developing agricultural infrastructures, economic information, and agricultural credit.

**The Strategic Objective of improving the nutritional status of mothers and children** is based on improved access to health services, preventing malnutrition and malnutrition-related diseases, and promoting improved diet and nutrition. More than 10

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<sup>2</sup> The Mercy Corps “Resources for Improving Food Security in Eastern Democratic Republic of Congo” (RISE) program is referred to interchangeably as SIMAMA; they are one and the same program. SIMAMA is a Swahili term meaning to Stand. This appellation is used more frequently by local communities, as evidenced in the interviews and focus groups. Both terms are used in program documents.

specific activities serve this objective: training and distributing equipment, disseminating knowledge, prevention messages and improving perceptions, detecting malnutrition, distributing rations, training, supervision and monitoring, behavioral research and information campaigns, promoting parent leaders (male and female) and support groups, distributing rabbits and guinea pigs, promoting vegetable gardens and food diversification, promoting local Corn Soy Blends (CSB), and organizing cookery contests.

**The Strategic Objective of improving governance and food security** is based on two key themes: 1) cooperation and coordination between actors to improve transparency and accountability, and 2) strengthening links with territorial and provincial structures. Activities related to these themes include: local development plans and disaster risk reduction plans prepared by committees, conflict mediation, promoting and supporting agricultural and rural committees (with action plans and funding), and implementing specific micro-projects. Defining and implementing local development plans and plans for agricultural committees are key aspects of governance and are essential for sustainable outcomes. These plans also serve as cross-cutting tools that strengthen Strategic Objectives 1 and 2, facilitate coordination between program actors, and promote a long-term vision for reducing food insecurity.

Security challenges posed notable difficulties for DFAP implementation. According to the Chief of Party for RISE, the initial intervention zone and range of interventions were modified in order to avoid problems associated with conflict; this added complexity to a setting in which sites were already receiving different levels of program implementation. As noted above, seed multiplication activities, women's associations, and VSLA activities had to be cut short before the end of the implementation period, and PM2A activities were limited only to certain areas in Rutshuru; the Mercy Corps staff indicated that this was done to avoid the risk of conflict.

## **B. Findings**

### **1. Effectiveness of Training Models**

Capacity building was a critical part of the RISE program. It took the approach of social and behavior change communication (SBCC), which consisted of awareness trainings for adults and education techniques for Lead Mothers and members of various community committees. These trainings covered several themes, particularly health and nutrition, agriculture, leadership, trade, credit, value chains, operating accounts, and gender. Materials were distributed that depicted best practices in easy-to-understand pictures and text.

Mercy Corps and its consortium members used the cascade method, which aimed to train a core group of direct beneficiaries on a diverse set of themes and areas including

but not limited to new growing techniques, managing micro-credit, personal hygiene, Essential Nutrition Actions (EYA), and Infant and Young Child Feeding (IYCF). Typically, the trainings targeted 25 people who were initially supervised by an agronomist, nurse, or other trained practitioner. Participants were then encouraged to take the techniques and information they learned to their own fields, women's groups, and other community outlets in order to transfer knowledge and skills to indirect beneficiaries. Some specific trainings included how to plant carrots and onions, how to conserve seeds for the next season, how to best clean clothes and utensils, and how and when to wash hands.

A Lead Mother in Musienene offered a perspective that was shared broadly by focus group members who were direct beneficiaries of the trainings on agricultural production techniques that highlight both the benefits and the shortcomings of the training model:

*- "The SIMAMA project taught us a lot. They gave us training on how to grow crops. It would be good if it continued because not many of us have benefited from it so far ... The idea was that everyone who was trained would be able to teach their peers, but they need to remember that we're only human, nobody's perfect. It will be very hard to use us to train other people ... we were the first beneficiaries, and now we've got to do everything to get the others to join us ... Say you're a farmer-teacher in Kinyatsi, and they know that you've been given free seed. How are you supposed to tell people they have to pay for their seed?...That's a problem."*

Mini-survey data indicates that the trainings reached 89% of the surveyed RISE beneficiaries, while only 7% of surveyed indirect beneficiaries were subsequently trained. While limited anecdotal evidence suggests that efforts were made to cascade—"I showed my neighbors how to plant cabbage, and the farmers showed people what they learned" (Lead Mother, Lubero)—most key informants indicated that the process of second line training was challenging because second line beneficiaries were not provided with input materials, seed, or livestock that first line beneficiaries received. Many non-beneficiaries reported resisting second line training unless tangible benefits were clear.

Nevertheless, indirect beneficiaries and non-beneficiaries (who were not slated to have contact with the program) reported picking up similar techniques through other means. For example, a focus group of non-beneficiary women in Magheria said that they had already been breastfeeding exclusively for a long time as instructed by the village health center: "... our babies are exclusively breastfed until they're 6 months old. That's what they taught us at the ante-natal checkups. We also know our children should be vaccinated, and when children are ill we take them to the health center." These

implemented practices mentioned were from awareness campaigns consistently used by Mercy Corps programs clearly indicating some overlap. Focus group respondents in Magheria, Kivumu, Lukanga, and Munoli noted that some SIMAMA campaigns were reaffirmations of the messages and skills shared through the government and religious health structures.

## **2. Links to Markets and Public Services**

The work in this area included seed demonstrations and multiplication, studying barriers to the dissemination of new practices, developing and delivering training materials, conducting economic studies (on gross margins), social structuring through the establishment of Local Development Committees (LDCs), establishing savings and credit associations, and supporting private operators with processing equipment (such as shellers and mills).

According to the mini-survey, 98% of RISE beneficiaries that participated in the survey reported that their agricultural practices had improved as a result of the trainings on storage, stocking, and pricing; in addition, 82% said their sales had increased, despite the fact that security challenges and implementation delays limited their ability to process products. Sales improvements came largely as a result of stocking and storage opportunities (which improved the sale of onions and potatoes) and program efforts to prevent crop disease (which improved the sale of cassava). One of Mercy Corps' key objectives was to improve processing and market links; the program did train 26 seed multipliers for beans and potatoes and established Common Interest Groups (CIGs) to engender business opportunities related to beans, potatoes, and onions. The evaluation team observed that the CIGs effectively improved storage opportunities and the sharing of information among farmers. However, no relevant processing activities were undertaken by RISE, and the value chain activities began only in January 2015.

Mercy Corps' work in providing roads to formerly isolated communities in Rutshuru was seen as critical to providing access to markets. Agricultural training beneficiaries and key informants noted that being able to get to markets had important consequences for livelihoods. According to one key informant: "We didn't have any agricultural service roads. A sack of cassava only used to sell for \$US10 because there were no buyers, but the price went up when roads allowed us to get to more buyers" (LDC Member, Katendere). The road construction was part of the Food-For-Work program, and a maintenance committee was established to keep the agricultural service roads open. In that sense, the sustainability of these roads has been incorporated into the program design.

The program also created Farmers' Business Associations, as one particular type of Common Interest Group. At least 76 CIGs were created, bringing together over 2,000

small producers and training them in improved agricultural techniques and business management and planning. The CIG members were selected from the best performing FFS participants. The CIGs were then used as channels to facilitate access to potential buyers and markets for the sale of goods and services. Here is how beneficiaries explained the benefit of CIGs: *"We set up an association and they organized us into a common interest group (CIG) to sell our produce ... We planned our harvest and kept what we needed to see us through to the next growing season ... Everyone used to sell at their own price, but now that we share a warehouse for our produce we agree on a single price"* (beneficiary farmer, Rutshuru, North Kivu). The ability to negotiate as a collective prevents individual farmers from being undercut by aggressive buyers, so the sale of agricultural products ensures better profits for each farmer in the collective. From the mini-survey, 60% of respondents noted that their storage had improved, and 82% said that their sales had increased. The creation of CIGs and the trainings they conducted empowered participants with more information and with an interest in getting improved prices for their products as a group, thereby generating power in numbers and improved collection action on the part of local producers.

RISE also sought to reinforce the link between participants and the public sector, in particular by supporting the Ministry of Agriculture. Overall, however, key informants noted that the project provided more support to the government than it received (President of the Comité Agricole et Rural de Gestion (CARG), Butare; Village Chief, Bambo Centre). One benefit from the collaboration with local communities is that the program signed a memorandum of understanding with the National Seed Service, SENASEM. Their seed inspectors made eight inspection visits to both Birambizo and Butembo and certified a total of 24 seed producer multipliers (PMs)—14 in Butembo and 10 in Birambizo. In partnership with SENASEM, Mercy Corps trained farmers in techniques for harvest, drying, preserving, and storing agricultural products including red onions, potatoes, and beans (see the RISE FY2014 narrative report). However, according to the CARG President in Butare, Mercy Corps implementers were the key actors in those trainings. Program support and collaboration with local structures was aimed at building capacity so that these local institutions could then provide sustainable support to producers after the program's conclusion, without having to rely on staff from the Ministry of Agriculture. The efficacy and sustainability of that approach cannot yet be determined.

### **3. Changes in Household Incomes and Livelihoods**

The RISE program introduced functional CIGs and Farmer Field Schools (FFSs); improved production techniques, pooled agricultural services, improved seed varieties, engaged in

seed multiplication, organized Village Savings and Loan Associations, and added agricultural service roads to help increase incomes, all with the aim of sustainably increasing the food security and incomes of the target population. Data suggest that the RISE consortium had moderate success raising incomes. The support provided by the program allowed participants to provide for their families, and it improved financial solidarity in participating communities.

Beneficiaries felt that the program has benefited their livelihoods in direct ways. The following are comments from Focus Group 1 (male) participants in Lukanga, North Kivu:

- *"We like SIMAMA because it has taught us so much about farming and rearing livestock, but we still need to learn more ..."*

- *"MERCY CORPS helped bring us together ... The SIMAMA project has enabled us to pay our children's school fees, and the money from the VSLA program makes us more comfortable."*

- *"MERCY CORPS gave us the bean seed, and after the harvest we're going to give this seed to other farmers so that the activity continues ..."*

As the data suggest, these agricultural inputs and semi-formalized producer groups were the key to providing participants with a foundation for increased incomes and resources. The agricultural component of the RISE program was the most successful aspect of the program despite the fact that few improvements were made to the value chain. As noted, the program did increase access to markets through the construction of extension roads, which provided once isolated populations of producers with easier access to markets in their communities and in surrounding communities.

In addition to the agricultural inputs, roads, and CIGs, the Village Savings and Loan Associations, which served as savings groups that provided access to microloans for members, were also highlighted as a critical source of capital for common household needs and income generation. Female Focus Group members in Lukanga and Rutshuru who accessed credit expressed the following:

*"Because of the VSLA my children are no longer turned away ... Now I can pay the medical fees that I couldn't afford before ..."*

*"In the VSLA group I'm managing to run a small business ... I took 15,000 FC to pay the school fees ... I borrowed 50,000 FC for petty commerce and for the school fees knowing that it had to be repaid within a certain time at a set rate of interest ..."*

*"I took 20,000 FC to pay the school fees ... I borrowed 60,000 FC and gave some to my husband for the school fees, some for household expenses and the rest for the repayments ..."*

Where the VSLAs were implemented, participants used the resources for both income generation and household needs. Overall 90% of the surveyed Mercy Corps beneficiaries felt that the program has improved their living conditions, in terms of increasing household income or allowing them to realize specific goals such as paying school fees and obtaining medical care. Note that the use of loans to pay medical fees is an ill-advised practice since it yields no returns to help repay the loan, but ensuring the health of family members can be considered a financial investment in its own right. Using loans for school fees has a similarly delayed payoff, though it is often a concrete one if a child is able to reach the minimum educational requirements for stable employment.

However, the context is so volatile and insecure in North Kivu that many of the efforts made by the program were undermined by ongoing and cyclical insecurity. This was particularly the case in 2013.

Other changes in livelihood observed by the evaluation team include food distribution programs and reforestation work. The food-for-work program provided a direct benefit to families and also yielded productive outputs for the program. Other food distribution activities, such as porridge distribution, benefited a small number of households but had no impact beyond the direct beneficiaries of EYA programs. The reforestation activities created demonstrable improvement in areas where plantings took place; this was not quantified but was observed by the evaluation team. There are also benefits to sustainability in the sense that participants practiced collective action and steps were taken to combat natural disaster.

#### **4. Changes in Nutrition Practices**

The RISE Program implemented maternal health and nutrition in targeted areas of Rutshuru and Lubero territories. Activities included awareness trainings, malnutrition detection, the ENA and IYCF programs, vegetable promotion and the use of locally available foods, and others noted above. Beneficiaries meeting certain health and nutrition criteria received enriched flour and oil in Rutshuru.<sup>3</sup>

Mothers who had taken part in nutritional training programs and who participated in focus groups in Kivumu, Rushege, and Lukanga expressed knowledge gained and behavior changes in the following areas:

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<sup>3</sup> The RISE program did not provide PM2A programming in Lubero. A clear explanation for this was never provided.

- Taking part in pre-natal consultations
- Exclusive breastfeeding to children under 6 months
- Understanding the importance of food groups to address the construction, protection, and energy categories in children’s health
- Eating vegetables
- Insisting on latrine use by family members (to avoid illness and subsequent dehydration and malnutrition)

Focus group participants who were direct beneficiaries of the health awareness activities cited the importance of vaccinations, insecticide-treated bed nets (ITNs), washing hands before meals, and giving children balanced meals. Some mothers shared that, while their knowledge has improved and they try to apply it, they do not always have the money to give their children the kind of meals they learned about (Focus Group 2, Rushege; Mother Leader, Lukanga). At least as far as knowledge, however, the evaluation team was made aware of the following general trends from before to after program exposure, based on conversations with Mother Leaders and mothers in focus groups who benefited from the health awareness trainings:

Changes in Nutritional Knowledge (and Reported Practice)	
Before	After
Women visited health clinics less frequently	Women widely expressed familiarity and use of pre-natal consultations at health clinics
Many women gave birth at home	Several women noted that they had subsequent children at the health clinic
Some women were not accustomed to giving the colostrum (first milk; yellowish in color) to their newborns	Women who took part in maternal training indicated that they breastfeed their newborns within one hour of birth to take advantage of the yellow milk
Some women expressed that they thought it was fine to move away from breast milk after three months	Women widely understand that exclusive breastfeeding is recommended up to six months
Many women had little knowledge about the importance of multiple food groups	Women expressed familiarity with constructive, protective, and energy food groups, and the importance of vegetables

Focus groups and mini-surveys revealed that the health centers frequented by project beneficiaries were also used by indirect beneficiaries and non-beneficiaries. Some degree of cascading likely contributed, though the non-beneficiaries also obtained similar knowledge through other external programs.

### **5. Changes in Gender Norms**

Concrete activities undertaken as part of the RISE program aimed at changing behaviors regarding gender norms included:

- Sexual violence training
- Awareness workshops on girls' education and the prevention of child marriage
- Discussions of male and female household roles, and opportunities for women to contribute to household decision making
- Mixed male and female information sessions on the above topics

Male and female project beneficiaries expressed awareness that gender equality can enable them to live peacefully in their homes and communities. Consistently, female focus group participants expressed that they want their daughters not to marry before 18 and to be able to take on responsible jobs (FGs in Katendere, Kivumu, Rushege, and Magheria). They view working together in the fields as a culturally appropriate example of gender equality; change is promising but likely slow amongst other tasks, such as preparing meals, doing domestic chores, and fetching water.

Men, generally, expressed acceptance that gender equality can have positive outcomes. A male-only focus group in Munoli shared the opinion that when women work, they can enrich the household and provide better lives for their children. However, the concern raised at the outset regarding socially desirable responses from male beneficiaries seemed to the evaluation team to affect responses from many males in the focus groups: they offered opinions consistent with belief in gender equality but often had little in the way of evidence or examples from their own context to support those claims. Furthermore, participants did not easily attribute those attitudes to the Mercy Corps activities: key informants noted that many other actors were conducting training and work on this issue, and Mercy Corps did not have a gender strategy at the outset of the program.

The mini-surveys corroborated result findings which showed that direct beneficiaries and non-beneficiaries who did not have contact with the program have similar perceptions of gender equality and expressed similar opinions regarding various gender roles. Over 90% of respondents from both groups said that it was wrong that only boys

were educated to the detriment of girls; 78.3% of beneficiaries and 68% of non-beneficiaries think that domestic chores should be done by women, while 90% of beneficiaries and over 85% of non-beneficiaries recognize that it is wrong to beat women for any reason. Focus group participants expressed that they received the same information about gender issues from their church and other community organizations (see female-only FG1 in Munoli and FG2 in Kivumu).

Moreover, gender-related activities in the Lubero area did not start until January 2015, and at the project's official end were still in the training stage.<sup>4</sup> Under current conditions, it is difficult to assess what progress has been made in this domain. Meanwhile, two local NGOs – LIFEPAO (League of Rural Congolese Women) and SYDIP (Union for the defense of farmers' interests) – have been working with local communities and especially their churches to raise awareness of gender issues.

## **6. Outputs of Disaster Risk Reduction Interventions**

Community Early Warning Systems (CEWS) were a centerpiece of the RISE effort to address Disaster Risk Reduction. They use a participatory approach to engage stakeholders in identifying the risks of natural disasters and implementing actions to prevent or mitigate them (such as reforestation programs to tackle soil erosion). A key informant expressed the benefits of the activity in the following way:

*- "When we have problems, we alert specialist services such as the CSPA, which works on that kind of thing. If there's a problem with a disease, then it's easy to spot...There are problems with food, and with water running through the village; we've given residents trees to deal with all that" (Fathers' leader, Katandere).*

Mini-survey results suggest that understanding of the committee's work is widespread: 95% of respondents knew that these committees were initiated by the project, and 80% stated that the community has been able to identify situations of risk and manage them through dialogue and awareness.

Members of the Community Development Committees (CDC) stressed the work they do in response planning, for example, in terms of malaria prevention, reduction of standing water, and erosion control planting hedges. The early warning systems and response planning initiatives were not frequently mentioned by agricultural focus group participants, but there are times in which the initiatives are effective but not widely

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<sup>4</sup> A meeting with Mercy Corps' partner, Catholic Relief Services, on March 9, 2016 confirmed that a gender advisor did not arrive until August 2014, at which time a gender assessment took place prior to activities beginning.

observed. For example, the evaluation team was shown an area in Bamboo Village Centre where flooding has been largely prevented through the construction of water barriers by RISE participants. Much of the actual work in early warning systems seemed to be based on the participation of volunteers associated with the program.

Key informants suggest that CEWS actions are hampered by the fact that committee members are not very representative and are not trained in planning and management. Specifically, key informants indicated to the evaluation team that traditional leaders tended to exert too much influence over committee membership, and little information was provided to community members ahead of time regarding roles, responsibilities, or the process for selection. The committees also have difficulty mobilizing resources to neutralize or pre-empt disasters, since reforestation interventions are very expensive (FBA Member, Katandere; CEWS member, Magheria). Given those challenges, it is not surprising that, in the mini-surveys, 61% of all respondents did not know whether the committees have any plans in place, and 40% of those who did know about such plans were unsure whether they are linked with national priorities and plans.

## **7. Results of Governance and Conflict Resolution Initiatives**

RISE invested substantially in creating instruments and mechanisms to improve governance and conflict management at the community level. The program sought to support governance by:

- Supporting and strengthening local associations that existed before the program;
- Setting up committees to plan and mobilize local development initiatives (LDCs); mitigate natural disasters (CEWS); encourage agricultural development (CARG, FFS); and mediate land conflicts (LDC, LC, CIG);
- Establishing VSLA groups that enable people to access land by buying, renting (sharecropping), or otherwise increasing the amount of land they cultivate.

The evaluation team observed active commitment to community groups, especially the CIGs. They include farmers working together to improve agricultural techniques, yields, transport and marketing, and they serve as an intermediate structure between the isolated farmer and the local government.

Information from stakeholders suggests that, while the concept is welcomed, challenges exist in the legitimacy of these structures due to issues with how committee members are selected and the power of village chiefs to co-opt or overrule the LDCs (Village rep, Magheria). As a result, they are not always representative and often lack transparency in the way that members are selected and benefits distributed. Many committee members are direct beneficiaries of the program (pastor and village rep, Munoli).

Regarding land access, focus group discussants indicated that this is one of the most critical local issues (see FGs in Katendere, Bambo Centre, and Kivumu). In the quote below, a beneficiary highlights how the CARG helps address local tensions related to land by creating channels to local authorities who manage land rights:

- *“Through the project, the head of the CARG in the village is working with plantation owners to see how they can help other people gain access to land. (Of course) growers need to know each other. The CARG set up committees to build a good relationship with the local authorities. Before (when there were land conflicts) people spent their money going to court but that was before we had the CARG”* (beneficiary farmer, Bambo Centre).

Focus group participants offered several examples of a CIG pooling resources to purchase land with support from the program, which could then allow them to further their economic activities. However, they noted that the group remains dependent on a clear relationship with the Government of DRC, and leaders of CARGs and LDCs noted that their existence will be tested when they must function without financial or technical support from the program (FG2, Rwabangi; FG3, Kivumu).

## **8. Sustainability of Program Interventions**

Mercy Corps worked in the territories of Lubero and Rutshuru in North Kivu. In the Lubero area, almost everyone the evaluation team spoke to in Musienene said that the SIMAMA project had only worked there for a year and that all the components were still in the test phase (agriculture, livestock rearing, micro-credits, hygiene and sanitation).<sup>5</sup> As a result, they did not feel that it had generated solid enough achievements to suggest the potential for real sustainability, especially in terms of the trainings reaching a critical mass of people.

The evaluation team noted that in Lubero, various training sessions were still underway while they were conducting the evaluation. Some of the participants in the Focus Groups in Lukanga, for example, had to leave the session to attend training courses. The direct and indirect beneficiaries whom the evaluation team met were pessimistic about the sustainability of the activities undertaken by the SIMAMA project during its operational phase. In the village of Musienene, for example, participants in FG2 made the following comments about the sustainability of Mercy Corps activities:

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<sup>5</sup> RISE representatives note that the program withdrew from the conflict areas of Rushuru in 2013 and re-opened early in 2014 in Butembo. As a result of those security challenges, the time frame for DFAP activities in Beni and Lubero was reduced to two years. This may have affected RISE effectiveness.

- *"... the project was a trial, now it needs to be perpetuated ...We're in the test phase because there are still not very many households and other seeds haven't reached their seed cycle... this project could help because it trains us. It should continue so it can help other people who haven't participated in the training. We don't know if the project is going to continue or not because not many people went to the trainings."*

Some respondents expressed concern over the ability of the projects to continue in the future. During a focus group discussion, one agricultural VSLA beneficiary said *"this project has changed many aspects of our daily lives, but it's still not enough. You have to find us another NGO to safeguard what has been achieved..."* (FG1 participant, Musienene). Mercy Corps wants the CARGs to play this role, but unfortunately the CARG in Lubero is not operational. During an interview in Lukanga, an official from the Rural Agricultural Council (RAC) told the evaluation team, *"beneficiaries find it hard to believe in the RAC. We've even said this to the No.1 in Simama and Mercy Corps. It's in the memorandum of understanding."*

Despite better program performance in the Rutshuru area, concerns about sustainability persist. During focus group discussions, men and women from the village of Katendere—beneficiaries of both the IYCF and agricultural training activities—made the following comments about the SIMAMA project interventions:

*"...Yes we believe that activities should continue and pray that they'll come back ... And we've learned a lot about avoiding malnutrition in our children... Now that we have warehouses to store our produce, we just need help finding a good market for it."*

Focus group participants in Rutshuru did say that they will support the road committee after the project leaves because it has revitalized the community. And a community leader in Bambo expressed more confidence in the project's sustainability, emphasizing that *"...activities will continue because they're useful. Our leaders will carry on educating people so that we don't go backwards."*

Regarding agricultural interventions, observations and discussions with key informants suggest that cassava and bean cultivation activities can be sustainable. Cuttings and seeds are easy to find, and beneficiaries of the project have already seen the benefits of lined seeding, so they are likely to continue the practice. Other indirect beneficiaries are likely to follow suit gradually. The sustainability of condiment crops and vegetable gardening, however, is less promising. A lack of seeds is likely to be a problem, and beneficiaries who had the opportunity to grow the crops in their fields or experimental schools were not able to keep an adequate supply of seeds for the following season. In addition, the seeds that were distributed to them through the RISE program were small in quantity.

### **C. Conclusions and Lessons Learned (see Table A3 in the Annex)**

The findings from the Mercy Corps RISE/SIMAMA program evaluation call attention to both positive and negative aspects of the program. Those strengths and weaknesses follow.

#### **Strengths**

- 1) The SBCC trainings were effective, particularly in reaching direct beneficiaries with practical demonstrations and capacity building. Areas of positive impact include the EYA and IYCF nutritional programs, agricultural techniques, and farmers' collectives. They also contributed to stated support for gender equality. This conclusion stems from the evidence that direct beneficiaries took part in the trainings (p. 13), incorporated nutrition and health learning into their own experiences (p. 17), and exploited credit opportunities to increase their incomes from agriculture (p. 14).
- 2) Community Interest Groups helped to bolster production, and participants particularly benefited from the VSLAs that they were able to access through the CIGs. Participants reported receiving loans and using them to improve production (see p. 16).
- 3) Agricultural programs increased household incomes, especially by improving storage options and thus bolstering sales. Participants reported that onion and cassava sales improved notably after storage improved (see p. 13), and they also noted gains from participation and collaboration in agricultural associations (p. 16).
- 4) Village Savings and Loan Associations serve as a critical safety net for beneficiaries, improving access to health care and offsetting the costs of crises (i.e. funerals, school fees). Respondents noted that, without access to formal banking, these opportunities for loans helped in times of need (pp. 14-15).
- 5) Agricultural service roads, upgraded through food-for-work initiatives, were critical for productivity and market access. While road construction by itself is not a sustainable activity, the food-for-work component provided several benefits: resources, skill development, and access to markets. Increased sales resulted (see p. 14).

Early warning systems and partnerships with local government have some positive impacts on disaster risk reduction and improved governance provided that the different partners work together in a transparent manner. Stakeholders have noted that plans for

developing these relationships exists, though they are not yet well known or widespread (pp. 19-20).

## **Weaknesses**

Follow-on trainings for indirect beneficiaries were weak; a real drop-off took place after the training of first-line, direct beneficiaries. Furthermore, a lack of faith that programs would continue effectively after the conclusion of the program undermined the sustainability of training programs. Participants expressed being unclear about program handover, and many potential indirect beneficiaries indicated that trainings did not extend past the first line (see pp. 13, 21)

- 1) A high level of duplication exists in the local provision of health and nutrition programs as well as gender activities (see pp. 13, 19). This is not by itself a weakness in the Mercy Corps program; beneficiaries do note a positive impact. However, Mercy Corps seems not to have taken adequate pains to determine what activities were already carried out by other actors in the area or to differentiate its health and nutrition programs.
- 2) Market access and value chain activities realized only limited success. Participants complained of adjustments and delays in the value chain activities (p. 13), which undermined their ability to couple processing and sales with production.
- 3) Programs suffered from a late start; as the report notes, and Mercy Corps staff confirmed, some trainings did not begin until January 2015 (p. 13). This is in part due to concerns over insecurity in the region, but the effectiveness of the activities—and the ability to track their effectiveness—suffered due to the fact that participants only recently became fully organized in their participation.
- 4) Communities perceive material handouts to be a central component of Mercy Corps programs. This is true of educational training materials as well as agricultural programs that distribute seeds, the livestock programs that distribute guinea pigs, and the nutritional programs that distributed flour and oil (see pp. 13, 16). There are ways to gradually phase out subsidies and handouts, and no informants or participants suggested that the distribution of material goods was not a valuable contribution in the short-term. However, the ability to perform cascade training was hampered by expectations and subsequent frustration on the part of potential second-line beneficiaries.

## **Program Effectiveness in Meeting Core Objectives**

This section draws on the evidence, strengths, and weaknesses presented above in order to evaluate the responsiveness of the Mercy Corps DFAP implementation to the core objectives of the Food For Peace initiative. Please refer to the sub-sections above for the evidence underpinning these summary comments on the Mercy Corps DFAP.

### **1. Effectiveness of Training Models and BCC**

- How well did the “training of trainers” and “cascade training” models and other modes of BCC contribute to the dissemination of information, skills, and knowledge, and with what accuracy?
  - Direct beneficiaries who were trained as part of the BCC model were in many cases overwhelmed with the responsibility of then training indirect beneficiaries. They were also hamstrung by limitations related to the material benefits available for distribution to indirect beneficiaries (and the expectations that such benefits would be forthcoming).
- What evidence exists to suggest that information, skill, and/or knowledge “spilled-over” from direct program participants to non-participants?
  - Some anecdotal evidence reported above indicates that indirect beneficiaries observed new practices of direct beneficiaries, particularly in agricultural techniques. Overall, however, the evaluation team did not obtain evidence of a strong and systematic transfer of skills and knowledge from direct beneficiaries to indirect beneficiaries.
- How did the rate/accuracy of applying the knowledge and skills change at the various levels?
  - A steep drop-off occurred from direct beneficiaries to indirect beneficiaries. Non-beneficiaries who did not have contact with the program did not benefit from spillover of knowledge and skills, but several core objectives (particularly related to nutrition and gender) are covered by other projects in the region, so some new knowledge and competencies are shared widely.

### **2. Strength of Linkages to Markets and Public Services**

- What is the current nature and strength of linkages between target beneficiaries and local market actors (e.g. increased access to inputs and credit, increased sales, etc.)?
  - The evaluation team characterizes the linkages between target beneficiaries and local market actors as adequate. Sales for many producers have increased as they have gained access to credit and

storage. Shortcomings still exist in terms of adding value at the processing stage.

- How have these changed since the projects began?
  - An important change since the project began was the construction of roads that enable producers to more easily get their goods to market. In addition, farmers have improved their stocking opportunities and are earning better prices for their goods by virtue of negotiating as a collective. These changes constitute clear improvements since the project began.
- Similarly, what is the nature and strength of linkages between targeted communities and government and non-government agriculture extension, health, and nutrition services and how they changed through the projects duration?
  - The relationship between targeted communities and government actors was helpful to both parties, particularly in terms of partnerships with the Ministry of Agriculture. Local communities received training from experts, and the Ministry benefited from village-level implementation of important agricultural programs. Concerns about sustainability exist, since government experts cannot be expected to remain with the program.

### 3. **Changes in Household Incomes and Livelihoods**

- How do beneficiaries feel the project interventions influenced household incomes and livelihoods?
  - Women beneficiaries of the VSLAs noted benefits in terms of making small investments and investing in the long-term educational opportunities of their children. Farmer beneficiaries felt that the project contributed positively to household incomes in multiple ways: VSLAs allowed them to expand their production, farmers' business associations allowed them to store crops for sale later and to establish better prices.
- Which interventions had greater or lesser influence on household incomes and livelihoods? Why?
  - VSLAs had a strong impact on livelihoods both by creating opportunities for new and better income streams and also by helping families to avert the financial impact of unforeseen circumstances. Nutritional supplements and the dissemination of rabbits and guinea pigs had less influence because the benefits were short-lived (the evaluation team did not see evidence of effective businesses starting from these livestock distributions). Plant disease control helped to improve farmers' income by

protecting more of their crops and allowing those crops to get to market. The construction of access roads had a clear positive impact on market sales.

#### 4. **Changes in Nutrition Practices**

- The three DFAPs adopted different models to improve the nutritional status of beneficiaries. What can be learned about the challenges to and effectiveness of the different methods?
  - The Mercy Corps DFAP relied heavily on awareness trainings to expose women to improved nutritional behaviors, and on nutritional supplements as reward for meeting health and nutrition standards. The strategy proved effective in improving knowledge. A remaining challenge is to couple that knowledge with strategies for accessing the healthy foods that those mothers now know they need. The nutritional supplements are valuable to direct beneficiaries of the programs and, while they may be sufficient to induce behavioral changes, they also create awareness of a need (for nutritional supplements) that may go unmet post-DFAP.
- How have parents' attitudes and practices with regard to child feeding and care changed over the past few years?
  - There is clear evidence of parents (particularly mothers) adopting new attitudes toward pre-natal care, breastfeeding, and nutritional diversity that corresponds with the program period. It is difficult to determine the extent to which the DFAP trainings are spilling over: cascade training of indirect beneficiaries was limited, and many non-beneficiaries expressed that they receive the same training and information from other sources. Regarding practices, attention to birthing and child care issues seems to have improved during the life of the program; practices that demand resources, such as providing balanced meals, have proven more difficult for families to implement.
- How do parents who have had another child since graduating from a DFAP nutrition intervention feed and care for this new child compared to previously born children?
  - Children born after their parents participated in the DFAP nutrition intervention are more likely to have been born in the health clinic, to have received pre-natal care, and to be breastfed quickly to capitalize on the initial colostrum. They are somewhat more likely to have received vaccinations for tuberculosis and yellow fever, though the standards for polio vaccination have remained strong due to other initiatives.

- How well did these mothers eat and pursue pre- and post-natal care during and after their latest pregnancies?
  - Pre-natal care in particular improved as a result of the DFAP; women who took part in the programs were more likely to take advantage of pre-natal care opportunities. The evaluation team did not observe big differences in post-natal care, aside from mothers having improved knowledge regarding breastfeeding. Consumption of diverse and healthy meals does not seem to have changed significantly since their previous pregnancies due to resource limitations, though their knowledge of what constitutes a balanced meal certainly has.

## 5. **Changes in Gender Norms**

- Since participating in DFAP interventions, how have perceptions of male and female beneficiaries changed with regard to men's and women's roles, responsibilities and opportunities in: household and community decision making, household labor and income generation, participation in community and social institutions, access to and control over household and community resources, and freedom of speech and movement?
  - It is difficult to determine the extent to which perceptions on gender norms have changed as a result of the Mercy Corps DFAP. Expressed attitudes of both women and men indicate broad support for gender equity, but the evaluation team had some concerns over potential social desirability bias in male responses. Other programs working in the areas are also promoting similar changes, so those who had no contact with the DFAP often expressed attitudes in keeping with the program objectives. Women, for their part, responded positively to messages of empowerment and shared household duties.
- What evidence shows that some interventions have been more or less effective than others in influencing the attitudes of men or women?
  - Commonly, male participants in focus groups expressed platitudes but offered fewer concrete examples of engagement with gender equality. This evidence suggests that interventions with men were less effective. Females generated and supported ideas involving shared workloads; their input suggests that the DFAP activities aimed at generating women's empowerment were more effective. Finally, evidence from the mini-surveys suggests that attitudes are broadly supportive of gender equity, but that this is true among non-beneficiaries as well as beneficiaries. The evaluation team interprets this evidence as indicating that activities on gender norms, while important in contributing to improved perceptions, are not

differentiated enough to allow for measurement of their discrete contributions to the attitudes of men and women.

- What evidence is there that these attitudes will or will not spread more widely in the community after the projects end?
  - The evidence of overlap across gender programs in the region suggests that, because similar messages were promoted by both the Mercy Corps DFAP and by other actors, those consistent messages are likely to spread widely after the project's end. Furthermore, even insincere but socially desirable perspectives, to the extent that they influenced male responses, eventually help to erode overt gender discrimination and may improve norms among younger males.

## 6. **Outputs of DRR Interventions**

- What is the quality of community and household disaster risk reduction measures and plans that were supported by the project interventions?
  - The evaluation team observed tree planting, water barriers, and drainage ditches developed as part of the Mercy Corps DFAP to reduce disasters and risks. Community planning sessions and early warning systems also addressed the need to be prepared for potential disasters, though their activities were not often observable or clearly attributable to the DFAP. The evaluation team did not observe systematic DRR measures at the household level.
- What factors have promoted or challenged the development, implementation, or quality of these plans and practices?
  - The early warning system promotes the quality of DRR planning by collecting information on at-risk areas. The selection process for members of the CEWS and CDC committees is a factor that challenged the effective implementation of DRR plans and practices. Perceiving that traditional leaders held too much influence over committee members, informants expressed that the process did not produce the most competent or representative members.

## 7. **Results of Governance and Conflict Resolution Initiatives**

- What evidence exists to suggest that DFAP governance initiatives affected land tenure, access to land, and/or conflict within communities?
  - There is little evidence to suggest that the Mercy Corps DFAP had a systematic impact on land tenure and access to land. Informants suggested that too much of the land is still controlled by the state, so few opportunities for real change exist. Widespread familiarity with the

existence of CEWS may constitute evidence that a foundation exists to mitigate conflict, though whether committees' attention to areas of risk could be enough to offset future incentives for conflict is unclear.

- Which initiatives had greater or less success and why?
  - Opportunities for community members to pool resources in order to obtain land proved to be an effective and sought-after opportunity, despite reliance on a clear relationship with the GoDRC. This worked well where residents were able to obtain land because those who farmed could keep a greater share of profits, and partners were able to share the risk as well as the reward. VSLAs were successful for similar reasons. The organization of CIGs and CARGs to bolster local governance and reduce conflicts was less successful, because community members saw favoritism and a lack of transparency in the way committee members and leaders were selected.

#### 8. **Sustainability of Program Interventions:**

- What evidence exists to suggest that the capacities, practices, behaviors, systems and linkages critical to maintaining the food security outcomes will continue after the end of the project life?
  - Focus group members expressed that they developed collective action skills working on the reforestation programs and in agricultural collectives. Food-for-work beneficiaries learned maintenance skills that will help to sustain access roads. Numerous families indicated that credit opportunities allowed them to either start businesses or invest in their children's education. Beneficiaries who worked in partnership with the seed team from the Ministry of Agriculture learned skills that they hope to be able to implement on their own.
- If so, which ones? What are the factors inhibiting the sustainability of program interventions?
  - The most promising activities in terms of sustainability include the reforestation program, which reduces risk while building collective action; the road building program, provided that community members take part in maintenance; and the VSLA opportunities for credit, provided that loans are used for investment purposes. Factors that inhibit the sustainability of programs include the need to continue paying for outside expertise (i.e. agronomists from the Ministry of Agriculture), household expenditures that eat into loans without providing clear financial returns (such as funerals and medical emergencies), and the distribution of material

benefits (supplements, animals, seeds, and training materials) that create expectations but that cannot be continued after the life of the project.

## 9. **Lessons Learned**

- What are the lessons learned from the Food for Peace portfolio design, implementation and M&E
  - A critical lesson learned is that program interventions are subject to disruption in the face of insecurity, and those disruptions can undermine the potential impact of the activities. Postponing activities altogether may in some cases be a better course of action in the context of insecurity. Another important lesson learned is that indirect beneficiaries are quick to notice the material benefits to direct beneficiaries. Cascade training methods need to take those expectations into account.
- What could have been done to better ensure results were achieved and sustained?
  - Activities in Lubero, on gender norms in particular, began too late to contribute to systematic change. Much of this was a result of security challenges, but the IP might have streamlined its effort to put a gender specialist in place earlier. Cascade training methods could bring direct beneficiaries along gradually, with practice training sessions and feedback, to ensure their capacity to train indirect beneficiaries.
- Are there innovations and methodologies that merit replication and scale up?
  - CIGs and VSLAs provided numerous benefits to beneficiaries and communities, in terms of improving livelihoods, transferring knowledge, and building collective action so that community members can sustain their activities independent of outside help. These measures merit replication.
- What measure can future programs take to increase food security and durable development in the Eastern DRC.
  - Based on the Mercy Corps program, the evaluation team would recommend cascade training methods that prioritize training of trainers, scaled up CIG and VSLA programs, nutrition and gender programs that either collaborate directly with other actors or differentiate their activities with greater participatory elements and program labeling (for M&E purposes), reforestation and road construction that incorporates Food-For-Work initiatives and maintenance training, and transparent processes for the selection of committees working on DRR and local governance. The following sub-section elaborates on these recommendations.

#### **D. Recommendations (again, see Table A3 in the Annex)**

The strengths, weaknesses, and program effectiveness of the Mercy Corps program outlined above point to a number of recommendations that the FFP office should consider when designing and implementing new programs. We elaborate on them here.

- **SBCC trainings** proved effective and should be employed in future programs, but with a clear and improved process for handing over training leadership and cascading. Those trainings were successful on a number of fronts for direct beneficiaries. However, systematic coaching that could lead to cascading benefits from direct beneficiaries down to other indirect beneficiaries did not take place as anticipated. To improve the program as it was implemented in this instance, teacher-trainings and ongoing support should be a central aspect of the beneficiary trainings. **How:** build in systematic teacher training for direct beneficiaries; devote time, training, feedback, and incentives to improving their competence in passing on knowledge; evaluate and provide feedback on early cascade training sessions conducted by the direct beneficiaries (with indirect beneficiaries as the target audience); provide similar training materials for early indirect beneficiaries and gradually move away from program-provided materials. **With whom:** direct beneficiaries of trainings, with clearly identified indirect beneficiaries as recipients and program staff as support. **Why:** improving the cascade process of training will ensure that program benefits are disseminated more widely.
- **Local interest groups and associations** should be a centerpiece of subsequent FFP efforts to generate shared resilience. They must be well-organized and capitalize on initial excitement. Participants expressed clear benefits from the collaboration, and the associations can be fully sustainable. CIGs, VSLA, and Agricultural Associations must be given administrative support to ensure long-term independence. **How:** organize common interest groups and create explicit partnerships (and regular informational sessions and meetings) between those groups and VSLAs. **With whom:** farmers and producers in particular, but also women's groups; formal financial institutions may be invited to offer assistance and collaborate with the VSLAs. **Why:** the collaboration that stemmed from CIGs and farmers associations was positive; if the techniques and opportunities that individuals learn there can be easily linked to credit opportunities, the payoffs to livelihood and food security should come more easily.
- **Nutrition programs** should focus on clear areas of differentiation, or else work in coordination with other external entities. This will require in-depth analyses prior to the implementation of new programs, as well as a willingness and flexibility to alter pre-designed plans in the face of duplication. Programs that overlap with the work of

other external actors could be sequenced in valuable ways through collaboration. Nutrition programs constitute an important and positive impact especially if attitudes are transformed into behaviors with coaching and follow-up. **How:** collaborate with other entities, such as churches and donors, working on nutrition in the area. Determine areas of overlap or specialization, so that FFP activities can be monitored and evaluated while also contributing to widespread improvements in competencies. **With whom:** program staff can play a central role in the planning stages to determine what other nutrition programs are taking place. Mother Leaders and nurses can work with program staff and serve as liaisons between the program staff and direct beneficiaries. **Why:** the nutrition programs provided clear and positive benefits in terms of attitude change, but other entities are doing the same. In order to determine the extent to which FFP resources impact local communities, efforts should be undertaken to identify the specific contributions of FFP programs.

- **Road and other value chain projects** should rely on food-for-work initiatives. This strategy will allow for short-term direct benefits to participants and longer-term gain in terms of market access. A clear timetable is also critical to the success of value chain activities, so that participants can couple their productive enterprises with processing and sales. **How:** have road infrastructure experts train beneficiaries in road maintenance during the course of the project. Provide food-for-work as remuneration for participants. Establish competency guidelines in road maintenance so that those beneficiaries who trained alongside experts are prepared to carry out the work and incorporate other indirect beneficiaries over time. **With whom:** direct beneficiaries who show promise and interest; in partnership and collaboration with engineers and other staff from the GoDRC. **Why:** a road may not seem to be a sustainable activity, but the access that roads provide to markets and the skill transfer that takes place in maintenance work can pay dividends beyond the life of a project. Tying the activity with food-for-work incentivizes participation and provides a short-term benefit that is not simply a handout.
- **Local governance, Disaster Risk Reduction, and conflict resolution** strategies must incorporate a balance of input from stakeholders and a clear plan for ongoing support. Leadership should ultimately be determined by community institutions, and the distinct incentives of government, community members, and external actors should be a centerpiece of designing cooperation strategies to mitigate risk. **How:** create a public and transparent system for selecting members to committees responsible for DRR, local governance, and conflict; draw members from different villages (if the committees are multi-village), and create quotas for important identity groups (i.e. women, minority ethnicities, etc.). At the inception of such committees, develop an action plan that can be shared with the community; include activities

such as drainage ditches and parcel demarcation that give community members a clear notion of the committees' work. **With whom:** a mix of community members, some civil servants, some community leaders, and—importantly—others nominated as strong candidates. **Why:** the perception of a lack of representation undermined trust in committees working on local governance and conflict resolution. Conducting activities early on that can be observed by the community will reinforce trust and mobilize community members to support the initiatives.

- **Programs must begin on time** and emphasize training over material handouts. Where handouts are critical to program success, we recommend phased subsidies, small seed packets, and participant-produced materials for trainings. These strategies can help to combat inflated expectations, frustration, and misconceptions about the program goals. **How:** in areas suffering from conflict, start with a small staff of specialist(s) and aim to build up the program around a few specific activities. If progress appears impossible, cancel or postpone the entire program in those areas in order to quickly avert creating expectations that cannot be met. Ensure that trainings and other programs that disseminate materials plan a round of distribution to indirect beneficiaries (from the direct beneficiaries who then train them using the cascade model); the following round of indirect beneficiaries might receive a smaller amount but might also profit from the investments in earlier beneficiaries (i.e. as their plants and animals grow/multiply). **With whom:** starting with direct beneficiaries and program staff, then incorporating rounds of indirect beneficiaries; maintaining oversight from program staff until direct beneficiaries are comfortable as trainers. **Why:** dissemination of material benefits is sensitive—the short-term benefits are important, but as participants come to expect them, expectations can undermine the sustainability of the program.

### III. SOUTH KIVU: ADRA DFAP

#### A. Summary of Program Objectives

The objective of the Jenga Jamaa II program was to reduce long-term food insecurity among vulnerable families in the Fizi, Uvira and Kalehe areas of South Kivu. The program was structured around four key strategic objectives:

**Improve vulnerable producers' incomes** by increasing, diversifying, and selling their output. Improving productivity and diversifying production required the adoption of new practices, access to credit, irrigation, and drainage. These goals were addressed through five specific activities: training in farmer field schools, distributing inputs such as seeds and plants, promoting technologies, seed multiplication, and developing irrigation and drainage infrastructures. In addition, sales of agricultural produce depend on access

to markets and good quality produce, which were facilitated by the following activities: training in commercial agriculture, strengthening value chains by improving processing, improving harvesting and post-harvest techniques, and developing storage infrastructures.

**Improve the health and nutritional status of children under 5-years-old** by improving maternal health, child nutrition, and the management of childhood illnesses. The four principal activities related to maternal health are distributing rations for pregnant and breastfeeding women, promoting trained agricultural support groups, training committees, and distributing micronutrient supplements (iron). The four activities to improve child nutrition include support groups for mothers, cooking demonstrations, distributing rations for children under 2-years-old, and training health workers. To improve management of child illnesses, the program's key activities are training support groups, hygiene practice demonstrations (handwashing), rehabilitating infrastructures such as roads and water sources, and constructing latrines.

**Strengthen women's socio-economic status** by improving their control over household resources, reducing violence against women, and increasing their participation in the community. To improve control over resources, the project undertook the following activities: training for savings groups and capacity building, distributing inputs, and improving access to veterinary services. To reduce violence against women, activities included training listening groups, training community development committees (CDCs), mapping protection structures, and planning prevention and protection activities. Women's participation in the community was addressed through information and literacy training, reducing workloads through collaboration and streamlined domestic work, and training sessions to promote different kinds of produce.

**Strengthen community resilience to shocks** by improving local responses to natural disasters. This goal was to be addressed through: 1) better natural resource management, training, setting up nurseries, and distributing plants; 2) improving local governance by training CDCs, producer groups, and agricultural planning. Setting up governance structures (CDCs, producer groups, and support groups) facilitates cross-cutting planning, coordination between program actors, and a long-term vision to reduce food insecurity among vulnerable families.

## **B. Findings**

### **1. Effectiveness of Training Models**

ADRA organized a complex set of SBCC capacity-building activities for beneficiaries and targeted members of the different committees that were created by the program.

Several themes were covered: health (nutrition, hygiene, and family planning), leadership, agriculture, trade, credit, value chains, gender and literacy training. Specific trainings included:

- Training for farmers and producers to get their products to market
- Training health workers in sanitation and infant and young child feeding
- Training support groups for mothers to address child nutrition and illness
- Training in farmer field schools to promote exposure to seed varieties, awareness of crop diseases, and use of agricultural technologies
- Training agents to teach literacy and numeracy through content-based learning

The village literacy training sessions were held over several years (2011 to 2015). Most of the 25 participants attained literacy and numeracy by the end of the training. Participants expressed great satisfaction: *"I never believed that I'd have a hope of learning to read and write at my age, but ADRA opened my eyes..."* (65-year-old FG participant in Hongero). The evaluation team noted through focus groups in Hongero that the beneficiaries' level of knowledge improved in several areas, particularly, governance, agriculture and maternal/infant health; they spoke comfortably of best practices in the focus group discussions. These gains were a function of content-based learning, whereby trainers taught literacy skills using content applicable to the DFAP strategic objectives. The literacy trainings and the spread of practical knowledge were bolstered with educational materials (booklets with illustrations accompanying the text) that covered these topics.

However, the fact that only one cohort was trained over a five-year period was frustrating to non-beneficiaries. In a focus group in Kasheke that included potential indirect beneficiaries, participants shared frustration over not being included.

Regarding trainings in health and nutrition, mothers who took part in focus groups in Munene, Kahama, Nundu, and Rutemba said that they learned to prioritize a number of behaviors: to routinely give birth at the health center, to breastfeed exclusively until their babies are 6-months-old, to wash their hands at critical times, to take their children to the health center if they have a fever, and to give their children supplementary feeds from 7 months onwards. Direct beneficiaries who took part in the IYCF trainings comfortably cited these behaviors in the focus groups.

Evidence and feedback pertaining to agricultural trainings (FFS and agricultural processing) were overwhelmingly positive. Focus group participants broadly shared the view that they feel more comfortable dedicating effort to producing condiment and

garden varieties in addition to staple crops. However, participants did not offer feedback (either positive or negative) regarding the success of new agricultural technologies and methods.

Regarding the cascading method of training indirect beneficiaries, the mini-survey results indicate that 94.4% of beneficiaries had training access, compared with only 22.9% of indirect beneficiaries, across the different types of ADRA trainings.

## **2. Links to Markets and Public Services**

As noted above, specific activities aimed at strengthening links to markets and public services included training of farmers in Farmer Field Schools and workshops with producers to develop strategies for getting products to market. Solidarity Credit Unions (SCUs) and Village Savings and Loan Associations also aimed to improve opportunities for direct beneficiaries, particularly women, to get products to market.

Beneficiaries who took part in focus group discussions in all project health zones in the ADRA/South Kivu area expressed satisfaction with the program, including training, new plants/seed varieties, storage opportunities, reforestation activities, marketing activities, and local collaboration efforts, particularly in terms of generating new streams of income from improved access to markets. For example, from Focus Group 2 in Munene:

- *"... I took \$60 in 2015 to invest in trade with my wife and I've already repaid it"*

- *"...In 2013 I borrowed money to buy a field where I'd planted some trees, and now I'm using them to build my house"*

*... we started our scheme in 2012 with \$100 and now we have \$450. We borrow money and pay it back with 2,000FC interest"*

*... I took \$20 and started a business selling dried fish. When I repaid this loan I had enough to carry on trading and pay my children's school fees..."*

Interviews with beneficiaries show that they are active participants in the value chain, processing agricultural products and making finished items such as bread and soap, which women make and sell in local and regional markets. Women's SCUs and VSLAs were also cited as helpful in strengthening production, processing, and market access. One woman told us *"...I use the money I made selling my produce to buy flour and palm oil for bread. I also make and sell soap and fritters."* (FG 1, Kahama).

In January 2015, ADRA started a campaign to collect farm produce grown by Jenga Jamaa II beneficiaries in several villages. Producers were shown how to store, process and sell their finished products. The project set up two processing plants with a rice

husker and a mill to grind cassava into flour or semolina. These two machines are still at the experimental stage.

Jenga Jamaa II project activities have also consolidated links with certain State and private structures. Project beneficiaries report using the health centers more often (FG2, Munene; FG2 Katongo), and at the community level a number of development-related associations have been set up (FFS, CIG, VSLA, SCU, CDC, VAA). Key informants indicate that these associations are contributing positively to the community development dynamic (Group leader, Muhongoza; CDC President, Kagando). The project collaborated with the provincial department of the Ministry of Agriculture, which made its agronomists available to the project and agreed that the provincial services would support the VSLA's capacities so that it can become an agricultural savings and credit cooperative.

A challenge that arises, however, is that the agronomists from the GoDRC worked closely with ADRA and were compensated for that work. It is difficult to imagine the same kind of sustained collaboration after Jenga Jamaa II if the credit associations are not able to provide remuneration themselves to the agronomists.

### **3. Changes in Household Incomes and Livelihoods**

Specific Jenga Jamaa II activities aimed at improving incomes and livelihoods included the Farmer Field Schools, which promoted diversifying agricultural products and preventing crop diseases so that more produce could make it to market; the savings and loan groups, which promoted access to credit for women in particular; the irrigation and drainage activities, which aimed to protect crops again so that a larger share of produce could make it to market; and the development of storage infrastructures; which aimed to spread agricultural sales over a greater period to avoid a glut in the market that would depress prices.

Overall, 77% of project beneficiaries and nearly 26% of non-beneficiaries who took part in the mini-surveys said that their living conditions had improved. Concretely, this was due to credit programs, activities to fight and prevent plant diseases, and crop storage innovations in particular. The qualitative data supported these findings; one project beneficiary in Kagando shared an experience that was echoed by the group:

- *"... we had very little money before Jenga came, we grew crops but didn't produce very much, and certainly not enough to cover our household needs.... Before the project came I used plants for my family's health care, and I lost my entire crop several times because the cassava was attacked by insects. My production has increased since ADRA came because I*

*use products to protect my crops from insects, and I make enough money selling my produce to meet my family's needs."*

Focus group discussants provided similar information in the village of Muhongoza, where several beneficiaries reported that their living conditions had improved. The following testimonies are from a mixed focus group of project beneficiaries in Muhongoza:

- *"... I can easily pay for healthcare and sometimes buy other seed, and I'm educating my children now."*

- *"I can cover my household's healthcare and buy good food thanks to ADRA ..."*

- *"... now I can buy clothes and I also run a small business. The Jenga project taught us how to be autonomous... "*

- *"We learned how to save and because of that I've been able to build a metal house."*

Some shortcomings in livelihood improvement were apparent to the evaluation team. First, data from household observations showed that while livelihoods improved for some respondents, others in very close proximity had not seen similar improvements in their living conditions. This appeared to be a result of the targeted nature of livelihood improvement programs; they serve those invited to take part, but it is much more difficult to engender spillover when much of the benefit comes from access to loans and crop storage. Furthermore, other agencies are involved in similar programs in Fizi, Uvira, and Kalehe, and focus group discussions with beneficiaries and non-beneficiaries both indicated that they were often unclear about the actors behind specific program activities (see FG1, Kahama; FG2 Kahama). Finally, the impact from credit programs was tangible and almost immediate, whereas the impact from protecting and storing crops comes only after a season or more. For that reason, many focus group participants expressed greater satisfaction with the former, even if the long-term economic benefits from the latter are equally appealing.

#### **4. Changes in Nutrition Practices**

During the period of Jenga Jamaa II, ADRA implemented the following activities and trainings related to nutrition and health:

- Vaccinations for young children
- Family planning (contraception, child spacing)
- Pre- and post-natal consultations
- Training in exclusive breastfeeding for children under 6 months and in exploiting colostrum milk at birth

- Nutritional recommendations for children under 5 and for pregnant women
- Promotion and assistance of childbirths at local health centers
- Handwashing, latrine use, and disposal practices for trash

On the whole, parents recognize that there is a difference between the health of their children who were born before and after the project started, and that there are several reasons for this. Many mothers (beneficiaries and some indirect beneficiaries, based on commentary from focus groups) followed the educational talks on nutrition for pregnant and breastfeeding women given by service providers at the health center and by RECOs or Mother Leaders in the community (FG1, Kasheke; FG2, Kagunga; FG2, Munene). Some of the key messages that numerous direct beneficiaries mentioned in focus groups include care for fevers at health clinics, spacing births, childbirth at health centers, use of mosquito nets, and exclusive breastfeeding for newborns.

Mothers in Kagunga and Munene reported that their children born during the project tended to weigh more than those born before it started. Parents also said that their children fall ill less often than they did before the project because they have a good diet and most of them are vaccinated and they are also monitored during PSCs. Before the project, most women gave birth at home, only heard about vaccinations during mass campaigns (national or local vaccination days), and had little awareness of the importance of key food categories for children's health, i.e. dairy, protein, vegetables (see FG1, Kasheke). These reported outcomes could not be verified by the evaluation team, so there is some risk that social desirability bias affected the responses. However, the change in behaviors was confirmed by a Mother Leader in Kahama and a nurse key informant in Muhongoza; they noted that mothers of newborns consciously sought to implement new behaviors regarding feeding and pre- and post-natal care.

Key informants noted that the use of insecticide-treated bed nets (ITNs) has improved in beneficiary communities (see nurse informant, Muhongoza; Mother Leader, Nundu). They also said that there has been a noticeable reduction in malnutrition in their villages. The few cases that do arise are immediately dealt with at the health center.

## **5. Changes in Gender Norms**

The evaluation team observed evidence (through ADRA reports, key informants, and focus groups) of the following concrete activities associated with the Jenga Jamaa II program:

- Female literacy programs
- Discussion groups on the role of men and women in the household
- Awareness programs on educating young girls and preventing child marriage

- Workshops on female inheritance options
- Workshops on female participation in household decision making
- Awareness training on sexual and domestic violence
- Mother Leaders conducted awareness meetings with couples, religious leaders, and village leaders on improving gender norms

In focus group discussions, both men and women expressed that gender awareness can create a healthy environment in the home and improve social relations between men and women (see FGs in Rutemba, Kasheke, and Biriba). Several men said that they should play a complementary rather than a dominant role. Corroborating those expressions of gender equity in the qualitative data, mini-survey results show that over 95% of respondents are in favor of girls being educated, and over 80% are willing to discuss how many children they want to have with their spouse. In an all-female focus group discussion in Rutemba, participants tied this to the effects of the Jenga II program: **“the program is helping us to recognize the importance of educating our young girls.”** (see FG1, Rutemba).

However, the survey also showed that only just over half of respondents (52%) think that domestic chores can be done by members of either sex, and 38% think that household chores are the exclusive domain of women and girls. This includes both men and women; women were more supportive of the idea than men. No significant difference appeared in the responses of beneficiaries and potential indirect beneficiaries or those who had no contact with the program.

Women contribute to household finances through income-generating activities (making bread, soap and fritters, drying fish), and also participate in decision-making at the community level. The mother leader in Kagunga linked those income generating activities to specific women in the community. She also noted that, when there is a problem at the village level, the village chief calls everyone together; and some women have been elected as the heads of their street. This observation was confirmed during group discussions: *“I’m the (female) head of the street. I was elected by members of the village, there were men and women there on the day of the vote. Women are starting to be appointed to responsible positions”* (beneficiary WEG, village of Rutemba). However, the evaluation team noted that the perspectives of these women may not be identical to other non-leaders in the community. Women focus group participants in several project sites did express, however, that they participate in decisions about the management of local and community resources (see FG1, Kagunga; FG1, Rutemba; FG2, Munene).

Women described strong satisfaction with the literacy programs (FG data in Kagunga, Nundu, Kahama, Munene, Biriba). There was tension on the part of some men due to the perceived emphasis on female beneficiaries in the program (see FG2, Kasheke), but this does not take away from the success of the program in reaching women. Furthermore, the ADRA interventions stand to reach a broader audience over time as a result of the multiple channels used to convey awareness regarding gender norms (mother leaders, churches, care providers, and community stakeholders). The literacy programs would need to be expanded to have the same kind of broad influence as the gender programs; the literacy programs appeared to cultivate a depth of learning, whereas the gender programs that exploited multiple channels seemed to cultivate a breadth of learning.

## **6. Outputs of Disaster Risk Reduction Interventions**

The Jenga Jamaa II project started its interventions on disaster risk reduction by training local people on this issue. Specific activities included:

- Establishing nurseries and distributing plants that help guard against erosion
- Setting up natural resource management committees
- Training community members in erosion prevention techniques
- Training community members in recognizing early signs of crop disease
- Creating drainage spaces

Nearly 65% of respondents said that their community had identified and discussed potential disasters that could affect the community during the program period—including drought, flooding, and erosion—and that they had discussed or initiated steps to resolve those threats (such as building barriers around low-land areas close to residence and creating drainage spaces). However, it was not clear to residents whether the Jenga II project or another actor had supported those proposed initiatives.

Discussions with local people in focus groups confirmed that the Jenga Jamaa II project actively addressed disaster risk reduction in the villages where it intervenes, tackling a range of risks relating to agriculture (diseases that affect bananas, cassava and other crops) and the environment (see FG discussions in Kagando, Kasheke, Katudu, and Munene). The project also collaborated with the national institute for agronomic research (INERA), which provided improved seed and assistance with scientific research on plant diseases and disease-resistant crops (committee leader, Biriba).

A key informant who is a clergyman in the village of Muhongoza (Kalehe area) reported that the project had helped reduce water-borne diseases by digging a well for drinking

water (through World Vision), and had provided information about nature conservation. *"They taught us why we need to plant trees... They gave us trees to plant along roadsides and on slopes to help prevent erosion ... Committees also undertake different activities with the support of associations to identify risks and deforestation ..."* Jenga II also created Community Early Warning Systems to coordinate the energy and efforts of community members around disaster risk reduction. However, key informants lamented a lack of training and poor capacity to mobilize resources that would ensure more widespread protection against erosion and flooding (Committee President, Kasheke; CDC member, Muhongoza). This particular informant noted that, for erosion-prevention efforts to be successful, trees must be planted widely and systematically; his impression was that program resources were not sufficient to provide a requisite number of trees. Reforestation coverage seemed to the evaluation team to vary fairly extensively from village to village; Muhongoza indeed appeared not to have extensive coverage, whereas Kagunga had widespread tree plantings. That observation was not quantified, and numerous idiosyncratic factors could explain the differences.

## **7. Results of Governance and Conflict Resolution Initiatives**

In South Kivu, the ADRA program did not focus as explicitly on governance and conflict resolution as did the other IPs in their respective regions. For example, collaboration with local governance focused primarily on building resilience against natural disasters. ADRA nevertheless undertook some specific activities to fortify local governance and conflict resolution. Informants reported implementation of the following activities:

- Training of Community Development Committees (CDCs) to liaise with local government and facilitate village level planning
- SBCC leadership training activities aimed at developing communication and decision-making skills and transferring those skills to indirect beneficiaries
- Listening groups and CDCs to raise awareness over and reduce violence against women
- Committees to organize and formalize land use rights

Discussions with local beneficiaries indicated that several different local governance structures and CDCs exist. Some were in place before the Jenga Jamaa II project, while others were created or strengthened to address village planning (FG1, Kasheke; FG1, Biriba). In the mini-surveys, when respondents were asked what they thought about the quality of governance by their respective structures, about 61% of respondents said that they thought their towns were well governed. Data from respondents across the Jenga Jamaa II project suggest that about half of the villages in the project zone have development committees that address administrative issues, and about one-quarter

have committees to deal with land matters. However, many respondents said that the villages with the most land and agricultural conflicts have the fewest committees to deal with them, because the local population is dispersed (FG2, Nundu; FG2, Runingu; FG1, Munene).

Interviewees said that limited space for agricultural activities is a problem in these areas, even in places where the population is dispersed (see FG1, Munene; Coop President, Biriba). Much of the land is owned by the middle classes and politicians, who temporarily rent it out to local producers, but often on a limited basis or at rates that make profitability a challenge for small-scale farmers. Focus group discussants in Muhongoza also noted that many conflicts between local people revolve around internal family disputes over inheritance or violations of inherited property rights. The village chief is usually called upon to resolve these disputes, and if this is not possible the matter is taken to court. This was confirmed during a group interview with women from Muhongoza (FG1), who told us “... *when there is a social conflict we consult the chief, who refers the case to associations or the church... if it still can't be resolved the protagonists go to court.*” This seems to suggest limited effectiveness from CDCs aiming to address land rights and conflict.

Although mediation is often unsuccessful, other civil society organizations work alongside ADRA in the region to promote land use rights, some focusing more explicitly on conflict resolution and peaceful mediation through committees. Based on mini-survey data, the evaluation found that 74% of survey respondents reported having conflict management committees in their village. Furthermore, key informants reported close collaboration between the ADRA project, local NGOs and the local authorities, particularly customary bodies and community-based associations, with respect to village planning and land use rights. They noted, however, that community associations do not often select members from across the spectrum of village interests (FG2, Kahama; FG2 Rutemba).

## **8. Sustainability of Program Interventions**

Key intervention areas where ADRA programs stood to generate sustainable outcomes include technical support for value chain activities, savings and loan associations that could foster the development of new businesses, the development of codes and ordinances related to agricultural and livestock care, formalized collaboration with local government structures, and the nutrition and hygiene trainings (provided that beneficiaries transfer knowledge to family members and indirect beneficiaries).

The project provided funding and a large amount of technical support for processing facilities and IGAs in order to build and strengthen value chains in its intervention area.

At the time of the evaluation, these facilities and IGAs were still not financially or technically autonomous. A beneficiary key informant in Kasheke noted that the viability of new IGAs is limited by the high interest rates charged by savings and credit associations, difficulties in accessing credit and making repayments, and the lack of written contracts. Focus group participants in Kahama and Rutemba confirmed that interest rates can in some cases approach 20% (FG2, Kahama; FG2, Rutemba). In the mini-surveys, 63% of respondents said they thought access to credit had improved, but only 21% had had direct access to credit. Key informants involved in the CSPAs indicated that they lack institutional organization. These limitations can affect the sustainability of value chain and income generation activities.

Despite these challenges, participants in focus groups expressed the hope that activities will provide sustainable outcomes, because the project has strengthened their competence in agriculture, value chains, health, nutrition and gender (FGs in Rutemba, Katudu, Kasheke). To cite other concrete examples:

1- In the town of Hongero: Three texts on Wiltz banana disease, on roaming animals, and on cassava mosaic were written by the CDC and ratified by the administration of the territory. These texts specify practices to be followed and penalties for violations, making it hopeful that the written guidelines will bolster sustainability.

2- In the town of Hongero: The Agricultural Committee received training from World Vision (an ADRA partner) and then became a registered association; this farmers' association stands a strong chance of sustainable collective action by virtue of its official status.

3- In the village of Biriba: CIGs were working on land disputes with the government, traditional leaders, the prosecutor, and judges on conflict resolution. Sustainable land investments for CIG members are limited because the state owns much of the nearby land, but the cooperation that the CIGs have established with government partners suggests that the group will maintain an active voice.

4- In the village of Biriba: The VSLA issued loans to members and currently no loans are in default (according to a focus group participant and member of the VSLA). The oversight that the association provides to borrowers increases the chances of repayment, which in turn generates interest income and allows the program to achieve sustainability.

Overall, Jenga Jamaa II activities on health and nutrition, the VSLAs, and the CDC work offer the promise of sustainability because, in each case, a clear process for reporting,

accounting, and institutionalization exists. Processing and value chain activities do not at this point appear sustainable due to the technical difficulties that have undermined profitability.

### **C. Conclusions and Lessons Learned (see Table A4 in the Annex)**

Data outlined above from focus groups, key informants, and mini-surveys leads to a number of conclusions, both positive and negative, regarding the Jenga Jamaa II project:

#### **Strengths**

- 1) Literacy trainings were effective in reaching direct beneficiaries. Participants expressed satisfaction with obtaining new literacy and numeracy skills, and they spoke with fluency regarding best practices in nutrition, health, and other topics as a result of the content of the literacy training (see p. 34 above).
- 2) Village Savings and Loan Associations were helpful in supporting new business endeavors, such as fish drying, bread-making, and soap-making (pp. 36-37). Women were particular beneficiaries of savings and loan programs and of literacy programs (p. 40).
- 3) Farmers Business Associations and Farmer Field Schools, along with agricultural transformation materials, were critical in helping producers to improve their production, storage, pricing, and access to markets (p. 36). Small producers reported taking advantage of the help that FBAs provided in monitoring prices and fostering collaboration (p. 36)
- 4) Women were empowered through literacy programs, women's empowerment groups, and health and nutrition trainings. Communication on gender issues resulted in recognition of the importance of gender equity, particularly in terms of family planning and the importance of girls' education (p. 40).
- 5) Farmer Field Schools were effective in spreading information about plant diseases, particularly Banana wilt and mosaic disease. Farmers expressed that they adopted changes and those changes led directly to improvements in crop viability and in the profits that those farmers were able to earn in the market (p. 37).

#### **Weaknesses**

- 1) Literacy trainings were limited and did not spill over to non-beneficiaries. Village residents expressed frustration that they could not participate in the trainings (see p. 35 above).

- 2) While gender initiatives contributed importantly to creating new income opportunities for women and improving the acceptability of girls' education, the program was less successful at transforming norms regarding the responsibilities of men and women and the decision-making opportunities that women can take on (p. 40).
- 3) Community development committees were limited in their effectiveness by a lack of community-wide representation. Participants expressed uncertainty about how members were selected, especially in multi-village CDCs, and efforts to formalize land rights and mitigate land conflict were undermined by the lack of control that local individuals possess over land (pp. 42-43).
- 4) Interest rates were often too high to allow VSLAs to be fully exploited by project beneficiaries. Repayment challenges undermined the value of some investments, and an unexpectedly large share of potential beneficiaries forewent the opportunity to take on loans for investment purposes as a result of the interest rates, as well as some disorganization at the institutional level (p. 43).

### **Program Effectiveness in Meeting Core Objectives**

This section considers the effectiveness of the ADRA program with respect to the sub-questions associated with each core component in the evaluation Scope of Work. It draws on the evidence, strengths, and weaknesses presented above. Please refer to the sub-sections above for the evidence underpinning these summary comments on the ADRA DFAP.

#### **1. Effectiveness of Training Models and BCC**

- How well did the "training of trainers" and "cascade training" models and other modes of BCC contribute to the dissemination of information, skills, and knowledge, and with what accuracy?
  - The training of trainers and cascade model of training were not sufficiently effective. Educational material bolstered the spread of knowledge in some of the training programs, but the training of just one cohort during the five-year period limited the pool of first-line beneficiaries who might then have transmitted knowledge and skills to indirect beneficiaries. The evaluation team heard and observed little regarding the transfer of skills to indirect beneficiaries, and little systematic effort was undertaken to build a broader community of informed and trained community members.
- What evidence exists to suggest that information, skill, and/or knowledge "spilled-over" from direct program participants to non-participants?

- Spillover to non-participants came largely in the form of household members who benefited from the loans taken by a direct beneficiary family member. This is particularly the case with respect to educational opportunities and improved resources from new small businesses. Outside of the household, the evaluation team did not see evidence that spillover to non-participants was taking place. The limited number of direct beneficiaries trained in the program subsequently limited the number of non-participants who might have been exposed to program benefits indirectly.
- How did the rate/accuracy of applying the knowledge and skills change at the various levels?
  - Like the Mercy Corps DFAP, a steep drop-off was evident in the acquisition of program skills and knowledge from the direct beneficiaries to potential indirect beneficiaries. Evaluating the question instead by population sub-groups, the application of new skills and knowledge was particularly strong for women beneficiaries in the ADRA program. They took what appeared to be better advantage of credit programs to start small businesses, and their progress in literacy programs also stood out in comparison to their male counterparts. Young women with newborn children made noteworthy progress in terms of nutrition and health knowledge.

## **2. Strength of Linkages to Markets and Public Services**

- What is the current nature and strength of linkages between target beneficiaries and local market actors (e.g. increased access to inputs and credit, increased sales, etc.)?
  - The nature of links between beneficiaries and local market actors centered largely on improving the ability of farmers to organize and take advantage of market opportunities. ADRA program activities stressed storage improvement, collaboration between farmers and producers, and creating access to loans for agricultural investment that would result in better market returns. The program focused less on physical access to markets (in terms of roads and networks). Efforts to stimulate the production of new products for sale in markets, including soap and bread, were especially effective for women, largely as a result of village savings and loan associations.

- How have these changed since the projects began?
  - The commentary cited above from direct beneficiaries who used loans to generate new businesses and produce materials for market came at the conclusion of the project; all of those activities took time to establish. The same is true of the collaboration that evolved in the Farmer Field Schools and farmers' associations. The evaluation team understood from participants that the notion of "eventually" should be assigned to their progress in value chain and market activities. By the end of the five-year period, however, numerous direct beneficiaries had gone from no business activity to profitable enterprises, or from small-scale agricultural output to consistent returns.
  
- Similarly, what is the nature and strength of linkages between targeted communities and government and non-government agriculture extension, health, and nutrition services and how they changed through the project's duration?
  - Linkages with the Government of DRC were critical to the success of agricultural improvement programs, particularly in terms of the collaboration between Ministry of Agriculture agronomists and farmers' associations seeking to improve their produce. Those relationships were strong and productive, though it remained unclear at the conclusion of the project how those collaborations might continue. Informants also noted the DFAP-related committees collaborated successfully with other local partners and NGOs regarding land use rights. Those linkages may be beneficial to agricultural extension in the long-term. Nurses working with Mother Leaders contributed effectively to the spread of health and nutrition information.

### 3. **Changes in Household Incomes and Livelihoods**

- How do beneficiaries feel the project interventions influenced household incomes and livelihoods?
  - Beneficiaries expressed tangible returns to household income as a result of certain ADRA activities. In particular, credit opportunities were cited as providing real returns in relatively short time spans. Farmers also expressed that efforts to fight plant diseases made an important impact on their ability to profit from cassava and crops by keeping a larger share of their produce healthy, and improved storage opportunities also yielded better returns, though these agricultural benefits typically appeared only after a year or more. In general, the positive impact of program interventions on income generation seemed to come in removing some of the uncertainty that individuals face in vulnerable environments. It should

be noted that the successful income-generating interventions tended to target individuals (i.e. women, farmers) with little potential for spillover. As a result, potential indirect beneficiaries living in close proximity to those households saw the impact but could not themselves take advantage of the interventions.

- Which interventions had greater or lesser influence on household incomes and livelihoods? Why?
  - The VSLAs and the interventions that allowed farmers to keep their crops healthy and stored safely had stronger impacts on household incomes, because the benefits were clearly targeted to individuals and typically materialized within a year. Beneficiaries did not describe notable impacts from the drainage activities, irrigation, or diversifying of crops, all of which should generate improved returns to agriculture. Those interventions may have appeared less successful to participants because the process from intervention to household income improvement takes longer to materialize.

#### 4. **Changes in Nutrition Practices**

- The three DFAPs adopted different models to improve the nutritional status of beneficiaries. What can be learned about the challenges to, and effectiveness of the different methods?
  - The ADRA DFAP placed a particular emphasis on non-food related practices to enhance the health of beneficiaries. These strategies proved to be effective, perhaps because the benefits are easy to recognize and the implementation costs for families are low (especially if latrine and net costs are borne by the program). This included the promotion of mosquito nets, handwashing, and latrine use. Food-related nutritional trainings were also a feature of Jenga Jamaa II. Finally, the ADRA program included a component on family planning, which was not a part of the Mercy Corps program. Lessons in spacing of childbirths seemed particularly effective.
- How have parents' attitudes and practices with regard to child feeding and care changed over the past few years?
  - The evidence indicated that parents have placed an emphasis on providing multiple meals to children over the last few years, and that mothers are increasingly making sure to feed colostrum to their newborns. In fact, these messages seem to be broadly understood in the region, in part due to the DFAP, in part due to DFAP spillover, and in part due to other programs operating in the area.

- How do parents who have had another child since graduating from a DFAP nutrition intervention feed and care for this new child compared to previously born children?
  - The sample size of mothers who had a child in the late stages of the program (so as to profit from the full training), who already had previous children, and who took part in the evaluation focus groups was limited, but those women did express a clear change in their use of health clinics for pre- and post-natal care. It was not uncommon for a woman to note that she gave birth to her first child in the home but she subsequently went to the health clinic to give birth.
- How well did these mothers eat and pursue pre- and post-natal care during and after their latest pregnancies?
  - The evaluation team did not see a lot of evidence that mothers themselves were changing their diets much as a result of the DFAP nutrition trainings. In focus groups, conversations with Mother Leaders, and discussions with community leaders, the emphasis seemed to be much more on the nutrition of the children as opposed to the mothers, even during pregnancy. On the other hand, expecting mothers did make much more extensive use of health clinics both before and after childbirth.

## 5. **Changes in Gender Norms**

- Since participating in DFAP interventions, how have perceptions of male and female beneficiaries changed with regard to men's and women's roles, responsibilities and opportunities in: household and community decision making, household labor and income generation, participation in community and social institutions, access to and control over household and community resources, and freedom of speech and movement?
  - Perceptions of household roles did not change notably as a result of the DFAP program. While evidence suggests important change in terms of the educational opportunities afforded to girls and the prevention of child marriage, the dynamic within married couples appeared to be much more rigid and harder to change.
- What evidence shows that some interventions have been more or less effective than others in influencing the attitudes of men or women?
  - Discussions with focus group members indicated that opportunities to obtain credit were especially effective in empowering women. In all villages that the evaluation team visited in South Kivu, women took part in focus groups who had personally taken advantage of credit opportunities,

not just to meet important needs but to make investments in activities (like bread making and soap making) that could return profits. Interventions addressing opportunities for girls, including education and resistance to child marriage, were also particularly effective. Literacy trainings were not widespread but had important impacts on the women who took part. Interventions aimed at adding flexibility to the division of household labor and responsibilities were less effective. Program beneficiaries, men in particular, were more resistant to these interventions.

- What evidence is there that these attitudes will or will not spread more widely in the community after the projects end?
  - The fact that in each village women who had gained access to credit were making investments and generating profits indicates that, to the extent that VSLAs can continue without program oversight, the benefits of access to credit should continue to spread after the project ends. Messages regarding opportunities for girls are also likely to spread more widely in the community after the project's end, because norms seem to be changing and even husbands who wish for their wives to maintain conventional roles and responsibilities can nevertheless see the benefits of empowering their female children.

## 6. **Outputs of DRR Interventions**

- What is the quality of community and household disaster risk reduction measures and plans that were supported by the project interventions?
  - The evaluation team observed that the community outreach of the Jenga Jamaa II program was strong and effective in terms of spreading information about disaster risk and reduction. Most people knew of plans and activities that were taking place to prevent erosion and floods, and activities such as tree planting were thorough (if variable across different villages). There was less evidence of DRR initiatives being implemented at the household level; the evaluation team observed that people seemed supportive of the importance of such initiatives in the community but had a harder time recognizing the payoffs within the household (since time and resources for such activities would have to be drawn away from some other household choice).
- What factors have promoted or challenged the development, implementation, or quality of these plans and practices?
  - Two things have promoted the effectiveness of the Jenga Jamaa II DRR interventions. First, the collaboration with state-level agronomists proved

to be an important boost to program initiatives, especially with respect to addressing plant diseases. Second, information on strategies for avoiding crop diseases and drainage problems was disseminated effectively. This helps both with implementation and sustainability. Conversely, there was little clear indication to community members that the DRR initiatives were part of the Food For Peace program. This does not necessarily change the effectiveness of the programs, but support for future FFP activities could be stronger if the precedent of these activities were clearly linked to ADRA, FFP, and USAID.

## 7. **Results of Governance and Conflict Resolution Initiatives**

- What evidence exists to suggest that DFAP governance initiatives affected land tenure, access to land, and/or conflict within communities?
  - Discussions with key informants and focus groups, and data from the mini-surveys, all indicated that DFAP initiatives to improve local governance and reduce conflict were fairly widely known. Their actual impact on land use rights and conflict seems to have been fairly limited, in large part because they ended up being superseded by chiefs and traditional structures, but communities also expressed in large part that their villages were well-governed, which perhaps mitigated some of the need for CDCs and other program activities to push hard on land and conflict issues.
- Which initiatives had greater or less success and why?
  - Committees established to improved land tenure and land conflict issues were not terribly effective; they were tasked with addressing land use among a dispersed population and in a context in which much of the land was in the hands either of the government or wealthier actors. Conflict resolution committees were also less effective because traditional chiefs tend to play a key role in these matters and communities seemed reluctant to move away from the status quo approach. Collaboration with local NGOs proved to be a fruitful strategy for the CDCs, because they were able to share local knowledge without being an affront to traditional leadership.

## 8. **Sustainability of Program Interventions:**

- What evidence exists to suggest that the capacities, practices, behaviors, systems and linkages critical to maintaining the food security outcomes will continue after the end of the project life?
  - Two factors suggest that communities exposed to the Jenga Jamaa II interventions will be able to sustain several of the food security outcomes

they achieved. One is that informants shared information on a fairly well-developed set of ordinances, codes, and formalized processes, particularly for livestock and agricultural exploitation. The fact that concepts have been formalized into rules and guidelines provides a foundation for farmers to disseminate teachings, follow a similar set of norms, and give clear guidance on best practices to other farmers. The evaluation team also observed strong competencies in child nutrition and health; if households and communities have the resources to implement more costly behaviors (such as building their own latrines and serving multiple, balanced meals), the nutrition competencies should transfer to other families and offspring.

- If so, which ones? What are the factors inhibiting the sustainability of program interventions?
  - The Village Savings and Loan Associations were important sources of support for women and farmers. However, high interest rates can inhibit the effectiveness of these activities. Technical support for value chain activities and plant protection was also an effective initiative but one that will require new means of assuring the participation of experts in order to ensure sustainability, if the communities themselves do not develop strategies for providing remuneration.

## 9. **Lessons Learned**

- What are the lessons learned from the Food for Peace portfolio design, implementation and M&E?
  - Regarding the design and implementation of the Jenga Jamaa II program by ADRA, a key lesson learned is that collaboration with other actors, including technical experts from the state, nurses and health care officials, local NGOs, and traditional authorities, is critical to the success of food security programs. Where collaboration was strong, program activities were effective and showed promise for sustainability; where collaboration was weak or incentives for collaboration were absent, program activities faltered. Regarding the monitoring and evaluation, the evaluation team recognized that activities can be better monitored—and their impact better measured—if program activities are publicly labeled in such a way that beneficiaries and community members have a clear sense of what the program is contributing. An added benefit would be a boost in recognition for the FFP initiatives.

- What could have been done to better ensure results were achieved and sustained?
  - The development of ordinances and guidelines concerning agricultural and livestock activities could be adopted to other areas, such as nutrition and health and local governance. Doing so creates clear expectations and a foundation for continued implementation even by community members who had no part in the ADRA program. As noted above, some activities could better publicize the contributions of the IP.
  
- Are there innovations and methodologies that merit replication and scale up?
  - VSLAs merit inclusion in future programs like the one implemented by ADRA. A key to scaling up credit and loan activities is to establish interest rates that are low enough to attract new borrowers, which will progressively protect the program from the consequences of defaults. Collaboration with agricultural experts is also an innovation that merits replication in future FFP programs. Creating incentives for experts to remain with the program for a sustained period, or to provide periodic continuing education opportunities for farmers, would ensure that their contributions become standard practice in the protection of plants and animals and other activities. Similar expert contributions could be adapted to the health and nutrition setting, and especially the gender setting. Many of the health and nutrition messages were well received, and continuing education from experts would solidify gains. In the gender setting, continuing education from outside experts could help to break down persistent patterns of unequal household roles.
  
- What measure can future programs take to increase food security and durable development in the Eastern DRC?
  - Based on the evaluation of the ADRA program, the evaluation team determined that the incorporation of experts from the state or other outlets to reinforce and formalize gains can increase food security and durable development in Eastern DRC. This would help to give Farmer Business Associations a leadership role, by equipping them with reliable techniques. Expert contributions similar to the work done by agronomists from the Ministry of Agriculture could be adapted to the health and nutrition setting, and especially the gender setting. Many of the health and nutrition messages were well received, and continuing education from experts would solidify gains. In the gender setting, continuing education from outside experts could help to break down persistent patterns of unequal household roles. We would also recommend reinforcing the

training of direct beneficiaries of programs in literacy, nutrition, and health, so that the transfer of knowledge to indirect beneficiaries is stronger. Finally, better collaboration with traditional authorities, and better selection of committee members, would improve the impact of CDCs working on local governance, land, and conflict issues.

#### **D. Recommendations (again, see Table A4 in the Annex)**

A number of recommendations that may serve future FFP programs emerge from the strengths, weaknesses, and lessons learned during the evaluation of ADRA's Jenga Jamaa II program.

- **Literacy coaching** must take place so that direct beneficiaries can train and teach second-level recipients. The training models themselves were effective in reaching direct beneficiaries, but breakdowns emerged in expanding the training to other recipients. An active part of literacy trainings such as those implemented by ADRA should thus be the coaching of strong performers and other literate village residents, in order to establish a team of teacher-trainers who can facilitate the sustainability and spread of literacy programs. **How:** train an initial team of direct beneficiaries; then train those beneficiaries in teaching and knowledge transfer so that they are prepared to disseminate skills and knowledge to indirect beneficiaries; next observe and provide feedback on their training of indirect beneficiaries; finally conduct feedback and evaluation sessions with indirect beneficiaries to determine the extent to which they benefited from the trainings. The content of these trainings could continue to focus on the substantive themes promoted by FFP, since the ADRA literacy trainings demonstrated that building literacy training around practical content serves multiple purposes simultaneously. **With whom:** program staff interacted effectively with direct beneficiaries, but in future FFP literacy trainings, we would recommend greater contact between program staff and indirect beneficiaries, in order to observe and verify the process of cascade training. **Why:** strengthening the process of cascade training and the dissemination of skills and knowledge to indirect beneficiaries will allow FFP programs to reach a much wider audience.
- **Farmer Business Associations** should be given the lead in local agricultural initiatives. An FBA action plan can be developed for sustainability, to ensure that the associations function as autonomous and well-known entities at the village level. We recommend that they work closely with experts and collaborators, and that those collaborators return on a periodic basis to provide continuing education and updates. We also recommend that the action plans of FBAs, the guidelines they develop, and the ordinances they impose to ensure appropriate exploitation of resources be formalized and institutionalized (i.e. shared in a consistent format across FBAs, with sanctions for non-compliance). The FBAs should also provide

regular awareness sessions for community members. The provision of agricultural materials may be difficult to sustain, but they can be provided in exchange for work, which should help to mitigate the adverse effects of seed and plant handouts that could create dependency or expectations. **How:** work with FBAs to develop written documentation; bring FBAs from different villages together to compare guidelines and determine which can be standardized. **With whom:** program staff must work closely with farmers and FBA leaders and should also serve as liaisons between FBAs and collaborators and experts from the Ministry of Agriculture or elsewhere. FBAs might also work with literacy trainers to assist with the development of formalized plans and documentation; this would serve to further reinforce the capacity of beneficiaries across strategic objectives. **Why:** Agricultural associations and Farmers' Business Associations proved especially effective at generating collective action and improving incomes. The best performances were also accompanied by a measure of institutionalization, which both reinforces the capacity of group members and also facilitates the transfer of best practices to others.

- **Women's empowerment** and literacy groups proved effective and should be included in future programs, and local leadership of these initiatives should be cultivated. Village Savings and Loan Associations targeting women are an especially effective means of creating new income generating opportunities for women, and those networks can be linked to literacy programs to promote bookkeeping and basic accounting skills. Strategies should be developed to transfer health, nutrition, and gender information from women to men, which should help both to build the capacity of women as purveyors of information and to fortify norms of gender equity among the men. DFAP implementing partners must recognize that norms regarding household roles and responsibilities change only slowly, but that community leaders working in conjunction with both men and women can help to illustrate discrepancies and areas in which household members might mutually benefit from changes to the status quo. Placing emphasis on future generations (i.e. opportunities for female children, rather than changes to couples' own roles and responsibilities) may be the most acceptable path to improved gender norms. **How:** replicate literacy trainings and VSLAs for women. Organize workshops with men and women in which community leaders, Mother Leaders, and successful women demonstrate alternative household organization; give female direct beneficiaries in these workshops the opportunity to demonstrate acquired skills and knowledge to male audiences, and create forums in which both men and women can plot strategies for allowing their female children to succeed. **With whom:** female and male direct beneficiaries, with assistance from prominent females in the community. **Why:** Gains to women from literacy trainings and credit opportunities were a noteworthy success of the ADRA program, but difficulties persisted in efforts to challenge conventional gender roles

in the household. Sessions that bring men and women together and that publicize and emphasize skills acquired by women should gradually break down limitations imposed on women by traditional norms.

- **Community Development** and Planning committees must begin with clear representation and leadership protocols. They must use transparent processes to select members, and they should develop clear action plans both for addressing crises and ensuring their autonomy and success as local organizations. Once a representative committee is in place, FFP implementing partners should assist in creating strong collaborative links between program CDCs, local government representatives, and traditional authorities. CDCs should prioritize the codification and dissemination of land use guidelines, both formal and traditional. **How:** open committee representation opportunities to a wide audience and publicize meetings and selection processes; assign members of CDCs to regular collaboration with government and traditional representatives to create guidelines on land ownership and use, as well as processes for acquiring land. **With whom:** a broad selection of potential CDC members, with program staff interacting closely with government and traditional representatives to ensure (and incentivize) their collaboration with program-related committees. **Why:** more transparent and representative committees with clear guidelines for raising and addressing land issues will both improve representation (thereby engendering greater trust and credibility among indirect beneficiaries) and allow villages to make headway in improving the process for acquiring land and monitoring its use to avoid land-related conflicts.

#### **IV. TANGANYIKA & SOUTH KIVU: FOOD FOR THE HUNGRY DFAP**

##### **A. Summary of Program Objectives**

The objective of the Tuendelee Pamoja program was to improve food security among vulnerable families in two ways: by improving socio-economic conditions, and by improving the health and nutrition of individuals, women, and young children.

**The strategic objective of improving socio-economic conditions** was structured around: 1) agriculture and producer groups, 2) natural resources and land management committees, 3) access to credit and to savings and credit associations, and 4) getting producers' associations up and running. Regarding concrete activities related to the program, the agricultural activities were divided into four intervention areas: training, seed multiplication and distribution, rearing livestock to improve soil fertility, and integrated efforts to combat crop parasites. Natural resource management involved land use planning, rehabilitation and management, reforestation and a study on land

rights. Improving access to credit involved the development of savings and credit associations and linking them to financial institutions. Finally, strengthening producers' associations took place through studies of producers' connections to markets, developing storage structures, and training.

**The strategic objective of improving individual health and nutrition** was based on four key initiatives: 1) improving behaviors through support groups, 2) diversifying people's diets, 3) community-based management of the causes of malnutrition and related illnesses, and 4) improving daily hygiene by developing infrastructures, setting up committees, and changing behaviors. Regarding concrete activities, behavior change through support groups involved trainings by project staff and fortifying communication networks among beneficiaries. Dietary diversification relied on the planting of vegetable gardens and fruit trees, and the promotion of good cooking practices. Nutrition awareness involved information sharing, community-based monitoring, and participation in group activities. Good hygiene practices required activities to disseminate information and to install and manage sanitary structures.

The program also included cross-cutting activities to: 1) improve the gender balance in local decision-making and in the distribution of labor, 2) promote community engagement in development processes, 3) support over 200 associations and groups, and 4) develop over 200 hectares of land.

Of special note is the fact that, unlike the DFAPs administered by Mercy Corps and ADRA, the Food for the Hungry Tuendelee Pamoja program was administered across two different provinces, Tanganyika and South Kivu. In this section, we present an overall summary of the effectiveness of the Tuendelee Pamoja program across the two provinces, but we also note in the concluding part of the section how implementation differed across Tanganyika and South Kivu.

## **B. Findings**

### **1. Effectiveness of the Training Models**

Training was a central part of the Tuendelee Pamoja program. FH organized a cascade training approach for the various training activities cited above in order to strengthen local actors' capacities in social behavior and change communication (SBCC). The development and dissemination of educational materials were also key components.

The program developed and relied on various educational materials. These included educational booklets with several images and accompanying messages on each page. Participants in trainings—in particular the health and nutrition trainings—were then

asked to perform or role play the targeted behaviors; the goal was that they would incorporate lessons in their own routines and share those lessons with indirect beneficiaries. Those materials also supported other participatory communication techniques such as theater.

Participants expressed some frustration over the format and materials of the trainings. The following commentary was offered by focus group discussants in Moketo:

- Had a lot of information on each page.
- Were hard to use effectively.
- There was no user's guide to ensure that all the facilitators would follow the same procedure during the discussion groups and home visits.
- There were no educational materials for beneficiaries to take home and distribute (e.g. guides on family health or family farming/livestock rearing). Several projects/programs produce specific educational materials for facilitators when it is actually the beneficiaries who need them. Households could use these materials after the project ends.
- There were no supporting materials (posters, advisory cards, aide-mémoire) for the main materials (picture box) to diversify the channels of communication.
- TEMBEA NA WAKATI (01- 48) audio materials: the theater piece dealt with several themes, which made it hard for the audience to grasp the key messages and relate them to the information in their booklets.

Regarding the content of trainings, however, the evaluation team heard widespread feedback that the information provided in trainings contributed to behavior change. Focus group participants noted that the training sessions were particularly effective in encouraging local residents to use health services (such as pre-natal checkups and asking for contraception) and to adopt and maintain important nutritional habits, like breastfeeding and washing hands. One woman said: *"the trainings given by FH made us think differently"* (see FG2, Kabulo). Another participant told the evaluation team: *"I used to have a baby every year, they came one after the other like stairs; now FH has taught me how to space my children"* (see FG2, Lyapenda). A third said: *"because of the information from FH I had my baby at the health center"* (See FG2, Katudu, South Kivu).

In the mini-surveys, we found that 94% of project beneficiaries took part in some form of training, and that 40.6% of indirect beneficiaries in the same areas later took part in cascade training led by a local beneficiary. We were unable to determine the share who

took part in trainings by DFAP beneficiaries as opposed to trainings by other organizations, because in many instances participants were unable to discern who was behind the programs in which they took part.

Three challenges stand out in regard to the effectiveness of training models and the spread to non-beneficiaries. First, the educational materials were largely used to raise awareness rather than change behaviors in the short-term; beneficiaries did not report receiving materials that they could use for continued learning or to train other second-line beneficiaries. Second, training times varied, some lasting a few hours and some lasting multiple days; in Moke, Kabulo, Kataki, and Lukalanga, focus groups complained that the scheduling was haphazard. Third, participants noted the absence of a clear mechanism for supervision and monitoring related to the SBCC training (see Focus Group Discussions from Mulenda, Miketo; key informant village chief in Kabuyu). Participants followed the theoretical sessions and practical demonstrations, especially on agriculture and nutrition (e.g., preparing children's porridge), but no clear system existed for selecting and communicating with participants and following up later. As a result, non-beneficiaries in FG3 from Kabulo expressed the following:

- *"we still have our babies at home."*
- *"we don't want to use the money we have for pre-natal checkups."*
- *"when a child is sick, it's ok to use what we find from the forest as a purge."*

It is also worth noting that focus group participants of the Pygmy ethnicity in Kabuyu saw little effort on the part of the FH program to directly reach their ethnic community. The implementation strategy did not distinguish between the ethnic compositions of different localities, but to the extent that the Pygmy represent a vulnerable population, explicitly targeting Pygmy-heavy areas would have served the program objectives.

## **2. Links to Markets and Public Services**

Specific activities that Food for the Hungry implemented to fortify links to markets and public services include the following:

- Improving access to credit through the development of VSLAs
- Linking VSLAs to financial institutions
- Organizing producer associations
- Organizing trainings for farmers on accessing markets and developing collective opportunities for crop storage
- Establishing a partnership with the government to enhance production from seeds.

Some focus group participants indicated that they had engaged in new market opportunities as a result of the availability of credit and the organization of storage. For

example, three farmers' association members in Kataki did not previously cultivate onions, but they indicated that they have started doing so as a result of these changes (see FG1, Kataki). The evaluation team also met with farmers in Kabuyu who stated that they had increased their cultivation of garlic, beans, and onions. A female farm leader who served as a key informant in Mocket described the process by which beneficiaries relied on the program to improve their links to markets: *"participants first associated themselves with the producers' association. From there, they learned about access to credit and began to take loans. Once they get a loan, they are willing to try new crops. Then they might continue to work with the association to put some of their crops into storage. It is like this that farmers are taking advantage of the program."*

There was less evidence of improved access to public services. Road infrastructure remains a challenge around many of the evaluation sites, and focus group participants expressed difficulty in getting to health clinics and markets.

The nature and strength of the Tuendelee Pamoja program in terms of linking target beneficiaries to local market actors comes primarily in the improved access to credit, with which many have expanded their market roles. Concrete changes include greater quantity of goods taken to market, owing both to the ability to expand into onion and bean cultivation and the opportunity to store more crops. Conversely, physical access to markets as well as other services remains a challenge for many in the Food for the Hungry target areas. Beneficiaries expressed clear satisfaction with non-governmental farmer and producer associations, though the bulk of informants and interviewees indicated that links to government actors and services remain tenuous. Farmer leaders appreciated the government partnership through INERA (a government agency responsible for agricultural research), but noted that the benefits come in the longer-term as farmers try different seeds.

### **3. Changes in Household Incomes and Livelihoods**

The Tuendelee Pamoja program included a number of activities designed to directly improve household incomes, such as credit programs, food-for-work activities in reforestation, and processing techniques (shellers and moulins, in particular). The reforestation activities aimed to influence long-term, community-wide incomes by preventing erosion.

From the mini-survey data, 77% of survey respondents reported having attended training sessions related to one or more of these programs; 74% of those who attended thought that the agricultural sales training had helped improve their agricultural practices, and 51% said that it had increased their sales. A shared perspective from a focus group in Kataki noted benefits in credit access:

- *"The savings and credit group has a solidarity fund. Everyone has to pay in a small amount for a share in the scheme. The amount is set in the rules, and subscriptions can be used to cover healthcare or funeral costs."* (FG1, Kataki)

Others also noted benefits to livelihoods from the Tuendelee Pamoja program, though oversight is clearly important:

- *"The training on hygiene has eliminated illnesses. There's also micro-credit, vaccinations, ANCs and education. Things are going well. Incomes have gone up, and I use what I earn to cover the cost of school fees and clothes"* (Mothers' Leader CDC, Mocket).

- *"We're learning about diet and improving because of the Tuendelee pamoja project"* (FG2, Kabuyu).

- *"Yes, there used to be savings groups but they don't work anymore because people were swindlers. Often we wanted to get our money out but were told that there wasn't any, so we left the group"* (FG2, Lyapenda).

The Food for the Hungry baseline report indicated a specific target of 100 hectares of reforestation per year in order to bolster livelihoods. Reforestation has been positive, but agricultural stakeholders in Kikango and Miketo expressed concerns that the CDCs who manage the reforestation programs are not transparently selected or representative of the community (farm leader, Kikango; pastor-beneficiary, Miketo). In the mini-survey, only 54% of respondents were aware of the existence of any plans.

According to key informants in Kikango, Miketo, and Lyapenda, processing activities were less successful than the credit and reforestation activities. Technical problems frequently arose with the processing machinery, which undermined the potential for profit and efficiency.

Credit programs and food-for-work opportunities were viewed positively by participants in the Tuendelee Pamoja program. Beneficiaries of the program report taking on loans at a higher rate than non-beneficiaries (23% vs. 14.5%), and numerous focus group participants equated the food-for-work opportunities with having a job (FG2, Lyapenda).

#### **4. Changes in Nutrition and Health Practices**

Regarding **diet**, participants in the program indicate an understanding of the need to diversify their meals, and they report consuming meals more frequently: in the mini-survey, 96.8% of beneficiaries, versus 81.3% of non-beneficiaries, stated that they consume at least two meals per day.

Narrative reports and confirmation from key informants indicate implementation of the following modules related to nutrition and health practices:

- Maternal diet
- Family planning (spacing children, contraception)
- HIV/AIDS
- Malaria and intestinal worm (recognition and prevention)
- Hygiene and sanitation (hand washing, latrines, etc.)
- Care of newborns

In terms of **child care**, breastfeeding is cited as important among both beneficiaries and non-beneficiaries, and in terms of vaccinations, children of beneficiaries are no more likely than their counterparts to be vaccinated (see Appendix Table 1.1).

Regarding **sanitation**, beneficiaries in focus groups (FG2, Katudu, South Kivu; FG2, Kabulo) expressed greater awareness about the importance of cleanliness. In the mini-surveys, however, the results do not differ much from non-beneficiaries: they are slightly more likely than their counterparts to report having handwashing stations next to the toilet (39% vs. 34%) and washing hands before preparing meals (95% vs. 83%). The latter difference is statistically significant at the 95% confidence level; the former is not. Beneficiaries also report being more likely to use water from wells as opposed to springs (39.6% vs. 15.7%,  $p < .05$ ).

A key aspect of the Tuendelee Pamoja health and nutrition activities was that beneficiaries were exposed to health messages across multiple communication channels, including nurses at local health centers, community liaisons and Mother Leaders in the community, and community radio programs operated by the Lokolé Foundation (a participatory theater initiative by one of Food for the Hungry's implementation partners, Search for Common Ground). Again, this did not necessarily distinguish beneficiaries from non-beneficiaries.

Key informants and focus group participants informed the evaluation team of the following concrete changes in nutritional behavior and knowledge (culled from the collection of focus groups):

Changes in Nutritional Knowledge and Practice	
Before	After
Women visited health clinics less frequently	Women widely expressed familiarity and use of pre-natal consultations at health clinics
Some women were not accustomed to giving the colostrum to their newborns	Women who took part in maternal training indicated that they breastfeed their newborns within one hour of birth to take advantage of the colostrum
Women often stopped breastfeeding quickly, especially those who work in the field	Women widely noted the importance of continuing to breastfeed up to two years
Many women expressed that they had put little thought into varying food groups when preparing meals	Women widely expressed increased knowledge (if not always practice) in including multiple food groups

Finally, regarding malaria prevention, the survey shows that 60% of beneficiary households and 43.8% of non-beneficiary households said that they use treated bed nets; while 60.5% of beneficiaries and 78.6% of non-beneficiaries said that they had slept under an ITN the night before the survey. The survey also showed that 57.9% of pregnant beneficiaries and 50% of pregnant non-beneficiaries reported that they had spent the previous night under a treated bed net. Tellingly, in a focus group with non-beneficiaries in Katanga, participants expressed that malaria prevention strategies are on the rise, and that they have received malaria prevention trainings from other sources.

### 5. Changes in Gender Norms

The Tuendelee Pamoja program addressed gender norms largely by conveying information and awareness through socially accepted channels:

- Mother Leaders conducted awareness sessions and interpersonal communication with couples and their older children.
- The Lokolé Foundation (through Search for Common Ground) spread information on gender equality through participatory theater.
- Religious leaders shared Tuendelee Pamoja gender messages with their communities.

- Gender listening groups (also implemented by SFCG) promoted the sharing of experiences, and gender champions were rewarded as exceptional contributors.

We outline some trends in attitudes here, but we stress that the results must be treated with caution: because norms of gender equality are widely understood as socially desirable, respondents may report support for such norms even if in practice they do not.

Male participants in the program noted that they should complement rather than dominate women in the household. Almost all participants in the discussion groups said that girls have just as much right to be educated as boys. For example: *“The training by SFCG helped us see that girls should get an education before marriage is considered. They can get married at 20 or even 25, after finishing their studies”* (FG1, village of Kataki). However, with regard to domestic violence, some men still think that they can hit their wives for failing to do what they say: *“If the woman doesn’t obey her husband, then sometimes you need to hit her. As the saying goes ‘BIKONI, NKONZI’ - strike while the iron’s hot”* (P1, FG1, Kataki). Women in focus groups were reluctant to discuss treatment within their households.

The mini-survey asked respondents a series of questions about gender norms. In most cases, regarding topics such as schooling, decision making, and family size, beneficiaries express stronger support for gender equality. For example, 12.7% of beneficiaries vs. 21.9% of non-beneficiaries state that men are wrong for discussing family size with their wives, and just 2% of beneficiaries vs. 21% of non-beneficiaries state that school should be reserved for boys. However, regarding beatings and involvement in outside activities, beneficiaries were actually less supportive of rights for women. This may be an idiosyncratic finding, but at a minimum, it reflects no gains from the project in this particular regard.

Overall, the evaluation team observed that some awareness activities worked well; in particular, discouraging child marriage and appreciating the value of educated girls. Changes in women’s decision making and in more equitable male-female relations, however, continue to lag.

## **6. Outputs of Disaster Risk Reduction Interventions**

Specific Disaster Risk Reduction activities put into place as part of the Tuendelee Pamoja program included:

- The formation of natural resource management committees

- Reforestation initiatives that included the planting of trees and other erosion prevention techniques
- Committees to study land rights

The evaluation team observed reforestation areas and discussed management and land rights initiatives with key informants and focus groups. Those sources suggest that concrete steps have been taken, though the benefits are not always obvious unless a potential natural disaster hits the area. For example, in Lyapenda, the CDC Vice President explained that some committee members working on DRR viewed the planning sessions as “theoretical”. Members of a focus group in Kataki shared the opinion that *“Tuendelee Pamoja has done some things so that we are ready. We don’t know what will happen when a serious drought or flood comes here, but at least we have something now (in reference to reforested areas and drainage ditches)”* (FG1, Kataki). Mini-survey data indicates that 55% of respondents are aware of local initiatives to combat natural disasters. Further, 50% indicated that someone in the community has spoken to them about Disaster Risk Reduction measures.

The evaluation team assesses the quality of these DRR initiatives as strong but, in some cases, still too abstract. Initiatives that community members can see and participate in (such as planting trees, digging ditches, and building barriers) provide direct benefits and also serve as tools to raise the awareness of DRR pending the occurrence of actual disasters. Natural resource management plans are equally important, but until the planning is transformed into outcomes, community members have greater difficulty perceiving the benefits. The same is true of land rights discussions; one focus group participant stated that *“we are at the mercy of the government when it comes to land rights, so we just have to wait and see what changes”* (FG1, Mocket).

## **7. Results of Governance and Conflict Resolution Initiatives**

The Tuendelee Pamoja program promoted governance and conflict resolution through CDCs; they facilitate social organization and mobilization, and they help to resolve conflicts and negotiate innovative forms of land tenure. However, the CDCs did not seem to gain a lot of autonomous traction—over 80% of respondents said that the committees exist only because of the project—and numerous focus group discussants in Mulenda, Kabulo, and Mwergerera (South Kivu) noted that the CDCs still need to resolve serious problems in terms of the representative nature of their members. Others noted that the CDCs work well only when committed leaders are involved, a sentiment supported by in-depth interviews:

*“I was involved in resolving a conflict between neighbors and [name redacted]. There are land management committees that function. Land is distributed by the village chief and*

*there's no conflict. The technique for resolving conflicts is forgiveness; accept that you've lost so that you don't cause conflict" (Pastor, Katakai).*

*"The CDC works well. It's planting trees, and as its president I resolve conflicts between farmers, herders and livestock owners myself" (Farmer and president of the CDC, Mocket; note: the evaluation team was unable to confirm this with farmers).*

*"After the leaders were elected, the CDC was composed of leaders and members of the group who were serious about teaching other people. But the CDC was set up after the distribution, so those leaders were unable to supervise things. It should have happened the other way round" (Farmer's leader, Mwegerera, South Kivu).*

## **8. Sustainability of Program Interventions**

Key informants expressed the potential for sustainability, especially in the areas of nutrition, agricultural techniques, and credit access:

*"Children's diets are changing. I used not to eat vegetables, nor did my children, but with FH we've improved our vegetables and other food and we're in good health... We joined a savings and credit association and got a loan for a small business. The income from this pays the children's school fees. I can borrow up to 50,000 FC for food and school fees" (beneficiary producer, Katudu, South Kivu).*

*"They taught us about different growing techniques and vegetable gardens. I use these techniques in my field and they work" (Women's leader, Mwegerera, South Kivu. Note: she spoke of her current activities; implied is that, because they work, she will continue them).*

*"The children sleep under a mosquito net and drink clean water. They have a good diet and they're clean. If they get sick we go to the health center (...) Pregnant women eat the same food as usual and the doctor at the ANC said there's nothing they shouldn't eat" (Farmer and President of the CDC, Mocket, discussing the change in behaviors that are now a norm).*

However, efforts are spread over many villages in a large geographic area, and the same intervention model is used regardless of the local context or geographic setting. This can be a problem to the extent that programs prioritize certain behaviors that are not a central issue for community members, while overlooking more pressing concerns. Consider:

*"I'm involved in conflict resolution through participatory theater. This covers various themes, such as brave men, lazy men, inheritance problems and land conflicts. But here,*

*there are mainly land problems, especially disputes over field boundaries because people are very attached to their fields” (Women’s leader, Mwegerera, South Kivu).*

*“The pigs that were distributed (1 between 2 families) died after a couple of months (from an unidentified illness that was not followed up). Meanwhile, in 5 years, there have been 2 days of training on agriculture. This is what we needed here” (Field notes, Mwegerera, South Kivu).*

Regarding CDCs, focus group participants in Kikango, Miketo, Mocket, and Lyapenda widely noted that CDCs are not fulfilling their roles and have limited financial and technical capacities (supported by a CDC vice president in Lyapenda). Training sessions are generally short and there is no learning evaluation.

The seed multiplication stations also do not appear sustainable. They were heavily subsidized by the project and have no clear alternative funding streams. According to FH representatives, more than \$100,000 in annual funding is required for the operation of stations, so without continued FFP support they are unlikely to persist in their current format.

### **C. Conclusions and Lessons Learned (see Table A5 in the Annex)**

The findings outlined above suggest the following strengths and weaknesses from the Tuendelee Pamoja program:

#### **Strengths**

- 1) The content of trainings was effective in terms of changing behaviors (see p. 57-58). Participants reported positive responses in terms of the practical demonstrations from trainings, and the cascading of trainings to indirect beneficiaries seemed to work somewhat better than the other DFAPs, though still with shortcomings (p. 58).
- 2) Agricultural and reforestation activities were a key success in the Tuendelee Pamoja program. Labor and land associations emerged, and participants reported seeing the benefits of reforestation (p. 60), which provide downstream economic benefits. Participants reported that the food-for-work aspects of the reforestation activities were especially helpful (p. 60).
- 3) Loan programs effectively supported credit associations and increased credit access. As noted above, beneficiaries reported obtaining small loans that allowed them to generate income (p. 60), and were aided by the collaboration within organizations,

Agricultural beneficiaries were also able to better exploit credit opportunities by virtue of collaborations and input from external experts (p. 59).

- 4) Child care, sanitation, nutrition, and access to clean water seems to have improved, at least in terms of awareness. Mini-survey data suggests that positive trends in handwashing and drinking clean water are apparent, and women in focus groups express having learned new child care and nutrition norms (p. 61-62). It is unclear whether the benefits from the FH activities outpace non-beneficiary improvements; there are overlaps in interventions.
- 5) Gender equality awareness has improved. Men and women both express recognition of the importance of women's roles. Behavioral challenges still persist and social desirability in responses cannot be ruled out in the case of some male participants, but the evaluation team noted that conversations on gender roles and gender equity were starting to open up (p. 63).

### **Weaknesses**

- 1) SBCC training organization was often unclear and haphazard; they were also not appropriately tailored to local needs (i.e. agricultural vs. pastoral focus) (p. 58). Also noted above, participants expressed frustration with the scheduling and duration of trainings and they often noticed a mis-match between their priorities and the training focus (p. 57).
- 2) Cascade training did not extend sufficiently to second-line beneficiaries, and supporting material was inadequate (see p. 57). Beneficiaries did not demonstrate an extension of training to non-beneficiaries. Participants also wanted more and better learning materials with which to continue education. Many potential indirect beneficiaries seemed to expect material handouts such as reading material and training booklets.
- 3) Collaborative efforts to improve links to markets by creating storage options and the expansion of crop production were effective, but links to markets were otherwise undermined by poor road access (p. 59) and technical challenges in using mills and shellers. Links to public services were never well established during the Tuendelee Pamoja program (p. 59).

- 4) Subsidization of seed multiplication centers compromises sustainability. Participants want lower prices for seeds, so it is possible that they will be unwilling to pay higher prices once subsidies end (see p. 65).
- 5) CDC effectiveness was limited by concerns over representativeness and monitoring shortcomings (p. 64). Several participants complained about the selection process, and key informants indicated that the CDCs were effective only when a committed local leader was involved. They also lacked the autonomy that would be needed for sustained effectiveness beyond the life of the project.

### **Program Effectiveness in Meeting Core Objectives**

This section outlines the effectiveness of Food for the Hungry's Tuendelee Pamoja II program, as it relates to the core objectives of the program. It draws on the evidence, strengths, and weaknesses presented above. Please refer to the sub-sections above for the evidence underpinning these summary comments on the Food for the Hungry DFAP.

#### **1. Effectiveness of Training Models and BCC**

- How well did the "training of trainers" and "cascade training" models and other modes of BCC contribute to the dissemination of information, skills, and knowledge, and with what accuracy?
  - There is some evidence that indirect beneficiaries were trained by the direct beneficiaries of the program. The dissemination of skills and knowledge remained fairly limited however, and frustration with the materials and formatting of training undermined the potential for widespread behavioral change.
- What evidence exists to suggest that information, skill, and/or knowledge "spilled-over" from direct program participants to non-participants?
  - Evidence from mini-surveys indicates that indirect beneficiaries did benefit from trainings to some degree. Regarding spillover to non-participants who did not have contact with the program, it is difficult to assess the extent to which Food for the Hungry activities spilled over, because other projects in the region are also working on agricultural, literacy, nutrition, and health needs, and the non-participants that we interviewed were generally unable to assign responsibility for either the programs or the lessons they learned.
- How did the rate/accuracy of applying the knowledge and skills change at the various levels?

- The rate and effectiveness of trainings for direct beneficiaries themselves was undermined by a haphazard training format and schedule; this made it difficult for beneficiaries to get in a training rhythm and maintain the gains they had made from one period to another. Frustration with training materials and with lessons that were not tailored to local needs further limited the spread of skills and knowledge to indirect beneficiaries.

## **2. Strength of Linkages to Markets and Public Services**

- What is the current nature and strength of linkages between target beneficiaries and local market actors (e.g. increased access to inputs and credit, increased sales, etc.)?
  - The nature of links to markets hinged largely on increased opportunities for credit among farmers, which they used to expand crop varieties and production and to then enhance their market presence. The strength of beneficiaries' links to markets was limited, however, by the conditions of roads; road improvement was not a priority in the areas under evaluation. Furthermore, while improved credit access helped farmers, technical challenges limited the program's effectiveness in improving processing activities.
- How have these changed since the projects began?
  - Participants noted that, as a result of involvement in agricultural associations and programs, they first benefited from collaboration to a greater extent than they had prior to the project. They then learned about opportunities and took advantage of new access to credit. Finally, beneficiaries appeared willing to take on the cultivation of new crops in a way that they likely were not prior to the project.
- Similarly, what is the nature and strength of linkages between targeted communities and government and non-government agriculture extension, health, and nutrition services and how they changed through the project's duration?
  - Project beneficiaries did not express strong links to public services as a result of the Tuendelee Pamoja program. They were limited in part by poor road access. One bright spot was the collaboration with representatives from INERA.

## **3. Changes in Household Incomes and Livelihoods**

- How do beneficiaries feel the project interventions influenced household incomes and livelihoods?
  - Beneficiaries indicated that the Food for the Hungry program contributed to household incomes in both direct and indirect ways. Credit access for

women seemed to have the most direct impact on household livelihoods. Food-for-work programs also had tangible benefits on household livelihoods by providing supplemental food, in addition to providing less tangible benefits to the self-confidence of workers. Indirectly, participants noted that Food for the Hungry activities improved nutritional behaviors and the diets of both mothers and children; the impact on household livelihoods is not yet apparent, but participants recognized the potential. Furthermore, tree planting and drainage activities can pay long-term dividends in terms of productivity.

- Which interventions had greater or lesser influence on household incomes and livelihoods? Why?
  - Credit access, both for women and for farmers, had the biggest impact on household incomes. Beneficiaries described putting those resources directly into critical household needs or income-generating activities. Collaboration among participants in agriculture associations also paid dividends, as participants learned new strategies and gained access to storage that enabled them to sell crops at more opportune times and thus for better prices. Less effective were activities aimed at the processing stage: participants expressed frustration with technical challenges related to the milling and shelling activities that otherwise could have added value prior to market.

#### 4. **Changes in Nutrition Practices**

- The three DFAPs adopted different models to improve the nutritional status of beneficiaries. What can be learned about the challenges to and effectiveness of the different methods?
  - The Food for the Hungry DFAP placed emphasis on support groups to share skills and knowledge and reinforce behavior change. It also emphasized dietary changes, which proved to be a strength of the program: mothers expressed improvements in their own diet in a way that beneficiaries of the other programs did not. A challenge in relying on a model of support groups is the danger of losing gains to knowledge when meetings and support groups do not take place at regular intervals. A model that relies on trainings and support groups is also subject to shortcomings in monitoring that can undermine gains.
- How have parents' attitudes and practices with regard to child feeding and care changed over the past few years?

- Participants indicated changes in behavior as a result of exposure to the program over the past few years. Mothers indicated awareness and application of improved breastfeeding techniques (giving colostrum and exclusively breastfeeding newborns). They also expressed greater familiarity with hygiene behaviors (such as handwashing) that can improve the care they give to newborns.
- How do parents who have had another child since graduating from a DFAP nutrition intervention feed and care for this new child compared to previously born children?
  - The evaluation team was unable to clearly identify changes from one birth to the next for mothers who had participated in the program. However, mothers involved in the nutrition and health activities were either spacing their births further apart or at least expressing an understanding of the importance of spaced births. This suggests that children born after their mothers participate in the program activities stand a greater chance of having access to better nutrition and care.
- How well did these mothers eat and pursue pre- and post-natal care during and after their latest pregnancies?
  - Dietary changes seemed to be an important benefit of the Tuendelee Pamoja program: mothers expressed eating more balanced meals themselves and feeding their children more often. Benefits to pre- and post-natal care were not as obvious under the program, though mothers did express that they used health clinics more frequently and took part in pre-natal consultations at health clinics.

## 5. **Changes in Gender Norms**

- Since participating in DFAP interventions, how have perceptions of male and female beneficiaries changed with regard to men's and women's roles, responsibilities and opportunities in: household and community decision making, household labor and income generation, participation in community and social institutions, access to and control over household and community resources, and freedom of speech and movement?
  - Men and women who participated in the program expressed a greater appreciation for women's decision-making opportunities, though room for improvement in terms of both decision-making and a balancing of gender roles persists. Female income generation improved in many households, and there was no clear evidence to indicate that this created tensions at the household level. However, evidence that domestic violence may persist in households suggest that females still lack important freedoms.

- What evidence shows that some interventions have been more or less effective than others in influencing the attitudes of men or women?
  - Evidence from focus groups and mini-surveys indicated that efforts to improve opportunities for girls have been particularly effective; both women and men share support for girls' education and a reduction in the practice of child marriage. Participants did not express a strong preference for consultations with leaders over, for example, participatory theater; they instead emphasized the content of the various forms of communication.
- What evidence is there that these attitudes will or will not spread more widely in the community after the projects end?
  - Support for girls' opportunities among both women and men leads the evaluation team to believe that those changes may persist and spread more widely after the life of the project. This is an area in which households can communicate more freely and can observe the behaviors of other households (for example, those who send their girls to school). Conversely, the evidence did not convince the evaluation team that changes to gender roles within the household will spread as a result of the program: concerns of social desirability bias persist, and men who took part in the program did not demonstrate improved respect for the rights of their wives (i.e. in terms of domestic violence).

## 6. **Outputs of DRR Interventions**

- What is the quality of community and household disaster risk reduction measures and plans that were supported by the project interventions?
  - The disaster and risk reduction activities were implemented in good faith by the program staff and collaborators, but in some regards participants perceived the trainings and transfer of knowledge to be too abstract. Where tangible activities were undertaken, conversely, participants recognized the benefits to the community; this was true in several instances of planting projects and the construction of drainage ditches. Much like the ADRA interventions, the quality of DRR measures undertaken at the household level was weaker or more difficult to observe. For example, beneficiary households did not have more trees planted in their concessions.
- What factors have promoted or challenged the development, implementation, or quality of these plans and practices?

- Lack of clarity regarding control over land remains a challenge to local efforts to reduce disaster risks; as long as community members perceive the land as in the control of government, they are likely to remain of the view that government should address potential threats to land from natural or other disasters. Furthermore, the theoretical nature of information transfer can inhibit the transfer of skills and knowledge. Engaging participants in tangible activities like planting promoted the success of DRR efforts.

## 7. **Results of Governance and Conflict Resolution Initiatives**

- What evidence exists to suggest that DFAP governance initiatives affected land tenure, access to land, and/or conflict within communities?
  - The evidence did not suggest that Tuendelee Pamoja initiatives had a concrete impact on land and conflict issues in the study area. Governance and conflict resolution initiatives worked largely through CDCs, but participants generally expressed that those committees relied heavily on input from influential community members and that they were established only in response to planned activities.
- Which initiatives had greater or less success and why?
  - Efforts to create local-level collective action through activities like planting trees had some positive impact on conflict mitigation; this could be a function of social barriers between families or identity groups coming down. Initiatives to address land ownership and land rights were less successful, perhaps because the CDCs never earned the full trust of the community. CDCs can be an effective tool for cultivating improvements in local governance and conflict resolution, but they would need to be better organized and more capable of sustained autonomy to make that happen.

## 8. **Sustainability of Program Interventions:**

- What evidence exists to suggest that the capacities, practices, behaviors, systems and linkages critical to maintaining the food security outcomes will continue after the end of the project life?
  - One indication that some aspects of the Tuendelee Pamoja program will persist beyond the life of the project is that focus group participants and key informants had begun applying techniques and lessons learned to their own household contexts. This was especially true of agricultural storage techniques, nutrition and health information related to newborn care and family diets, and the exploitation of loans for income generating purposes.

- If so, which ones? What are the factors inhibiting the sustainability of program interventions?
  - The Village Savings and Loan Associations again appear poised to continue impacting household well-being beyond the life of the program. Nutritional trainings may be sustainable, but only to the extent that nurses, Mother Leaders, and other key sources of information remain involved with women’s support groups; the transfer of skills and knowledge from direct beneficiaries to indirect beneficiaries was not robust enough to rely solely on cascade training to sustain the program gains. Technological challenges in using and maintaining agricultural equipment undermined some of the potential for sustainability, and seed multiplication centers appear to require too many resources for subsidization to allow the activity to be sustainable.

## 9. **Lessons Learned**

- What are the lessons learned from the Food for Peace portfolio design, implementation and M&E?
  - The biggest lesson learned regarding the design and implementation of the Tuendele Pamoja program is that the format, consistency, and appropriateness of trainings matter critically in ensuring that participants gain and internalize new skills. Trainings and support groups that take place in haphazard fashion or at irregular times discourage regular participation. And despite a common set of challenges in the area, it is important to take the pulse of the community in the early stage of program implementation to determine the precise concerns that threaten food security. In some villages, crop disease may be a central concern, whereas in others, land use rights may foster ongoing tensions. Understanding these differences could serve the effectiveness of future FFP activities.
- What could have been done to better ensure results were achieved and sustained?
  - Committee leadership teams could be appointed early and through transparent processes. Prior to program implementation, program staff and committee members could conduct learning sessions to gather input from farmers, women, and other key stakeholders regarding what they perceive to be the biggest challenges to food security locally.
- Are there innovations and methodologies that merit replication and scale up?

- Food-for-work activities merit replication; they bolster the self-confidence of workers by providing an earning opportunity while also providing tangible benefits to the household in terms of nutrition and savings. Those food-for-work activities can be tied to reforestation initiatives, which merit broader implementation in future FFP programs. Like the food-for-work program, reforestation activities also provide multiple benefits, including protection against erosion and work opportunities. Finally, credit associations proved to be particularly effective for both agricultural groups and women's groups.
- What measure can future programs take to increase food security and durable development in the Eastern DRC?
  - Based on the evaluation of Food for the Hungry's Tuendelee Pamoja program, the evaluation team sees consistent and collaborative trainings, coupled with access to credit as preferable to subsidized enterprises and material distribution. Putting the appropriate information in the hands of beneficiaries and giving them opportunities first to apply those skills and then to transfer the skills to other community members can reinforce program sustainability. Furthermore, beneficiaries have demonstrated that when their access to resources improves, so too does their household livelihood. Seed and animal distribution can pay important dividends to recipient households, but innovative strategies must be developed to mitigate resource barriers if those programs are to continue beyond the life of a project.

#### **D. Recommendations (again, see Table A5 in the Annex)**

The conclusions that the evaluation team drew from the Tuendelee Pamoja program suggest a number of recommendations that may serve future programming. They are as follows:

- **Training models** should be employed in new FFP programs, but with consistency, tailored to local contexts, and with dedicated monitoring and follow-up on the cascade approach. Programs can include the production of learning materials for future use, in such a way that those materials do not incentivize participation simply for handouts. The practical demonstrations that took place during trainings, especially regarding nutrition, agricultural techniques, and credit collaboration, should serve as examples for future programming, as they generated sustainable gains. However, it is important to establish consistent training plans and to ensure that content is appropriately suited to the micro context. **How:** create a formal training format, with consequences for trainers if schedules are not maintained. Use

incentives for both participants and trainers to encourage regular participation, and carry those strategies over into the cascade trainings. As a creative outlet, conduct sessions in which participants in literacy programs also design materials (posters, text boxes, images, audio messages) that could be laminated or copied for future use. **With whom:** emphasis should be placed on the role that trainers play, since evidence indicated that irregularities in trainings came not from participants but from the organizational side. **Why:** Consistent trainings allow beneficiaries to build on previous lessons, and the activities are more likely to remain a priority.

- **Agricultural loan programs and reforestation initiatives** should feature prominently in future FFP initiatives. These were real bright spots in the Tuendelee Pamoja program, and they generated benefits to farmers, to the recipients of food-for-work, and to the economic sustainability of other community activities. Interest rates for loans must be kept reasonably low, and if agricultural subsidies are employed in new programs, plans should be established to gradually reduce those subsidies over the lifespan of the program. A gradual phase-out can help both program actors and beneficiaries to identify an equilibrium price that will encourage sustainability in a variety of seeds. **How:** replicate reforestation programs and couple them with food-for-work activities so that beneficiaries who engage in planting activities are rewarded in tangible and appropriate ways. Sequence loans with food-for-work to determine whether added gains can be realized from coupling those opportunities within households. Work with credit associations to expand loans to offset the risk of default, thereby allowing them to keep interest rates lower. **With whom:** program beneficiaries in consultation with implementing partner and credit associations. **Why:** These activities proved successful. Expanding food-for-work, credit access, and reforestation constitutes an effective strategy for providing immediate opportunities along with the possibility for long-term growth (through erosion prevention, improved self-confidence of workers, new business opportunities built on loans, etc.).
- **Health, nutrition, and gender programs** should remain a priority for FFP, and new programs should bolster efforts to reach men as well as women. We are concerned that men express an appreciation for women's empowerment and gender equality while behavioral patterns are slower to change. Expanding health, nutrition, and gender programs to reach men—and implicating women in that process—will create an opportunity for women beneficiaries to reinforce their capacity and to demonstrate gains in knowledge that will ultimately pay dividends for household

livelihood and resilience. **How:** create opportunities for female participants to demonstrate practical skills and lessons learned at mixed gender events and workshops. Create friendly competitions and build on the concept of gender champions to convey the challenges involved in household and nutrition tasks, and to generate excitement among males as well as females. Rely on women leaders to track progress from nutritional and health trainings and to supervise the cascade training of those issues. **With whom:** male as well as female beneficiaries; women leaders in the community also play a critical role, and generating buy-in and support from key male leaders will also help to gradually improve gender norms. **Why:** The benefits from gender, health, and nutrition activities risk staying within the female population if explicit efforts are not undertaken to involve men proactively. The benefits would still be important, but additional gains to gender equity can be realized by allowing women to demonstrate skills and knowledge to their male counterparts.

- **Local governance and conflict management** must be reformulated in future programs. A transparent selection process is required and should lead to improved participation. Local government must manage land distribution transparently, recognizing limited local supply and tensions over who rightly claims ownership of lands. CDC structures should be established prior to undertaking activities, and membership as well as leadership should be inclusive. **How:** publicize community development committees at the outset of program activities to generate widespread interest; also publicize transparent processes for membership and leadership. Create those committees and establish ground rules for reporting and collaboration before implementation of local governance and conflict management activities begin. **With whom:** collaboration with local government and traditional authorities should help to generate credibility for CDCs. **Why:** committees perceived as representative are more likely to gain the trust of community members, and clear guidelines for their own work and for collaboration with government and traditional structures should help to remove some of the ambiguity over land rights that often acts as a catalyst for local conflict.

## **V. SUMMARY EVALUATION & RECOMMENDATIONS**

### **1. Comparative Insights Across the Three DFAPs**

The three DFAPs took relatively similar approaches to BCC concerning nutrition and health activities. This may be a function of the fact that their messages and approaches needed to complement work being done by the government health structures and to reflect best practices in the industry. In many cases, the materials used to reinforce the trainings contained very similar content across the three DFAPs and were consistent with materials used by government actors. This continuity and complementarity meant that program beneficiaries (direct and indirect) received mutually reinforcing messages from multiple sources; this helps to explain why those with no contact with FFP DFAPs often expressed awareness of some of the same skills and knowledge.

All of the DFAPs trained a core group of community leaders, including the community development committees or local development committees and lead mothers, as trainers to begin the cascade process of training. While direct beneficiary trainings were fairly straightforward, all three DFAPs struggled with the extension to indirect beneficiaries. None of the three established rigorous coaching and management systems for the second line training of participants, though it should be noted that the scope was quite large and would thus require significant inputs and human capital. The materials used in trainings (posters, image boxes, and radio spots) were comparable across DFAPs.

One major distinction between the three DFAPs was that ADRA conducted literacy training for women as part of its Women's Empowerment Groups that proved to be more dynamic. The WEGs provided opportunities to address other issues and to build the knowledge and capacity of members simultaneously on their rights and roles in their communities' development. This approach to gender norms was more proactive than the training and awareness raising implemented by Mercy Corps and Food for the Hungry, though the listening groups established as part of the FH Tuendelee Pamoja program were also innovative. Regarding gender activities, all future programs must amplify their efforts to work with gatekeepers such as men, religious leaders and community leaders/elders to gain their support for improved gender relations.

### **2. Overall Best Practices and Strengths of the FFP Programs**

The evaluation team identified several areas of effective DFAP implementation. Some were consistent across all three DFAPS and others stood out as strengths of particular programs. In this section, we outline best practices identified during the course of the evaluation; in what follows we link these practices to specific recommendations.

### Consistent engagement that effectively transferred knowledge and skills

In each province, the evaluation team observed sustained commitment from the IPs. The infrastructural and security challenges were nearly constant, yet the participants and beneficiaries we interviewed expressed satisfaction that the programs were regular enough and thorough enough to ensure a transfer of knowledge and skills, at least to direct beneficiaries. In addition, local leaders indicated that the IPs remained in regular communication and engaged in active oversight to ensure that complications were addressed whenever possible.

### Literacy Trainings effectively promoted income generation and content learning regarding key project messages

Training in literacy for women in particular proved to be an important strength of the DFAP programs. This was especially true of the Jenga Jamaa II program operated by ADRA. The benefits of the literacy trainings were twofold: not only did participants engage in a learning process that will ultimately contribute to improved livelihoods through literacy, but the program also served as an entry point for introducing information about other important topics (nutrition, autonomy, etc.)

### Road Rehabilitation and Reforestation

The rehabilitation of roads does not count as a sustainable transfer of skills, but the evaluation team found that the road rehabilitation undertaken as part of the RISE program operated by Mercy Corps constituted one of the most important benefits to local communities, and a conduit for other sustainable goals. The improved roads proved to be critical in facilitating access to markets and the movement of goods, fulfilling one of the core objectives of the FFP initiatives. Coupled with food-for-work programs and other strategies for supporting maintenance of those roads, the roads can contribute to sustainable maintenance skills. Similarly, the reforestation projects improved local resilience to climate challenges; they also transferred skills and supported improved production by protecting soils.

### Farmers' Business Associations

The Farmers' Business Associations (FBAs) were strengths of each DFAP. One benefit is that they facilitate access to markets; they achieved this by formalizing farmers' roles and opportunities (to obtain credit, to stock yields, etc.). A second advantage of the FBAs is that they create opportunities for sustainable food security, by promoting storage opportunities and collaboration among producers. The organization of FBAs is

easily manageable by local leaders and participants, so if the existing FBAs are reinforced, they are likely to serve as sustainable outcomes of the DFAPs.

### Nutrition Information

All three DFAPs had success in building knowledge around nutrition for children under 5 years of age, maternal health, and hygiene. Advances in nutrition and health information were achieved largely through practical demonstrations, which constitutes a best practice. In some cases, the improved knowledge is generating demands for services that surpass the capacity of the national health structures, making local solutions critical.

### **3. Overall Constraints, Weaknesses, and Failures in Implementation**

Three important weaknesses limited the overall effectiveness of the DFAP programs: poor collaboration with government structures, an absence of credibility among the CDCs, and limited capacity to expand program benefits to indirect beneficiaries.

### Collaboration with Government Structures was inadequate to assure sustained outcomes

To ensure sustainability, local associations will need to establish strong relationships with government structures, such as the Ministry of Health and the Ministry of Agriculture. Local buy-in from indirect beneficiaries could also be improved if the IPs and the Government of DRC were to strengthen their collaboration and then expand the FFP initiatives. With the exception of improved collaboration between the RISE program from Mercy Corps and the GoDRC, the evaluation team did not see evidence of strong or improving collaboration between these parties.

### CDCs not selected or supported in ways that they achieved credibility in the communities they serve

Concerns frequently arose that the CDCs are not selected transparently and are not representative of the community. Specifically, the perception exists that the committees exist only for the purposes of the project, and thus generating buy-in from the village in support of CDC initiatives remains an elusive task. Furthermore, the evaluation team heard complaints from beneficiaries of the Tuendele Pamoja program from Food for the Hungry that the CDCs were set up after the distribution of resources, which limited the capacity of the committees to provide oversight of the distribution process. Had the committees been put in place first, the whole process may have been viewed as more legitimate. Even with better oversight of the distribution, however, the CDCs would have lacked credibility as a result of the selection process for members. Program beneficiaries expressed the view that CDCs were selected in opaque ways that may have benefited certain people at the expense of broader successes.

*The implementation of the cascades did not effectively disseminate knowledge and training to indirect beneficiaries*

Trainings in literacy, nutrition, and agricultural practices constitute some of the most important benefits of the FFP initiatives. Direct beneficiaries expressed clear gains from those programs. The programs were less effective, however, in ensuring that the gains spread to non-beneficiaries and indirect beneficiaries.

A system of cascade training was put in place by the DFAPs precisely for this reason—to transfer skills and knowledge from those who benefited directly to those who did not. The trainings themselves were effective and the cascade of knowledge in some instances did take place, but a lack of systematic follow-up and coaching techniques limited the sustainability of those skills transfers. Furthermore, interviews with non-beneficiaries suggested that those who did not benefit directly need some incentive to take part in cascading trainings with their fellow community members. Finally, from an evaluation standpoint, even where indirect benefits did spread, they are less visible and measurable as a result of the fact that indirect beneficiaries did not take part in the same types of organized activities.

#### **4. Overall Effectiveness of the Three FFP Programs in Achieving Objectives**

*Training Models: **Moderate Success (for Direct Beneficiaries)***

All three DFAPs demonstrated clear benefits to program participants. Notable gains came in the areas of literacy, nutrition, agricultural practices, savings, and family planning. However, there is little evidence of transfer to indirect beneficiaries.

*Links to Markets and Public Services: **Little Success***

The programs exhibited some successes in terms of generating access to markets and services. Notably, the FBAs helped to develop skills and provide organization that bolstered access to markets. However, there were numerous shortcomings. Programs sometimes started too late to be fully effective. Robust access to markets requires full collaboration with government structures. And additional training needs to focus on the entrepreneurial skills required for gaining entry into markets.

*Changing Household Incomes and Livelihoods: **Moderate Success***

Survey data collected as part of the evaluation suggest that beneficiaries enjoy improved incomes and livelihoods compared to their non-beneficiary counterparts: approximately 80% of beneficiary households reported some modest improvement, versus just 40% of non-beneficiary households. We noted several areas for improvement, however. The microfinance initiatives were effective, but interest rates for

borrowing need to be constrained. Literacy programs were a big success, but the benefits to incomes will likely come only after some time, and with ongoing coaching and teacher training. Women's Empowerment Groups also had a positive impact on the livelihood activities of women, though the extent to which those benefits will accrue to other women indirectly is unclear.

*Changes in Nutrition and Health: **Moderate Success***

All three DFAPs showed evidence of improving the nutrition of children and mothers, particularly through practical demonstrations. The evaluation team did not collect data on caloric intake or specific eating habits, but nurses, key informants, and focus group participants expressed important gains in awareness regarding positive health and nutrition behaviors. Women reported visiting clinics, vaccinating their children, and eating meals more frequently. Effects on child health measures will likely not be evident for some time, which is inconsistent with the stated objectives of the Mercy Corps, ADRA, and Food for the Hungry (to improve child health by project's end). Furthermore, DFAP efforts often overlapped with the work of other health and nutrition providers, especially in the case of the Mercy Corps DFAP. Better pre-implementation analysis would be able to identify unique intervention strategies.

*Changes in Gender Norms: **Moderate Success***

Focus group discussions and interviews conducted during the evaluation suggest that DFAP activities helped to improve gender equality norms and acceptance. Women seem to have become more cognizant of the important roles they fulfill and the value of those roles; they express a desire to be counted and recognized as contributors to household and community well-being. Men, however, too frequently expressed reluctance to see women as contributors beyond conventionally assigned roles. From a behavioral perspective, domestic violence does not appear to be on the wane, traditional domestic roles persist, and not enough opportunities exist to transition leaders of women's groups into leaders of other activities. A bright spot is the increased respect for girls' education.

*Disaster Risk Reduction: **Moderate Success***

Planting and reforestation initiatives, particularly those undertaken through the Jenga II and Tuendele Pamoja programs, were especially effective. Those initiatives will ultimately help to stave off crises related to climate change by preserving soil quality and preventing erosion. To be most effective, the nascent local initiatives associated with DFAP programs will need robust collaboration with government structures, and community early warning systems require both resources and authority in order to succeed long-term. Finally, shortcomings in the leadership credibility of the CDCs undermined what could have been greater success in reducing disaster risks.

### *Governance and Conflict Resolution:* **Little Success**

The DFAP programs were in some sense hamstrung by the necessity of working with local leaders to initiate improved governance. The RISE program effectively worked with farmers and herders regarding land tenure, but the durability of those efforts is less promising without full buy-in from both sides. The selection process for community leadership positions also posed a problem of credibility in terms of organizing conflict resolution measures.

### *Sustainability of Interventions:* **Moderate Success**

Trainings such as those orchestrated as part of the RISE program have created a foundation of knowledge that is likely to endure. Planting and construction will last so long as maintenance is prioritized both by communities and government structures. Microfinance initiatives are also likely to remain durable, but again, rigorous monitoring will be required and interest rates must be constrained. The keys to sustainability are broadly, strong collaboration with the national government, good cascade training of indirect beneficiaries, and incentives for non-beneficiaries to buy in. While many of the DFAP initiatives were successful, their durability hinges on these factors. To this point, there is some positive evidence, but that may not remain the case as the DFAP presence changes.

## **5. Recommendations for Follow-on Activities**

The strengths and weaknesses of each DFAP generated a set of recommendations outlined above. Here, we regroup those recommendations in order to suggest practical plans for follow-on activities.

**1) Literacy trainings should continue.** To improve upon the Food For Peace DFAP activities, trainings in subsequent FFP programs should put renewed emphasis on coaching and developing teacher-trainers from among the local population. Furthermore, literacy trainings should include oversight of multiple rounds of cascade training, along with internal reviews and coaching sessions related to those trainings. This will help to ensure that benefits accrue beyond the first-line beneficiaries. Other recommendations related to the language trainings include:

- Participant-developed materials that reinforce skills and reduce the emphasis on handout materials.
- Continued content-learning as part of the language training. Health, nutrition, agriculture, and other themes provide dual benefits of improved language skills along with improved awareness of critical development practices.

Language training programs should avoid placing an emphasis on handout materials. Unless participants themselves are contributing to the production of training

materials by developing their own drawings, drawings provided by the DFAP are non-sustainable and can potentially undermine the incentive of potential cascade beneficiaries to take part (if they feel they are missing out on materials that others before them received).

**2) Nutrition, sanitation, and health awareness activities should be a priority in future programming.** The activities should focus on practical demonstrations for women, particularly pregnant women and mothers of young children. One potential improvement in nutrition trainings for women is to create organized activities for women beneficiaries to transfer knowledge and skills to their male counterparts. Doing so reinforces lessons learned and also can serve important gender equality goals. Two words of caution are in order regarding nutrition, sanitation, and health awareness campaigns:

- Implementing partners should avoid excessive overlap with the activities of other external partners, local churches, etc. Instead, they should bolster pre-intervention analysis to determine unique areas of intervention. Or, to the extent that overlapping activities are the most desirable, they should collaborate with other actors to sequence the interventions and carefully measure the contributions of each.
- Implementing partners should avoid heavy reliance on the distribution of nutritional supplements or other handouts. Like the literacy materials, these handouts can dissuade future participation.

**3) Community Development Committees and other local committees that address Disaster Risk Reduction and Conflict Management must be reformulated.** The concept is practical and important, but future iterations must do a better job of ensuring transparent operating processes. Membership should be determined in a representative fashion, particularly when committees represent multiple villages. Leadership should be in place prior to undertaking project initiatives, and some proactive activities could help establish the credibility of CDCs. Furthermore, future DFAPs can:

- Include as part of the DFAP activities a collaborative, community-wide process for selecting leaders and members.
- Ensure collaboration with key government structures in advance of DFAP activities, and carefully delineate the roles of local committees to ensure that they work in concert with, and not counter to, local government actors.
- DFAPs can experiment with a range of techniques to improve transparency and representativeness:
  - Female quotas

- Rotating positions
- Scorecards for leadership performance
- Open vote counting

**4) Farmers Business Associations and Reforestation projects should be a central aspect of future FFP programming.** FBAs can be given the lead in local agricultural initiatives, and regular awareness campaigns should be conducted by the FBAs to serve the interests of small producers. Activities aimed at seed variation and reforestation may be perceived as non-sustainable, material benefits, but if coupled with skills transfers through work and maintenance initiatives, those activities can generate lasting capacity building. The same strategies can be used to transform road construction into a sustainable capacity building exercise. In addition:

- Future DFAPs should reinforce links between FBAs and credit associations in order to bolster production and market access. Regular collaboration and streamlined links that small farmers and producers can exploit will generate enhanced outcomes.
- However, excessive interest rates must be constrained. This is true of credit associations serving multiple interest groups, from farmers to women's groups to producers.

**5) Gender-based initiatives should be made more participatory.** Awareness of the importance of gender equality seems to have improved among both women and men as a result of DFAP activities. However, in order to transform that awareness into behavioral change, men must actively benefit from women's gains and must see those gains in action. Regarding how gender-based initiatives might be made more participatory, we recommend:

- Skills transfers from women to men (as noted above)
- Involving more "gatekeepers", such as women leaders and men with standing in the community, in order to mitigate resistance and provide role models in gender equity practices.
- Organized initiatives that involve both men and women, starting in areas that are not perceived as gender-specific (i.e. cultivating fields) and then transitioning into other activities in the household and marketplace.
- Future DFAPs should continue to promote savings programs for women but should create incentives and constraints so that husbands do not extract the resource gains of their wives or otherwise undermine changes that can benefit the wellbeing of the household.

These recommendations would be helpful in the sense that they could reasonably be expected to more consistently expand the value of gender-based initiatives to men. The

evidence cited for both the Mercy Corps program and the FH program convinced us that men remain somewhat skeptical of initiatives to empower women. We expect that if men see and learn from the empowerment of women, a double dividend can be attained: women will reinforce their capacity by sharing skills with men, and men will be witness to the value added from women's empowerment.

## VI. CONCLUSION

The Democratic Republic of Congo (DRC), although vast in population and natural resources, has experienced ongoing instability. This is particularly true in the eastern region, where rebel forces have caused widespread violence and displacement of citizens since 1998 despite various attempts to establish peace. Risks due to climate change are also increasing. In this context, the need for programs that fortify household livelihoods and opportunities is incredibly high. The Food For Peace initiatives undertaken jointly by Mercy Corps, ADRA, and Food for the Hungry aimed to address these broad concerns by focusing on agriculture, health and nutrition, and resilience. As secondary goals, the initiatives aimed to improve gender equality and governance.

The evaluation uncovered a number of successes outlined above, including literacy programs, reforestation initiatives, microfinance programs, and the establishment of Farmers' Business Associations. Implicit in those successes are two important elements: First, information and knowledge transfers are perhaps the easiest of interventions and often the most effective. Behaviors changed when beneficiaries, particularly women, took part in informational sessions. Expanding initiatives of this sort is not only cost effective, but also sustainable, so long as beneficiaries themselves become leaders and information providers. Second, the successes highlight the importance of addressing the incentives of key actors. Government structures must see a payoff to supporting DFAP activities; participants must see a reason to continue in the programs; non-beneficiaries must be motivated to draw on the gains of their counterparts; and local leaders must be incentivized to work in the interest of their community members. The successes of the Food For Peace initiatives suggest that all of this is possible and can further improve the program's success.

There were also some shortcomings in the implementation of the DFAP activities. Collaboration across sectors and entities, and an ongoing relationship with national political institutions, are critical but were often neglected when implementing partners, local actors, and government representatives remain isolated in their interests. Transparency hindered some of the DFAP activities in part because of the perception of unfair advantages accruing to some at the expense of others. This highlights the importance of transparent processes; even when local leaders and actors have the community's best interests at heart, perceptions matter. A third challenge comes in incentivizing and then observing the transfer of skills and knowledge from direct beneficiaries to indirect beneficiaries and newcomers to FFP priorities. The effort was often apparent, but the follow-up was not always as strong.

The evaluation of the FFP initiatives in Eastern DRC leads to three final lessons. First, programs that involve concrete, localized activities that individuals and households can

partake in without excessive reliance on government, outside actors, or handouts—such as literacy learning, planting, and farmer organizations—are often most effective and most sustainable. Second, to achieve sustainable success, activities require robust monitoring, coaching, and a plan for oversight. This does not need to come from outside sources or Implementing Partners; local actors can do that work most effectively and most efficiently, but it is critical to build those elements into training programs. Finally, the evaluation suggests that many of the FFP activities can and should be expanded, though USAID should be mindful of overlap and of cultivating dependence on outside aid. Successful activities from this FFP initiative indicate that the path to sustainable improvements in food security come when local actors benefit from the programs and then engage with systematic strategies for passing those benefits to others in the community.

# ANNEXES

**A1. Villages visited during the FFP evaluation.**

<b>North Kivu (MC)</b>	<b>South Kivu (ADRA; FH)</b>	<b>Tanganyika (FH)</b>
BUTARE	KAGUNGA	LYAPENDA
BAMBO CENTRE	MUHONGOZA	KABUYU
KATENDERE	MUSUSU3 (FH)	KATAKI
KIVUMU	HONGERO	LUKALANGA
MAGHERIA	KASHEKE	MULENDA KAZADI
RUSHEGE	KATUDU (FH)	KABULO
RWABANGI	NUNDU	KIKANGO
MUHANGA	KAHAMA	MIKETO
MUNOLI	MUNENE	MOKE
MUSIENENE	BIRIBA	
LUKANGA	KAGANDO	
NGELEZA	KATONGO	
	MWEGERERA (FH)	
	RUNINGU	
	RUTEMBA	

## A2. Documents reviewed by the TMG Evaluation Team

Mercy Corps
<ul style="list-style-type: none"><li>▪ Proposal</li><li>▪ Statement of Work</li><li>▪ Proposed Indicators</li><li>▪ Results Framework</li><li>▪ Baseline Report</li><li>▪ Annual Report and IPTT Years (1,2,3,4,5)</li><li>▪ Pre-midterm Presentation</li><li>▪ Midterm Evaluation Report</li><li>▪ MYAP FY12 Narrative Report</li><li>▪ Success Stories FY16</li><li>▪ Status Map</li><li>▪ Strategic Objective Map and Project Site List</li><li>▪ Quarterly Reports</li><li>▪ Agricultural Value Chains Analysis and Market Development Strategic Plan</li></ul>
ADRA
<ul style="list-style-type: none"><li>▪ Proposal</li><li>▪ Baseline Report</li><li>▪ Annual Report and IPTT Years (1,2,3,4,5)</li><li>▪ 2012 Prep Narrative</li><li>▪ Project Sites Description</li><li>▪ Formative Research Outline</li><li>▪ Annual Report Operational Research</li><li>▪ Annual Report FY2011</li><li>▪ Mid Term Evaluation Report</li><li>▪ Annual Survey Reports</li><li>▪ Commodity Status Reports</li><li>▪ Project Site List</li><li>▪ Health Services Assessment</li><li>▪ Formative Research Report</li><li>▪ Marketing Presentation</li><li>▪ WEG Sociocultural Study Report</li></ul>
Food for the Hungry
<ul style="list-style-type: none"><li>▪ Annual Reports and IPTT Years (1,2,3,4,5)</li><li>▪ NEFAP Proposal, Revised</li><li>▪ Results Framework</li><li>▪ NEFAP Baseline Survey Report</li><li>▪ Final Report</li><li>▪ Gender Barrier Analysis</li><li>▪ Midterm Evaluation Report</li><li>▪ Results Framework</li><li>▪ Organigram</li><li>▪ Program Site list</li><li>▪ Program Management Team Meeting Notes</li></ul>

### A3. Summary Table of Mercy Corps Program

Findings	Conclusions	Recommendations
Respondents indicate successful transfer of knowledge nutrition, agr, savings, value chain	SBCC was effective, successfully transferring knowledge to beneficiaries.	<b>SBCC trainings</b> should be continued, but with a clear and improved process for handing over training leadership and cascading. Coach first-line beneficiaries.
Non-beneficiaries not reached; respondents express breakdown after direct beneficiaries.	Follow-on trainings were weaker, and spillover to non-beneficiaries was poor.	
Women and men report performing same traditional roles, though awareness changed.	SBCC activities help to alter perceptions of men's and women's roles.	
Respondents unclear about how programs will continue and handover of responsibility.	Lack of faith that programs will continue effectively after the FFP programs end.	
Respondents report help from CIGs in producing and marketing; getting loans	CIGs helped production and were bolstered by microfinance programs.	<b>Local interest groups and associations</b> should be fortified and continued as a means to generate shared resilience. They must be well organized and capitalize on initial excitement.
More onion and cassava stored; aided by participation in agr. Associations.	Agr. programs increased household incomes, esp. through storage and better sales.	
Respondents express lack of formal banking, reliance on VSLA to help in times of need.	VSLA serves as critical safety net, improving access to health care, offsetting crisis costs	
Participants in associations report satisfaction: credit access, better food access.	Project associations (LCD, VSLA, CIG, VAA) improved access to credit and food.	
Participants report frequent interaction with nurses and lead mothers	Awareness has increased on health and nutrition issues (vaccines, diet, infant care)	<b>Nutrition programs</b> should focus on clear area of differentiation, or else work in coordination with other external entities.
Participants unclear what program provides information; not only from FFP.	A high level of program duplication exists regarding health and nutrition.	
Increased sales in markets as a result of road access.	Agricultural service roads upgraded through food-for-work initiatives were critical.	<b>Road and other value chain projects</b> should rely on food-for-work initiatives. A clear timetable is critical to their success.
Complaints of adjustments and delays in value chain activities.	Market access and value chain activities realized only limited success.	
Stakeholders explained plans for addressing natural disasters; not yet widespread.	CEWS have created a foundation for DRR; ongoing support is needed.	<b>Local govt, DRR, and conflict res.</b> will depend on balance of input from stakeholders and a clear plan for ongoing support. USAID should gradually transfer leadership.
Govt, community, and private interests report working together, with diverse interests.	CARGs are critical to local governance, provided three components work together.	
Late start with Simama and RACs; people are on board but need follow-up	Simama activities have been effective but require organized follow-on plans; late start.	<b>Programs must begin on time</b> and emphasize training. Phased subsidies, small seed packets, participant-produced materials help.
Second line beneficiaries report frustration with lack of materials, seed, etc.	Communities perceive material handouts as central component of programs.	

#### A4. Summary Table of ADRA Program

Findings	Conclusions	Recommendations
Participants of lit training grateful for new knowledge (reading, nutrition, etc)	Literacy trainings had tangible impact on recipients.	<b>Literacy coaching</b> must take place so that beneficiaries can train and teach second-level recipients.
Frustration among those who could not participate in lit trainings.	Literacy trainings were limited and did not spill over to non-beneficiaries.	
Noted anti-erosion benefits from reforestation, spillover from water access	Soil and water projects helped whole communities with production and mrkts	<b>Farmer Business Associations</b> should take lead in local agricultural initiatives. An FBA action plan should be developed for sustainability. They should provide regular awareness sessions. Agr. Materials can be provided in exchange for work.
Satisfaction from reforestation, seed varieties; little for those outside program	Benefits in market access were only recognized by direct beneficiaries.	
FBA's monitored prices, sought storage outlets; small producers took advantage.	FBA's shared information that helped producers with storage and pricing.	
Cooperatives with huskers and mills realized better returns.	Agr. Transformation materials helped producers increase mkt potential.	
Women in lit. programs expressed greater confidence, collaboration, mkt success	Women were empowered by literacy and capacity building.	
Women reported great satisfaction with WEG; new collaborations emerged.	Women's empowerment groups helped women to collaborate and raise incomes.	<b>Women's empowerment</b> and literacy groups should continue, with local leadership. Strategies should be developed to transfer health, nutrition, and gender info from women to men. Rely on women to build capacity of men in gender norms.
Women report better understanding of ANC protocols; change in health habits.	Community liaison and health trainings effectively reached women beneficiaries.	
Men expressed that gender relations are good; express positive training impact.	Men view male/female relations as sound; they perceive less need for change.	
Men and women acknowledged important and changing role for women.	Communication on gender issues helped improve attitudes on gender roles.	
Participants expressed uncertainty about how represented in multi-village CDC.	CDCs play critical role in local gov, but representativeness is a big challenge	<b>Community Development</b> and Planning committees must begin with clear representation/leadership protocols.
Members of CDCs expressed no plan for autonomous continuation.	No sustainable strategy exists for making CDCs autonomous and institutionalized.	
CSPA committees lacked organization; members had difficulty explaining roles.	CSPAs were not fully effective; clear action plans are needed.	

## A5. Summary Table of Food for the Hungry Program

Findings	Conclusions	Recommendations
Frustration with training times, locations, and duration that varied too much.	Unclear organization and monitoring undermined success of SBCC trainings.	<b>Training models</b> should be continued, but with consistency, tailored to local contexts, and with dedicated monitoring and follow-up on cascade approach. Programs can incorporate the production of learning materials for future use, without promoting handouts.
Some participants report resorting to engrained norms and practices post-trainings.	Spread of training benefits to non-beneficiaries depends on follow-up.	
Positive response to practical demonstrations; communication afterward broke down.	Cascade training positive as long as cascade is reinforced; handouts sought.	
Better reported use of vaccines; reports of improved nutritional awareness, clinic use.	Health trainings changed behaviors, especially of women.	
Mis-match in agricultural/livestock training needs for some respondents.	Failure to tailor trainings to local contexts undermines their sustainability.	
Respondents wanted learning materials to continue education.	Lack of supporting material for educational trainings.	
Labor and land associations emerged; participants report using more varieties.	Agricultural activities created new organizations and innovations.	<b>Agricultural loan programs and reforestation</b> initiatives should be continued. Interest rates for loans must be brought down, and agricultural subsidies should be gradually phased out.
Reports of obtaining small loans, aided by organized nature of associations.	Loan programs effectively supported credit associations and increased credit access.	
Widespread complaints of difficulty paying high rates; use of loans to buy food stocks.	Credit interest rates are high, and some families use credit for consumption.	
Households report benefitting from food-for-work; appreciation for new timber and soil.	Reforestation helps soil, provides timber, and serves as a food-for-work opportunity	
Participants like low prices for seeds, but do not want to pay more.	Subsidization of seed multiplication stations undermines sustainability.	
Surveys show awareness of steps to improve sanitation/health among all respondents.	Child care, sanitation, and water improved, but not more than non-beneficiaries.	<b>Health, nutrition, and gender programs</b> should continue and should bolster their efforts to reach men as well as women.
Men and women note importance of women's roles; men still sanctioned beatings	Gender equality awareness improved, though behavioral challenges persist.	
Participants complained about selection process; expressed little trust in members	CDC effectiveness was limited by selection processes and monitoring.	<b>Local governance and conflict management</b> must be reformulated: a transparent selection process is required and should lead to improved participation. Local government must manage land distribution transparently.
Respondents noted presence of concerned, influential leaders where confl mgt worked	Where conflict management improved, influential local leaders were involved.	
Frustration over other community members sapping up land for cultivation.	Credit can contribute to land disputes by allowing people to cultivate more land.	

## A6. List of Key Informant Interviews

ENTRETIENS INDIVIDUELS: YVES RENAUD (Technical Specialist)					
			KATANGA		
DATE	AIRE DE SANTE	COMMUNAUTE	PROVINCE	TITRE/TRAVAIL	SUJET
11-Feb	Kabulo	Kabulo (FH)	Katanga	<i>Infirmier Titulaire Adjoint</i>	<i>Guide des entretiens</i>
11-Feb	Kabulo	Kabulo (FH)	Katanga	<i>Femme Chef de Village</i>	<i>Guide des entretiens + Gouvernance</i>
12-Feb	Miketo	Kabuyu (FH)	Katanga	<i>Chef de Village</i>	<i>Guide des entretiens + Gouvernance</i>
12-Feb	Miketo	Kabuyu (FH)	Katanga	<i>Mere Leader</i>	<i>Guide des entretiens + Finances</i>
12-Feb	Miketo	Kabuyu (FH)	Katanga	<i>Pasteur</i>	<i>Guide des entretiens</i>
12-Feb	Miketo	Kabuyu (FH)	Katanga	<i>Cultivateur et commercant</i>	<i>Guide des entretiens + AGR</i>
12-Feb	Miketo	Kabuyu (FH)	Katanga	<i>Pasteur</i>	<i>Guide des entretiens</i>
13-Feb	Miketo	Katuki (FH)	Katanga	<i>Femme Leader</i>	<i>Guide des entretiens</i>
13-Feb	Miketo	Katuki (FH)	Katanga	<i>Pasteur</i>	<i>Guide des entretiens</i>
16-Feb	Lyapenda	Lyapenda (FH)	Katanga	<i>Femme Secretaire CDC</i>	<i>Guide des entretiens + CDC</i>
16-Feb	Lyapenda	Lyapenda (FH)	Katanga	<i>Cultivateur non beneficiaire</i>	<i>Guide des entretiens + Agriculture</i>
16-Feb	Lyapenda	Lyapenda (FH)	Katanga	<i>Ancienne Femme Leader</i>	<i>Guide des entretiens</i>
17-Feb	Maseba	Moket (FH)	Katanga	<i>Chef de Groupement</i>	<i>Guide des entretiens</i>
17-Feb	Maseba	Moket (FH)	Katanga	<i>Pasteur</i>	<i>Guide des entretiens</i>
17-Feb	Maseba	Moket (FH)	Katanga	<i>Femme Leader CDC</i>	<i>Guide des entretiens + CDC</i>
17-Feb	Maseba	Moket (FH)	Katanga	<i>Fermier President CDC</i>	<i>Guide des entretiens + CDC</i>
17-Feb	Maseba	Moket (FH)	Katanga	<i>Femme Fermier Leader</i>	<i>Guide des entretiens + Agriculture</i>
			<i>Sud Kivu</i>		
DATE	AIRE DE SANTE	COMMUNAUTE	PROVINCE	TITRE/TRAVAIL	SUJET
24-Feb	Kalehe	Kasheke (WV)	Sud Kivu	<i>Chef de village</i>	<i>Guide des entretiens + Gouvernance</i>

24-Feb	Kalehe	Kasheke (WV)	Sud Kivu	<b>Beneficiaire homme</b>	Guide des entretiens
24-Feb	Kalehe	Kasheke (WV)	Sud Kivu	<b>Beneficiaire homme et femme</b>	Guide des entretiens
25-Feb	Kasheke	Kasheke (WV)	Sud Kivu	<b>Chef de Centre</b>	Guide des entretiens
25-Feb	Kasheke	Kasheke (WV)	Sud Kivu	<b>Chef de CEP</b>	Guide des entretiens + Agriculture
25-Feb	Kasheke	Kasheke (WV)	Sud Kivu	<b>Fermiere non beneficiaire</b>	Guide des entretiens
25-Feb	Kasheke	Kasheke (WV)	Sud Kivu	<b>Femme non beneficiaire</b>	Guide des entretiens
26-Feb	Kakono	Katudu (FH)	Sud Kivu	<b>Chef de localite</b>	Guide des entretiens
26-Feb	Kakono	Katudu (FH)	Sud Kivu	<b>Fermier Leader</b>	Guide des entretiens + Agriculture
26-Feb	Kakono	Katudu (FH)	Sud Kivu	<b>Femme Leader</b>	Guide des entretiens
26-Feb	Kakono	Katudu (FH)	Sud Kivu	<b>Cultivateur beneficiaire</b>	Guide des entretiens + Agriculture
26-Feb	Kakono	Katudu (FH)	Sud Kivu	<b>Cultivateur beneficiaire</b>	Guide des entretiens
27-Feb	Kokono	Mwegerera (FH)	Sud Kivu	<b>Femme Leader</b>	Guide des entretiens
27-Feb	Kokono	Mwegerera (FH)	Sud Kivu	<b>Fermier Leader</b>	Guide des entretiens
27-Feb	Kokono	Mwegerera (FH)	Sud Kivu	<b>Fermier</b>	Guide des entretiens
29/02 and 05/03	Sange	Biriba (ADRA)	Sud Kivu	<b>Fermiere</b>	Guide des entretiens + Agriculture
29/02 and 05/03	Sange	Biriba (ADRA)	Sud Kivu	<b>President cooperative</b>	Guide des entretiens + Cooperative
1-Mar	Nundu	Khahama (ADRA)	Sud Kivu	<b>Chef de village</b>	Guide des entretiens + Gouvernance
1-Mar	Nundu	Khahama (ADRA)	Sud Kivu	<b>Femme du Chef de Village</b>	Guide des entretiens + Gouvernance
1-Mar	Nundu	Khahama (ADRA)	Sud Kivu	<b>Femme beneficiaire</b>	Guide des entretiens
1-Mar	Nundu	Khahama (ADRA)	Sud Kivu	<b>Femme beneficiaire</b>	Guide des entretiens + Finances
1-Mar	Nundu	Khahama (ADRA)	Sud Kivu	<b>Pecheur</b>	Guide des entretiens
2-Mar	Nundu	Munene (ADRA)	Sud Kivu	<b>Chef de Village</b>	Guide des entretiens
2-Mar	Nundu	Munene (ADRA)	Sud Kivu	<b>Membre du CDC</b>	Guide des entretiens + CDC

2-Mar	Nundu	Munene (ADRA)	Sud Kivu	<b>President du CDC</b>	Guide des entretiens + CDC
2-Mar	Nundu	Munene (ADRA)	Sud Kivu	<b>Secrétaire du CDC</b>	Guide des entretiens + CDC
2-Mar	Nundu	Munene (ADRA)	Sud Kivu	<b>Femme bénéficiaire</b>	Guide des entretiens
2-Mar	Nundu	Munene (ADRA)	Sud Kivu	<b>Infirmier d'Etat</b>	Guide des entretiens
3-Mar	Ruzizi	Kagunga (ADRA)	Sud Kivu	<b>President du CDC</b>	Guide des entretiens + CDC
3-Mar	Ruzizi	Kagunga (ADRA)	Sud Kivu	<b>Femme President du CEP</b>	Guide des entretiens + CEP
3-Mar	Ruzizi	Kagunga (ADRA)	Sud Kivu	<b>Membre du SCAP</b>	Guide des entretiens + SCAP
3-Mar	Ruzizi	Kagunga (ADRA)	Sud Kivu	<b>Chef d'Avenue</b>	Guide des entretiens
3-Mar	Ruzizi	Kagunga (ADRA)	Sud Kivu	<b>Chef de Quartier</b>	Guide des entretiens
3-Mar	Ruzizi	Kagunga (ADRA)	Sud Kivu	<b>Tresoriere AGR</b>	Guide des entretiens + AGR
4-Mar	Kaliba	Rutemba (ADRA)	Sud Kivu	<b>Chef d'Avenue</b>	Guide des entretiens
4-Mar	Kaliba	Rutemba (ADRA)	Sud Kivu	<b>Chef d'Avenue</b>	Guide des entretiens
4-Mar	Kaliba	Rutemba (ADRA)	Sud Kivu	<b>Femme Leader AGR</b>	Guide des entretiens + AGR
4-Mar	Kaliba	Rutemba (ADRA)	Sud Kivu	<b>Femme Leder Agricole</b>	Guide des entretiens + Agriculture
4-Mar	Kaliba	Rutemba (ADRA)	Sud Kivu	<b>Fermier non bénéficiaire</b>	Guide des entretiens
			<b>Nord Kivu</b>		
<b>DATE</b>	<b>AIRE DE SANTE</b>	<b>COMMUNAUTE</b>	<b>PROVINCE</b>	<b>TITRE/TRAVAIL</b>	<b>SUJET</b>
10-Mar	Bambo	Katendere	Nord Kivu	<b>Chef de village</b>	Guide des entretiens + Gouvernance
10-Mar	Bambo	Katendere	Nord Kivu	<b>Papa Leader (CLD)</b>	Guide des entretiens + CLD
10-Mar	Bambo	Katendere	Nord Kivu	<b>Fermier</b>	Guide des entretiens
10-Mar	Bambo	Katendere	Nord Kivu	<b>Femme non bénéficiaire</b>	Guide des entretiens
11-Mar	Bambo	Bambo Centre	Nord Kivu	<b>President du CLD</b>	Guide des entretiens + CLD
11-Mar	Bambo	Bambo Centre	Nord Kivu	<b>Fermier bénéficiaire</b>	Guide des entretiens
11-Mar	Bambo	Bambo Centre	Nord Kivu	<b>Femme non bénéficiaire</b>	Guide des entretiens
11-Mar	Bambo	Bambo Centre	Nord Kivu	<b>Chef de village</b>	Guide des entretiens + Gouvernance
12-Mar	Bambo	Butare	Nord Kivu	<b>Chef de village</b>	Guide des

					<i>entretiens + Gouvernance</i>
12-Mar	Bambo	Butare	Nord Kivu	<b>President du CARG</b>	<i>Guide des entretiens + Agriculture</i>
12-Mar	Bambo	Butare	Nord Kivu	<b>Fermier beneficiaire</b>	<i>Guide des entretiens + Agriculture</i>
12-Mar	Bambo	Butare	Nord Kivu	<b>Femme non beneficiaire</b>	<i>Guide des entretiens</i>
13-Mar	Tongo- Rushege	Rwabangi	Nord Kivu	<b>Infirmier titulaire</b>	<i>Guide des entretiens</i>
13-Mar	Tongo- Rushege	Rwabangi	Nord Kivu	<b>Secetaire du CLD</b>	<i>Guide des entretiens + CLD</i>
13-Mar	Tongo- Rushege	Rwabangi	Nord Kivu	<b>Femme non beneficiaire</b>	<i>Guide des entretiens</i>
13-Mar	Tongo- Rushege	Rwabangi	Nord Kivu	<b>Fermme beneficiaire</b>	<i>Guide des entretiens + AGR</i>
14-Mar	Tongo- Rushege	Kivumu	Nord Kivu	<b>Pasteur</b>	<i>Guide des entretiens</i>
14-Mar	Tongo- Rushege	Kivumu	Nord Kivu	<b>Maman Leader</b>	<i>Guide des entretiens</i>
14-Mar	Tongo- Rushege	Kivumu	Nord Kivu	<b>Fermier beneficiaire</b>	<i>Guide des entretiens + Agriculture</i>
14-Mar	Tongo- Rushege	Kivumu	Nord Kivu	<b>Fermier non beneficiaire</b>	<i>Guide des entretiens</i>
15-Mar	Tongo Rushege	Rushege	Nord Kivu	<b>Infirmier laborantin</b>	<i>Guide des entretiens</i>
15-Mar	Tongo Rushege	Rushege	Nord Kivu	<b>Maman Leader</b>	<i>Guide des entretiens</i>
15-Mar	Tongo Rushege	Rushege	Nord Kivu	<b>Maman Leader</b>	<i>Guide des entretiens</i>
15-Mar	Tongo Rushege	Rushege	Nord Kivu	<b>Fermiere non beneficiaire</b>	<i>Guide des entretiens + Agriculture</i>

ENTRETIENS INDIVIDUELS: BARTHELEMY KALAMBAYI (Technical Specialist)

TANGANYIKA

Date	Communauté	Sexe	Activité principale
2/11/2016	Village Mulenda Kazadi	Masculin	Entretiens sur les activités de FH sur lesthématiques de l'évaluation
2/12/2016	Village Mulenda Kazadi	Masculin/Féminin	Entretien avec le Chef Miketo, sa femme et l'Intérimaire du Chef Miketo sur les activités de FH sur lesthématiques de l'évaluation
12/02/2016	Village Mulenda Kazadi	Féminin	<b>Entretien avec 4 avec les femmes leaders</b>
12/02/2016	Village Mulenda Kazadi	Masculin	Entretien avec l'Infirmier Titulaire Adjoint Centre de sante
12/02/2016	Village Mulenda Kazadi	Féminin	Entretien avec une Femme Leader
12/02/2016	Village Mulenda Kazadi	Masculin	Entretien avec un Pasteur
12/02/2016	Village Mulenda Kazadi	Masculin/Féminin	Femme leader et 1 Fermier leader/Enseignant
2/13/2016	VILLAGE DE KATAKI	Féminin	Entretien avec 1 femme leader
2/13/2016	VILLAGE DE KATAKI	Féminin	Entretien 1 Femme Leader
2/13/2016	VILLAGE DE MUSHABA	Féminin	Entretien sur le Projet Tuendelee pamoja/Food for the Hungry
2/13/2016	VILLAGE DE MUSHABA	Masculin	Entretien superviseur de la station semence
2/16/2016	VILLAGE LUKALANGA	Masculin	Entretien le pasteur KAFINDO KALOMBE
2/16/2016	VILLAGE LUKALANGA	Masculin	Entretien Avec le CHEF MUKULI
2/16/2016	VILLAGE LUKALANGA	Masculin	1. Entretien avec Fermier Leader MUKULI ZOMBE Marcel
2/16/2016	VILLAGE LUKALANGA	Féminin	1. Entretien avec une maman leader
2/17/2016	VILLAGE LYAPENDA	Masculin	Entretien avec LE VICE PRESIDENT CDC KIPOKA NDAILE
2/17/2016	Village : KIKANGO	Masculin	Entretien avec un fermier leader KABANDA CESAR
2/17/2016	Village : KIKANGO	Masculin	Entretien avec le fermier leader BIENVENU MUSEBA
2/17/2016	Village : KIKANGO	Masculin	Entretien avec l'enseignant WAGU AUGUSTIN
2/17/2016	Village : KIKANGO	Masculin	Entretien avec NGADWE KATANDE, KULIMA KABULO , KAMBAYI KYABU

SUD KIVU

2/24/2016	VILLAGE MUHONGOZA	Masculin	Entretien avec PASTEUR 8 <sup>e</sup> CEPAC : BAHATI
	VILLAGE MUHONGOZA	Masculin	Entretien avec l'Infirmier Titulaire du Centre de Santé de MUHONGOZA
	VILLAGE MUHONGOZA	Masculin	Entretien avec le Président de la société civile Mr. MWANGILA INGUZI
	VILLAGE MUHONGOZA	Masculin	Entretien avec BASILWANGO WABENGA : Président CDC MUHONGOZA et Directeur de l'EP MUHONGOZA
	VILLAGE MUHONGOZA	Féminin	Entretien avec GODELIVE INGUZI : membre CDC (multiplication des rejets)
2/25/2016	GROUPEMENT MBINGA/VILLAGE LWENGE/KASHEK E	Masculin	Entretien avec Alphonse KALINDI
	GROUPEMENT MBINGA/VILLAGE LWENGE/KASHEK E	Féminin	Entretien avec la MERE CHEF DE GROUPEMENT
	GROUPEMENT MBINGA/VILLAGE LWENGE/KASHEK E	Masculin	Entretien Avec le PRESIDENT DU COMITE DES PARENTS : Gomer NYAKEZI
2/26/2016	GROUPEMENT : LUBONA/VILLAGE : MUSUSU 3		Entretien avec le CHEF DU VILLAGE MUSUSU 3, JUSTIN MUGARA ET HORUCIRI JACK
2/26/2016	GROUPEMENT : LUBONA/VILLAGE : MUSUSU 3	Féminin	Mère Leader MWENZE NZIGURE
2/26/2016	GROUPEMENT : LUBONA/VILLAGE : MUSUSU 3	Masculin	SALVATOR MUKANISA : SECRETAIRE CDC
2/26/2016	GROUPEMENT : LUBONA/VILLAGE : MUSUSU 3	Féminin	NABWAMA MAREGEKO : femme paysanne
2/27/2016	Village : MWEGERERAI	Masculin	Entretien avec Mr. BIHIZIRE KAHIRA
2/27/2016	Village : MWEGERERAI	Masculin	Entretien avec Mr. INA :
2/27/2016	Village : MWEGERERAI	Masculin	Entretien avec Mr. IREZETE M'NAMUGADA : Fermier leader
6/29/2016	VILLAGE : BIRIBA	Masculin	Entretien avec MUTOTO RUBONEZA : Président de la jeunesse BIRIBA
6/29/2016	VILLAGE : BIRIBA	Masculin	Entretien avec Mr. BALEKE LUMU : Notable du quartier
6/29/2016	VILLAGE : BIRIBA	Masculin	Entretien avec Mr. ZIHINDULA René: leader
3/1/2016	VILLAGE : NUNDU	Masculin	Entretien avec 3 leaders
3/1/2016	VILLAGE : NUNDU	Masculin	Entretien avec IDI JAQUES SUMAILI : Relais communautaire
3/1/2016	VILLAGE : NUNDU	Féminin	Entretien avec: MULEBI SAFI Mère leader

3/1/2016	VILLAGE : NUNDU	Féminin	Entretien avec SALIMA AMISI : agricultrice
3/1/2016	VILLAGE : NUNDU	Féminin	MAKJAMBE LUSHIKANA Jeune leader
3/2/2016	VILLAGE : KATONGO	Masculin	ENTRETIEN Avec RAMAZANI BILONDA Chef du village
3/2/2016	VILLAGE : KATONGO	Masculin	SAIDO SENAHURUGU Chef adjoint du village
3/2/2016	VILLAGE : KATONGO	Féminin	Entretien avec NEEMA FATUMA Maman leader
3/2/2016	VILLAGE : KATONGO	Féminin	Entretien avec TOBO NGEMBELECHI, femme allaitante
3/2/2016	VILLAGE : KATONGO	Féminin	Entretien avec PASSY NGOYERA Agricultrice
3/3/2016	VILLAGE : RUNINGU	Masculin	SHEKUBWA jacques, directeur de l'E.P.
3/3/2016	VILLAGE : RUNINGU	Masculin	1. Entretien avec Mr WENDO KITABU WILONDA PROSPER/ PREFET D'ECOLE (INSTITUT TECHNIQUE AGRICOLE NYAMUZIBA/RUNINHU
3/3/2016	VILLAGE : RUNINGU	Masculin	Entretien avec Mr. KIPEO SHEFARANGA Agriculteur
3/3/2016	VILLAGE : RUNINGU	Masculin	1. Entretien avec URAHA NABIGANE/Agricultrice
3/3/2016	VILLAGE : RUNINGU	Masculin	Entretien avec une femme Agricultrice
3/4/2016	VILLAGE : KAGANDO	Masculin	<u>Entretien avec 3 personnes: IMANAN KALENGA ASUMANI/Secrétaire notable; KASHIDI KAPANGANA José /Secrétaire notable; TOTO RUNAGINA/CONSEIL AGRICOLE</u>
3/4/2016	VILLAGE : KAGANDO	Féminin	Entretien avec :FEZA MARIE / non bénéficiaire.
3/4/2016	VILLAGE : KAGANDO	Féminin	1. Entretien avec LALIA LAHERI Maman leader.
3/4/2016	VILLAGE : KAGANDO	Masculin	Entretien avec KAZEYA RUKUKUYE Président CDC Kagando
3/5/2016	VILLAGE : RUNINGU	Masculin	BIROZA: Président comité de développmt(CD)

NORD KIVU

3/16/2016	VILLAGE MUSIENENE	Féminin	MASIKA Odette ; Secrétaire du Groupement
3/16/2016	VILLAGE MUSIENENE	Masculin	KAYINKOMERE: Vice-président CARG
3/16/2016	Village Munoli		KATUNGU ESPERANCE (genre)
3/16/2016	VILLAGE MUSIENENE	Féminin	Entretien avec KAVIRA FELICIANO
6/17/2016	VILLAGE DE MAGERIA	Masculin	Entretien avec le chef KATEMBO
6/17/2016	VILLAGE DE MAGERIA	Masculin	KATEMBO (Administrateur Gestionnaire)
6/17/2016	VILLAGE DE MAGERIA	Féminin	Le Médecin du centre de santé
6/17/2016	VILLAGE DE MAGERIA	Masculin	KAMBALE KAMUTHE Agents villageois
3/18/2016	VILLAGE LUKANGA	Masculin	ABBE KIZITO ' (0994054244 ; 0825470091)
3/18/2016	VILLAGE LUKANGA	Masculin	LE DIRECTEUR DE L'EP BILENA
3/18/2016	VILLAGE LUKANGA	Féminin	MASIKA (Maîtresse à l'Ecole primaire)
3/18/2016	VILLAGE LUKANGA	Masculin	KAMBALE MUKOSA Lambert
3/18/2016	VILLAGE LUKANGA	Masculin	3 MAMANS LEADERS
3/19/2016	VILLAGE MUHANGI	Masculin	KASEREKA , Chef de groupement
3/19/2016	VILLAGE MUHANGI	Masculin	le chef du groupement
3/19/2016	VILLAGE MUHANGI	Masculin/Féminin	NZIVAKE (femme leader)
3/20/2016	VILLAGE DE MUNOLI	Masculin	LE CHEF KAMBALE André
3/20/2016	VILLAGE DE MUNOLI	Masculin	le paysan multiplicateur
3/20/2016	VILLAGE DE MUNOLI	Masculin	PALUKU KINEULI t villageois (AV).
3/20/2016	VILLAGE DE MUNOLI	Masculin	le Pasteur MUHINDO
3/21/2016	VILLAGE NGELEZA : LOCALITE ISANGO	Masculin	LE CHIEF DE PALUKU MATEMBELA
3/21/2016	VILLAGE NGELEZA : LOCALITE ISANGO	Masculin	KAMBALE OMER (Bénéficiaire)
3/21/2016	VILLAGE NGELEZA : LOCALITE ISANGO	Masculin	KAMBALA BIBALYA et P2

## A7. List of Focus Groups

TABLEAU DE FOCUS GROUPS: MADELEINE KASAY (Technical Specialist)

Date	Village	Communauté Cible	sexe			Groupe d'âge	Activité principale/Programme
			Homme	Femme	TOTAL		
15.03.016	Katendere	Avec les membres du CDC	9	2	11	30 à 45 ans	Coordination des activités plus les champs Prog agriculture
		Avec des femmes leaders et papas leaders	10	1	11	25 à 40 ans	Conduire les activités de communication interpersonnelles dans les ménages pProg agriculture
		Avec les non bénéficiaires	5	4	9	35 à 50 ans	Travaux des champs (non bénéficiaires)
16.03.016	Bambo	Avec les bénéficiaires en général : femmes leaders, papas leaders, membres du CLD	1	8	9	24 à 45 ans	- onduire les activités de communication interpersonnelles dans les ménages - Prog agriculture -
		Avec les bénéficiaires en général : fermiers leaders, femmes enceintes, allaitantes et celles ayant des enfants de – 5 ans	7	3	10	30 à 45 ans	Elevage, travaux des champs Ménages Prog santé nutrition
		Avec les non bénéficiaires	6	4	10	25 à 49 ans	Travaux des champs (non bénéficiaires)
17.03.016	Butare	Avec les bénéficiaires en général : femmes leaders, papas leaders, membres du CLD	3	9	12		- Conduire les activités de communication interpersonnelles dans les ménages - mProg agriculture
		Avec les bénéficiaires en	7	5	12	28 à 49 ans	Elevage, travaux des champs pProg santé nutrition

		général : fermiers leaders, femmes enceintes, allaitantes et celles ayant des enfants de – 5 ans, membres du CLD					
		Avec les non bénéficiaires	9	3	12	20 à 40 ans	Travaux des champs (non bénéficiaires)
18.03.016	Rwabangi	Avec les bénéficiaires en général : femmes leaders, papas leaders, membres du CLD	3	9	12	25 à 45 ans	- Conduire les activités de communication interpersonnelles dans les ménages pProg agriculture
		Avec les bénéficiaires en général : les femmes enceintes, allaitantes et ayant des enfants – 5ans, les papas	6	6	12	20 à 40 ans	Travaux des champs PProg santé nutrition
		Avec les non bénéficiaires	7	2	9	25 à 35 ans	Travaux des champs (non bénéficiaires)
19.03.016	Village Kavumu	avec les bénéficiaires en général : membres du CDC, femmes et papas leaders	9	3	12	30 à 45 ans	- Conduire les activités de communication interpersonnelles dans les ménages - CProg agriculture
		Avec les femmes enceintes, allaitantes et ayant des enfants – 5ans, femmes leaders et fermiers leaders	2	10	12	25 à 45 ans	- Travaux des champs aProg santé nutrition -
		Avec les non bénéficiaires	5	2	7	20 à 40 ans	Travaux des champs (non bénéficiaires)

20.03.016	Rushege	avec les bénéficiaires en général : membres du CDC, femmes et papas leaders	9	3	12	25 à 50 ans	- Coordination des activités - activités de communication interpersonnelles dans les ménages Prog agriculture
		avec les femmes leaders, femmes enceintes, allaitantes et celles ayant des enfants – 5ans	2	7	9	18 à 30 ans	- activités de communication interpersonnelles dans les ménages Prog santé nutrition
							-
11.02	<b>Village Mulenda Kazadi</b>	Avec les bénéficiaires en général	5	7	12	20 à 45 ans	Travaux des champs Prog agriculture
		avec les femmes leaders, femmes enceintes, allaitantes et celles ayant des enfants – 5ans		12	12	19 à 35 ans	Travaux des champs avec semences ordinaires Prog santé nutrition
12 .02	Village Miketo	Avec les bénéficiaires en général	4	5	9	25 à 37ans	Travaux des champs avec semences ordinaires Prog agriculture
		avec les femmes leaders, femmes enceintes, allaitantes et celles ayant des enfants – 5ans		12	12	25 à 40 ans	ravaux des champs T Prog santé et nutrition
		Avec les non		6	6	25 à 35 ans	Travaux des champs (non

		bénéficiaires					bénéficiaires)
13.02	Village Katak	Avec les non bénéficiaires		8	8	20 à 38 ans	Travaux des champs (non bénéficiaires)
		I					
		Avec les bénéficiaires en général	6	2	8	24 à 45 ans	Travaux des champs Prog agriculture
15.02	Village Lukalanga	Avec les bénéficiaires en général	6	6	12	25 à 45 ans	Travaux des champs Prog agriculture
		Avec les bénéficiaires en général : femmes leaders et fermiers leaders	3	3	6	28 à 45 ans	- activités de communication interpersonnelles dans les ménages - Prog agriculture
16.02	Village Kikango	avec les femmes leaders, femmes enceintes, allaitantes et celles ayant des enfants – 5ans		8	8	24 à 35 ans	- activités de communication interpersonnelles dans les ménages - Travaux des champs - Prog santé et nutrition
		Avec les bénéficiaires en général	7	1	8	30 à 45 ans	Travaux des champs Prog agriculture
24.02	Village Kahama	avec les bénéficiaires en général					Travaux de champs avec semences ordinaires Prog agriculture
		avec les femmes leaders, femmes enceintes, allaitantes et celles ayant des enfants – 5ans					Travaux des champs Prog santé et nutrition
25.02	Village Kasheke	Avec les femmes Ecole /Champs paysans		12	12	25 à 40 ans	Travaux des champs communautaires Prog agriculture

		Avec les non bénéficiaires	5	6	11	24 à 45 ans	Travaux de champs, Prog agriculture (non bénéficiaires)
26.02	Village Katongo	Avec les femmes cultivatrices et femmes leaders		12	12	24 à 45 ans	- travaux des champs activités de communication interpersonnelles dans les ménages - Prog agriculture
		Avec les femmes leaders, femmes enceintes, allaitantes et celles ayant des enfants – 5ans				20 à 35 ans	- Travaux des champs - prog santé et nutrition
		Avec les femmes alphabétisées				19 à 40 ans	Fabrication des pains, du savon et des beignets Prog transversal/genre
3.03	Village Runingu	Avec les non bénéficiaires	4	4	8	24 à 45 ans	Travaux des champs (non bénéficiaires)
		Avec les femmes alphabétisées		12	12		Fabrication des pains, du savon et des beignets PPro transversal/genre
		Avec les femmes leaders		7	7	30 à 40 ans	- activités de communication interpersonnelles dans les ménages - prog agriculture
							-
04.03	Village kagando	Avec les femmes alphabétisées		6	6		Fabrication des pains, du savon et des beignets Prog transversale/genre r
		Avec les bénéficiaires en général : femmes enceintes, allaitantes et celles ayant des enfants		11	11	24 à 35 ans	- Travaux des champs Prog santé et nutrition

		de – 5 ans					
		Avec les membres du comité de développement communautaire	8	2	10	28 à 45 ans	- Coordination des activités - Travaux des champs Prog agriculture
							-
01.03	Village Mususu3	<b>Avec les femmes leaders</b>		8	8	25 à 45 ans	- activités de communication interpersonnelles dans les ménages - Travaux des champs prog agriculture
		Avec les membres du comité de développement communautaire	5	3	8	30 à 45 ans	- Coordination des activités - Travaux des champs Prog agriculture
27.02	Village Mwegerera II	<b>Avec les femmes leaders</b>		12	12	25 à 35 ans	- activités de communication interpersonnelles dans les ménages - Prog agriculture
		Avec les membres du comité de développement communautaire	5	3	8	30 à 45 ans	- Coordination des activités TProg agriculture
29.02	Village Biriba	Avec les femmes alphabétisées		12	12	25 à 35 ans	Fabrication des pains, du savon et des beignets Prog transversal/genre
24.02	Village Muhongeza	Avec les femmes enceintes, allaitantes et celles ayant des enfants de – 5 ans		12	12	24 à 35 ans	Travaux des champs Prog santé et nutrition

		Avec les femmes alphabétisées		12	12	19 à 35 ans	Fabrication des pains, du savon et des beignets Progr transversal/genre
		Avec les membres du comité de développement communautaire	7	5	12	30 à 45 ans	Coordination des activités Travaux des champs Prog agriculture
25.02	Village Nyabasha	Avec les femmes Ecole/Champs paysans		12	12	28 à 45 ans	Travaux des champs Communautaires Prog agriculture

TABLEAU DES FOCUS GROUPS: CHRISTOPHE ALIMASI (Technical Specialist)

DATE	VILLAGE	COMMUNAUTE CIBLE	SEXE			GROUPE D'AGE	ACTIVITE PRINCIPALE
			HOMME	FEMME	TOTAL		
			NORD KIVU	NORD KIVU	NORD KIVU	Tranche	
NORD KIVU	NORD KIVU	NORD KIVU	NORD KIVU	NORD KIVU	NORD KIVU	NORD KIVU	NORD KIVU
16/03/2016	VILLAGE MUSIENENE	Membre du groupe d'agricole		13	13	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
16/03/2016	VILLAGE MUSIENENE	Avec petits commercants	2	10	12	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
16/03/2016	VILLAGE MUSIENENE	Membres COOPERATIVE		10	10	25 – 65 ans	Travaux de champs et petit commerce Prog santé nutrition
17/03/2016	VILLAGE MAGHERIA	Femmes enceintes, allaitantes et femmes ayant enfants de moins de 5 ans	4	8	12	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
17/03/2016	VILLAGE MAGHERIA	Membre du AVEC et GIC	4	8	12	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
17/03/2016	VILLAGE MAGHERIA	BENEFICIAIRES EN GENERAL	1	11	12	25 – 65 ans	Travaux de champs et petit commerce
18/03/2016	VILLAGE LUKANGA	NON BENEFICIAIRES	4	8	12	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture (non ben.)
18/03/2016	VILLAGE LUKANGA	BENEFICIAIRES EN GENERAL		10	10	25 – 65 ans	Travaux de champs et petit commerce Prog santé et nutrition
18/03/2016	VILLAGE LUKANGA	Femme enceinte, Allaitante et ayant un enfant de moins de 5ans	6	6	12	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
19/03/2016	VILLAGE	Membres		12	12	25 – 65 ans	Travaux de champs et petit

	MUHAGI	AVA/AVEC					commerce Prog santé et nutrition
z19/03/2016	VILLAGE MUHAGI	Femme enceinte, femme allaitante et ayant enfant de – 5 ans	5	5	10	25 – 65 ans	Activités de communication interpersonnelle dans le ménage Prog agriculture
19/03/2016	VILLAGE MUHAGI	PAPA ET MAMANS LEADERS	4	7	11	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
20/03/2016	VILLAGE MUNOLI	BENEFICIAIRES EN GENERAL		9	9	25 – 65 ans	Travaux de champs et petit commerce Prog santé et nutrition
20/03/2016	VILLAGE MUNOLI	FEMME ENCEINTE, ALLAITANTE, AYANT ENFANT DE -5 ANS		7	7	25-65	Nutrition, Sante, et Alimenation des enfants
20/03/2016	VILLAGE MUNOLI	NON BENEFICIAIRE	6		6	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture (non ben.)
21/03/2016	VILLAGE NGELEZA	BENEFICIAIRE EN GENERAL	1	6	7	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
21/03/2016	VILLAGE NGELEZA	BENEFICIAIRE EN GENERAL		8	8	25 – 65 ans	Travaux de champs et petit commerce Prog santé et nutrition
21/03/2016	VILLAGE NGELEZA	FEMME ALLAITANTE, FEMME ENCEINTE, AYANT ENFANT DE – 5ANS		6	6	25 – 65 ans	Travaux de champs et petit commerce
SUD KIVU	SUD KIVU	NON BENEFICIAIRE	SUD KIVU	SUD KIVU	SUD KIVU	SUD KIVU	SUD KIVU
24/02/2016	VILLAGE IHUSI/	SUD KIVU		7	7	25 – 65 ans	Travaux de champs et petit commerce

	KASHEKE						Prog santé et nutrition
24/02/2016	VILLAGE IHUSI/ KASHEKE	Femme enceinte, allaitante et ayant des enfants de moins de 5 ans	9	2	11	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
24/02/2016	VILLAGE IHUSI/ KASHEKE	NON BENEFICIAIRE		9	9	25 – 65 ans	Travaux de champs et petit commerce (non ben.)
25/02/2016	VILLAGE KASHEKE	BENEFICIAIRES EN GENERAL		12	12	25 – 65 ans	Travaux de champs et petit commerce
25/02/2016	VILLAGE KASHEKE	NON BENEFICIAIRES FEMMES		12	12	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture (non ben.)
26/02/2016	VILLAGE KATUDU	NON BENEFICIAIRES	7		7	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture (non ben.)
26/02/2016	VILLAGE KATUDU	BENEFICIAIRES EN GENERAL		7	7	25 – 65 ans	Travaux de champs et petit commerce Prog santé et nutrition
26/02/2016	VILLAGE KATUDU	BENEFICIAIRES EN GENERAL		7	7	25 – 65 ans	Travaux de champs et petit commerce
27/02/2016	VILLAGE MWENEGERA	FEMMES ALLAITANTE, FEMME ENCEINTE ET AYANT DES ENFANTS DE -5 ANS	7		7	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
29/02/2016	VILLAGE BIRIBA	NON BENEFICIAIRES	9		9	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture (non ben.)
29/02/2016	VILLAGE BIRIBA	BENEFICIAIRES EN GENERAL	8			25 – 65 ans	Prog agriculture
05/03/2016	VILLAGE BIRIBA	BENEFICIAIRES EN GENERAL	7		7	25 – 65 ans	Travaux de champs

01/02/2016	VILLAGE KAHAMA	NON BENEFICIAIRE	8		8	25 – 65 ans	Travaux de champs Prog agriculture (non ben.)
01/03/2016	VILLAGE KAHAMA	NON BENEFICIAIRE	2	5	7	25 – 65 ans	Travaux de champs Prog agriculture (non ben.)
01/03/2016	VILLAGE KAHAMA	BENEFICIAIRES EN GENERAL	12		12	25 – 65 ans	Travaux de champs
02/03/2016	VILLAGE MUNENE	BENEFICIAIRES EN GENERAL	11		11	25 – 65 ans	Travaux de champs
02/03/2016	VILLAGE MUNENE	NON BENEFICIAIRES		9	9	25 – 65 ans	Activités de communication interpersonnelle dans le ménage Prog agriculture (non ben.)
02/03/2016	VILLAGE MUNENE	NON BENEFICIAIRES	8	2	10	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture (non ben.)
03/03/2016	VILLAGE KAGUNGA/ON GERO	FEMMES LEADERS	2	10	12	25 – 65 ans	Travaux de champs et petit commerce Prog transversal/genre
03/03/2016	VILLAGE KAGUNDA/ON GERO	BENEFICIAIRES EN GENERAL		9	9	25 – 65 ans	Travaux de champs et petit commerce Prog santé et nutrition
03/03/2016	VILLAGE KAGUNDA/ON GERO	BENEFICIAIRES WEG	5	4	9	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
04/03/2016	VILLAGE RUTEMBA	FEMMES COMMERCANT		11	11	25 – 65 ans	Travaux de champs et petit commerce Prog transversal/genre
04/03/2016	VILLAGE RUTEMBA	ENCEINTE, ALLAITANTE ET AYANT ENFANT DE MOINS DE 5 ANS		12	12	25 – 65 ans	Travaux de champs et petit commerce Prog santé et nutrition
04/03/2016	VILLAGE RUTEMBA	BENEFICIAIRES MEMBRES DE LA	9		9	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture

		COPERATIVE					
04/03/2016	VILLAGE RUTEMBA	BENEFICIAIRES (WEG)		7	7	20-65	Petits commerce de femmes ; travaux domicile
TANGANYIKA	TANGANYIKA					TANGANYIKA	
11/02/2016	VILLAGE KABULO	FEMME ENCEINTE, ALLAITANTE ET AYANT DES ENFANTS DE – 5ANS		12	12	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
11/02/2016	VILLAGE KABULO	FEMMES MAMANS		12	12	25 – 65 ans	Travaux de champs et petit commerce Prog santé et nutrition
11/02/2016	VILLAGE KABULO	NON BENEFICIAIRES	5	7	12	25 – 65 ans	Travaux de champs et petit commerce (non ben.)
12/02/2016	VILLAGE KABUYU	BENEFICIAIRES EN GENERAL		12	12	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
12/02/2016	VILLAGE KABUYU	NON BENEFICIAIRE	11		11	25 – 65 ans	Travaux de champs et petit commerce
12/02/2016	VILLAGE KABUYU	TANGANYIKA		8	8	25 – 65 ans	Travaux de champs et petit commerce Prog santé et nutrition
13/02/2016	VILLAGE KATAKI	BENEFICIARE EN GENERAL	8	1	9	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
15/02/2016	VILLAGE LYAPENDA	FEMMES ENCEINTES, ALLAITANTAS ET AYANT ENFANTS DE MOINS DE 5 ANS	9		9	25 – 65 ans	Travaux de champs et petit commerce
15/02/2016	VILLAGE LYAPENDA	NON		9	9	25 – 65 ans	Travaux de champs et petit commerce

		BENEFICIARE					Prog santé et nutrition
16/02/2016	VILLAGE MOKE	BENEFICIAIRES EN GENERAL	13		13	25 – 65 ans	Travaux de champs et petit commerce Prog agriculture
16/02/2016	VILLAGE MOKE	NON BENEFICIAIRES	18	9	9	25 – 65 ans	Travaux de champs et petit commerce Prog santé et nutrition
16/02/2016	VILLAGE MOKE	FEMME ENCENITE, ALLAITANTE ET AYANT ENFANT DE -5 ANS		6	6	25 – 65 ans	Activités de communication interpersonnelle dans le ménage Prog agriculture

## A8. Interview and Discussion Guides

**Catégorie : Femmes avec enfant de moins de 5 ans**

Date : _____	Province : _____
Zone de Santé : _____	
Aire de Santé: _____	Village : _____
Nom et prénoms de l'Animateur : _____ et Preneur de note : _____	
Heure début de l'entretien : _____	Heure fin de l'entretien : _____

### **INTRODUCTION**

Bienvenu et merci de prendre votre temps pour participer à cette discussion ce jour. Mon nom est ..... (modérateur) et c'est ..... (Preneur des notes). Nous travaillons pour le compte de The Mitchell Group (TMG) et de Centre de Renforcement des capacités et d'Etudes sur la Santé, Population et Développement (CRESPOD).

Nous sommes là pour évaluer les activités du projet **RISE/JENGA JAMAA II/TUENDELEE PAMOJA** relatives à la sécurité alimentaire dans votre communauté. La contribution de chacun de vous va nous donner une idée sur la sécurité alimentaire dans votre.

### **REGLES DE CONDUITE :**

Nous nous intéressons à chacune de vos opinions et vos sentiments. Il n'y a ni des bonnes ni des fausses réponses. Nous avons besoins de vos idées. Ainsi, aucune critique ne vous sera adressée. Nous vous encourageons à donner des commentaires francs qui peuvent améliorer notre étude.

Certaines d'entre vous peuvent approuver ou pas les réponses des autres ; Ce qui est normal. Je vais vous donner la parole à tour de rôle. S'il vous plaît, n'interrompez pas l'autre

pendant qu'il parle. Chacune aura le temps de s'exprimer. Cette session va durer approximativement ..... à.....heures

### CONFIDENTIALITÉ ET UTILISATION DES DICTAPHONES :

Tout ce qui se dit dans cette salle est confidentiel et nous ne dirons à personne que vous avez participé à cette discussion. Un enregistreur va enregistrer ce qui est dit pour que nous puissions prendre correctement note de vos points de vue afin de nous aider à améliorer les programmes. Mon collègue va également prendre des notes pour nous aider à ce sujet. Est-ce que vous acceptez que nous puissions enregistrer la discussion ?

### PRESENTATION DES PARTICIPANTS :

Nous voulons que chacun de vous puisse se présenter pour mieux se connaître, en vue de faciliter l'entretien.

## **O. Question introductive**

01. Que savez-vous du projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?

### **1. Efficacité des modèles de formation en SBCC:**

- 1.1. Au cours de ce projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA, aviez-vous suivi une formation ? Si oui, dans quel domaine ?
- Qu'aviez-vous retenu de cette formation ?
  - Aviez-vous partagé les informations reçues de cette formation par exemple sur la nutrition de la femme enceinte ou allaitante et de l'enfant de moins de 5 ans avec d'autres femmes qui n'avaient pas participé à cette formation ?
  - Si oui, pourriez-vous nous donner quelques exemples?
  - Si non, pourquoi ne l'aviez-vous pas fait?
- 1.2. Au cours du projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA, aviez-vous participé à des causeries éducatives organisées par ce projet en matière de la nutrition de la femme enceinte ou allaitante et de l'enfant de moins de 5 ans?
- Si oui, pouvez-vous nous citer quelques messages que vous avez retenus et qui vous ont aidé à changer certaines pratiques quotidiennes dans votre ménage ?
  - Si non, pourquoi n'aviez-vous pas participé à ces causeries ?

### **2. Force des liens avec les marchés et les services publics**

- 2.1. Existe-t-il des associations des femmes dans votre village ?
- Si oui, sont-elles fonctionnelles ?
  - Etes-vous membre de ces associations ? Si non, pourquoi?
  - Que font ces associations ?
- 2.2. Quels sont les changements que le projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA a apporté en terme de l'alimentation de la femme enceinte, de la femme allaitante et des enfants de moins de 5 ans dans votre ménage?

### **3. Changements dans les revenus et moyens de substance des ménages**

3.1. Existe-t-il des associations des microcrédits et d'épargne dans votre village?

- Si oui, lesquelles ? Sont-elles fonctionnelles ?
- En tant que femme, aviez-vous eu accès aux microcrédits ?
- Si oui, Qu'est ce que vous aviez fait de ce crédit ?
- Si non, pourquoi pas ?

### **4. Evolution des pratiques de nutrition**

#### **4.1. Concernant la femme enceinte et allaitante**

4.1.1. Pouvez-vous nous dire ce que vous aviez mangé hier ? Est-ce que vous aviez également mangé la même chose avant-hier ? Combien des fois mangiez- vous par jour?

4.1.2. Lorsque vous étiez enceinte, qu'est-ce que vous faisiez ?

- Quels types d'aliments mangiez-vous ? Combien de fois par jour ?
- Et après accouchement qu'est-ce que vous faisiez ?
- Quels types d'aliments mangiez-vous ? Combien de fois par jour ?

4.1.3. Lorsque vous étiez enceinte, aviez-vous reçu des messages sur l'alimentation de la femme enceinte, de la femme allaitante et de l'enfant de moins de 5 ans ?

- Si oui pouvez-vous donner quelques messages que vous avez reçus ?
- Aviez-vous partagé ces messages avec d'autres mères qui ne les avaient pas reçus,
  - Si oui donnez quelques exemples
  - Si non pourquoi ne les aviez vous pas partagés avec d'autres femmes ?

4.1.3. Quels sont les aliments qui sont interdits à une femme lorsqu'elle est enceintes dans votre communauté ? Que pensez-vous de cette pratique ?

- Quelle est la situation actuelle dans votre communauté par rapport à ces aliments interdits ?

4.1.5. Après l'accouchement, que faisiez-vous ?

- Quels types d'aliments mangiez-vous ? Combien de fois par jour ?

#### **4.2. Concernant la survie de l'enfant de moins de 5 ans**

4.2.1. Pouvez-vous nous dire ce que vos enfants de moins de 5 ans avaient mangé hier ? Est-ce que qu'ils avaient également mangé la même chose avant-hier ? Combien des fois mangeaient-ils par jour?

4.2.2. Vous qui avez des enfants:

- De moins de 6 mois, comment les nourrissiez-vous ?
- De plus de 6 mois, comment les nourrissiez-vous ?

4.2.3. Que faites vous pour éviter que vos enfants de moins de 5 ans tombent malade ?

- Et quand ils sont malades, que faites-vous ?

4.2.4. En matière de nutrition, quand vous comparez des enfants de moins de 5 ans nés avant le projet et ceux qui sont nés au cours du projet, qu'est-ce que vous en dites ?

4.2.5. Dans votre village, aviez vous eu des enfants mal nourris ?

- Si oui, le projet les avait- il pris en charge? Si oui, Comment ?
- Quels types d'aliments que le projet donnait à ces enfants ? Et combien de fois par jour ?
- D'où provenaient ces aliments ?
- Les enfants mal nourris ayant récupéré la santé, une fois retournés à la maison étaient-ils suivis après ?
- Le projet avait-t-il renforcé les capacités des mères ayant des enfants de moins de 5 ans mal nourris sur leur alimentation ?

- 4.2.6. Existait-il une association/organisation communautaire de soutien aux mères ayant des enfants ou ont eu des enfants mal nourris dans votre village ?
- Si oui que faisait cette association/organisation ?
  - Les membres de cette association/organisation avaient-ils suivi une formation sur les méthodes nutritionnelles des enfants de moins de 5ans ?

## **5. Changements dans les normes de genre**

5.1. Quel est le rôle de l'homme dans le ménage relatif

- au partage des travaux ménagers,
- aux soins des enfants,
- à la prise des décisions et
- à l'affectation des revenus?

Donnez quelques exemples

5.2. Est-ce cette participation a toujours existé dans votre village ou bien elle est arrivée suite aux activités du projet ?

5.3. Pensez vous que cette participation de l'homme va continuer ou pas après le retrait du projet de votre village ?

5.4. Quel est le rôle de la femme dans le ménage relatif

- au partage des travaux ménagers,
- aux soins des enfants,
- à la prise des décisions et
- à l'affectation des revenus?

Donnez quelques exemples

5.5. Est-ce cette participation de la femme a toujours existé dans votre village ou bien elle est arrivée suite aux activités du projet ?

5.6. Pensez vous que cette participation de la femme va continuer ou pas après le retrait du projet de votre village ?

5.7. Est-ce que les femmes participent-elles dans la prise des décisions concernant la gestion des ressources communautaires et des institutions locales? Donnez quelques exemples

5.8. Est-ce cette participation a toujours existée dans votre communauté ou bien elle arrivée suite aux activités du projet ?

## **6. Résultats des interventions sur la Réduction des Risques des Catastrophes (RRC)**

6.1. Durant les 5 dernières années, aviez-vous connu des catastrophes alimentaires dues à la sécheresse, aux maladies des plantes, des animaux, des volailles dans des inondations dans votre village ?

- Si oui que ce que vous aviez fait ?
- Que ce que le projet avait fait ?
- Que ce que l'état avait fait ?

## **7. Résultats de la gouvernance et des initiatives de résolution des conflits**

7.1. En cas des conflits communautaire dans votre village, pouvez-vous nous dire si les femmes participent à la résolution de ces conflits ?

- Si oui font-elles parti du comité local de développement ?

## **8. durabilité des interventions du programme**

8.1. Pourriez-vous donner quelques exemples qui montrent que les activités mise en œuvre par le projet vont continuer ou s'arrêter après le retrait du projet de votre village ?

## GUIDE DE DISCUSSION DE GROUPE

Catégorie : NON BENEFICIAIRES DU PROJET

Date : _____	Province : _____
Zone de Santé : _____	
Aire de Santé: _____	Village : _____
Nom et prénoms de l'Animateur : _____ et Preneur de note : _____	
Heure début de l'entretien : _____	Heure fin de l'entretien : _____

### **INTRODUCTION**

Bienvenu et merci de prendre votre temps pour participer à cette discussion ce jour. Mon nom est ..... (Modérateur) et c'est ..... (Preneur des notes). Nous travaillons pour le compte de The Mitchell Group (TMG) et de Centre de Renforcement des capacités et d'Etudes sur la Santé, Population et Développement (CRESPOD).

Nous sommes là pour évaluer les activités du projet **RISE/JENGA JAMAA II/TUENDELEE PAMOJA** relatives à la sécurité alimentaire dans votre communauté. La contribution de chacun de vous va nous donner une idée sur la sécurité alimentaire dans votre.

### **REGLES DE CONDUITE :**

Nous nous intéressons à chacune de vos opinions et vos sentiments. Il n'y a ni des bonnes ni des fausses réponses. Nous avons besoins de vos idées. Ainsi, aucune critique ne vous sera adressée. Nous vous encourageons à donner des commentaires francs qui peuvent améliorer notre étude.

Certaines d'entre vous peuvent approuver ou pas les réponses des autres ; Ce qui est normal. Je vais vous donner la parole à tour de rôle. S'il vous plaît, n'interrompez pas l'autre pendant qu'il parle. Chacune aura le temps de s'exprimer. Cette session va durer approximativement ..... à.....heures

### **CONFIDENTIALITÉ ET UTILISATION DES DICTAPHONES :**

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programmes. Mon collègue va également prendre des notes pour nous aider à ce sujet. Est-ce que vous acceptez que nous puissions enregistrer la discussion ?

## PRESENTATION DES PARTICIPANTS :

Nous voulons que chacun de vous puisse se présenter pour mieux se connaître, en vue de faciliter l'entretien.

### **0. Question introductive pour les bénéficiaires du projet**

**0.1.** *Avez-vous entendu parler du projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?*

- *Si oui, qui vous avait parlé de ce projet ?*
- *Qu'est ce que vous connaissez de ce projet ?*
- *Pourquoi vous ne bénéficiez pas de ce projet ?*

### **1. Efficacité des modèles de formation en SBCC:**

**1.1.** *Vous n'avez pas bénéficié du projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA mais certains de vos voisins y ont bénéficié. Ceux qui en ont bénéficié ont-ils partagé avec vous certaines informations apprises ?*

- *Si oui donnez quelques exemples des informations partagées*

**1.2.** *Le projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA? a organisé des séances de causeries éducatives dans le village. Aviez-vous entendu parler des messages sur l'agriculture- élevage, la santé et nutrition, eau et assainissement, le genre et la gouvernance, ou autres domaines ?*

- *Si oui donnez quelques exemples*

- *Si non pourquoi ?*

### **2. Force des liens avec les marchés et les services publics**

**2.1.** *Parlant de la production (agricole et animale), aviez vous eu accès aux semences, aux bêtes, volailles ?*

- *Si oui, qui vous les aviez donnés ?*

- *Si non que faites-vous pour augmenter votre production ?*

**2.2.** *Existe-t-il des associations des microcrédits et d'épargne dans votre village ?*

- *Si oui, lesquelles ?*

- *Sont-elles fonctionnelles ?*

- *Aviez-vous eu accès à ce crédit ?*

- *Si oui, Qu'est ce que vous aviez fait de ce crédit ?*

- *Si non, pourquoi pas ?*

### **3. Changements dans les revenus et moyens de substance des ménages**

**3.1.** *Selon vous, pensez vous que vos revenus ont augmenté ou pas durant ces 5 dernières années ?*

**3.2.** *D'une manière générale, à quoi affectez vous le revenu provenant de la vente des produits agricole, animale et des volailles (sondez en matière de soins de santé, de la scolarisation des enfants filles et garçons et de l'épargne, l'achat des intrants, nourriture,)*

### **4. Evolution des pratiques de nutrition**

**4.1.** *Pouvez-vous nous dire ce que vous aviez mangé hier ? Est-ce que vous aviez également mangé la même chose avant-hier ? Combien des fois mangez- vous par jour?*

- *Et vos enfants, qu'est ce qu'ils ont mangé hier ? Combien des fois ?*

**4.2.** *Vous qui avez des enfants :*

- *De moins de 6 mois, comment les nourrissiez-vous?*

- *De plus de 6 mois, comment les nourrissiez-vous ?*
- 4.3. *Que faites vous pour éviter que vos enfants de moins de 5 ans tombent malade ?*
  - *Et quand ils sont malades, que faites-vous ?*
- 4.4. *Dans votre communauté, aviez vous eu des enfants mal nourris ?*
  - *Si oui qui vous avait informé que votre enfant avait la mal nutrition ?*
  - *Qu'aviez-vous fait ?*
- 4.5. *Lorsque vous êtes enceintes ou votre épouse est enceinte, qu'est-ce que vous faisiez ?*
  - *Quels types d'aliments mangeais-tu ou mangeait – t- elle ? Combien de fois par jour ?*
- 4.6. *Quels sont, les aliments qui sont interdits à une femme lorsqu'elle est enceintes dans votre village?*
- 4.7. *Quelles sont les raisons avancées de ces interdits ?*
- 4.8. *Après votre accouchement ou celui de votre de votre épouse que faisiez-vous ? Quels types d'aliments mangeais-tu ou mangeait-t-elle ? Combien de fois par jour ?*
- 5. *Quelles sont les méthodes nutritionnelles que vous connaissez pour améliorer l'état nutritionnel de la femme enceinte, allaitante et des enfants de moins de 5 ans ?*

## **5. Les changements dans les normes de genre**

- 5.1. *Selon vous quel est le rôle de l'homme dans le ménage relatif*
- *au partage des travaux ménagers,*
  - *aux soins des enfants,*
  - *à la prise des décisions et*
  - *à l'affectation des revenus?*

*Donnez quelques exemples*

- 5.2. *Quel est le rôle de la femme dans le ménage relatif*
- *au partage des travaux ménagers,*
  - *aux soins des enfants,*
  - *à la prise des décisions et*
  - *à l'affectation des revenus?*

*Donnez quelques exemples*

- 5.3. *Est-ce cette participation de la femme a – t- elle toujours existée dans votre village ou bien elle est arrivée suite aux activités du projet ?*
- *Pensez vous que cette participation de la femme va continuer ou pas après le retrait du projet de votre village ?*
- 5.4. *Est-ce que les femmes participent-elles dans la prise des décisions concernant la gestion des ressources communautaires et des institutions locales? Donnez quelques exemples*

## **6. Résultats des interventions sur la Réduction des Risques des Catastrophes (RRC)**

- 6.1. *Est-ce que il ya- t-il dans votre village :*
- *Des comités locaux de développement communautaire dans votre village?*
  - *Des comités agricoles de gestion rurale ?*
  - *Ces comités ont-ils existé avant le projet ou ont été mis en place par le projet ?*

*Si oui, Qui vous a informé ?*

- 6.2. *Quel est le rôle des ces comités ? Qu'est ce que ces comités ont fait ?*
- 6.3. *Etes-vous membres de l'un ou plusieurs de ces comités ?*
- 6.4. *Pensez vous que ces comités vont continuer ou pas après l'arrêt du projet dans votre village ?*

- 6.5. Y a-t-il des comités mis en place dans votre communauté pour suivre l'exécution des mesures communautaires de préventions de catastrophes?
- Si oui qui vous a informé de l'existence de ces comités ?
  - Quelles sont ces mesures communautaires ?
- 6.6. Quels sont les facteurs qui ont favorisé ou défavorisé l'exécution de ces mesures communautaires de préventions de catastrophes?

## **7. Résultats de la gouvernance et des initiatives de résolution des conflits**

- 7.1.** Avez-vous des comités de gestion foncière dans votre village ?  
Si oui comment le saviez-vous?
- Ces comités sont-ils fonctionnels ?
- 7.2.** Avez-vous eu accès aux terres ?
- Si oui comment aviez-vous accédé à ces terres ?
  - Si non pourquoi ?

## **CES TROIS DERNIERES QUESTIONS SERONT ADRESSEES UNIQUEMENT POUR LE PROJET JENGA JAMMA II**

- 7.4. *D'habitude, y a-t-il dans votre communauté des filles qui se marient avant 18 ans ?  
Si oui, que pensez-vous de cette situation?*
- 7.5. *Dans votre communauté, quelles sont, selon vous les causes pour lesquelles certains hommes violentent leurs femmes?*
- 7.6. *En cas de viol d'une femme/fille, que fait la famille de la survivante et la communauté (attitudes et réactions)?*

## **8. durabilité des interventions du programme**

- 8.1. Pourriez-vous donner quelques exemples qui montrent que bien que vous n'ayez pas bénéficié de ce projet, les activités mise en œuvre par le projet vont continuer ou s'arrêter après le retrait du projet de votre village ?

## GUIDE DE L'ENTRETIEN INDIVIDUEL

Date : \_\_\_\_\_ Province : \_\_\_\_\_

Zone de Santé : \_\_\_\_\_

Aire de Santé: \_\_\_\_\_ Village : \_\_\_\_\_

Nom et prénoms de l'Animateur : \_\_\_\_\_ et Preneur de note : \_\_\_\_\_

Heure début de l'entretien : \_\_\_\_\_ Heure fin de l'entretien : \_\_\_\_\_

Qualité de la personne interviewée : \_\_\_\_\_

### **INTRODUCTION**

Merci de prendre votre temps pour participer à cet entretien ce jour. Mon nom est .....). Nous travaillons pour le compte de The Mitchell Group (TMG) et de Centre de Renforcement des capacités et d'Etudes sur la Santé, Population et Développement (CRESPOD).

Nous sommes là pour évaluer les activités du projet **RISE/JENGA JAMAA II/TUENDELEE PAMOJA** relatives à la sécurité alimentaire dans votre communauté. Votre contribution va nous donner une idée sur la sécurité alimentaire dans votre village/communauté.

### **REGLES DE CONDUITE :**

Nous nous intéressons à chacune de vos opinions et vos sentiments. Il n'y a ni des bonnes ni des fausses réponses. Nous avons besoins de vos idées. Ainsi, aucune critique ne vous sera adressée. Nous vous encourageons à donner des commentaires francs qui peuvent améliorer notre évaluation.

. Cette session va durer approximativement ..... à.....heures

### **CONFIDENTIALITÉ ET UTILISATION DES DICTAPHONES :**

Tout ce qui se dit, lors de notre entretien est confidentiel et nous ne dirons à personne que vous avez participé à cet entretien. Un enregistreur va enregistrer ce qui est dit pour que nous puissions prendre correctement note de vos points de vue afin de nous aider à améliorer les programmes. Je prendrai également des notes pour nous aider à ce sujet. Est-ce que vous acceptez que nous puissions enregistrer cet entretien ?

## PRESENTATION

Nous voulons que chacun de nous puisse se présenter pour mieux se connaître, en vue de faciliter l'entretien.

### 0. Question introductive

0.1. Que savez-vous du projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?

0.2. Quel est votre rôle dans village en tant que .....

### 1. Efficacité des modèles de formation en BCC

1.1. En tant que.....au cours de ce projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA, aviez-vous suivi une formation ? Si oui, dans quel domaine ?

- Qu'aviez-vous retenu de cette formation ?
- Aviez-vous partagé les informations reçues au cours de cette formation avec d'autres personnes qui n'avaient pas participé à la formation ?
- Si oui, pourriez-vous nous donner quelques exemples?
- Si non, pourquoi ne l'aviez-vous pas fait?

1.2. En tant que.....au cours du projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA, aviez- vous participé à des causeries éducatives organisées par ce projet ?

- Si oui, pouvez-vous nous citer quelques messages que vous avez retenus et qui vous ont aidé à changer certaines pratiques quotidiennes dans votre ménage ?
- Si non, pourquoi n'aviez vous pas participé à ces causeries éducatives ?

### 2. Force des liens avec les marchés et les services publics

2.3. Parlant de la production (agricole et animale), aviez vous eu accès aux semences ? aux bêtes ? aux volailles ?

- Si oui, qui vous les aviez donné ?
- Si non, pourquoi n'aviez-vous pas à ces intrants ?

2.4. Existe-t-il des associations des microcrédits et d'épargne dans votre communauté ?

- Si oui, lesquelles ? Sont-elles fonctionnelles ?
- Aviez-vous eu accès aux microcrédit ?
- Si oui, Qu'est ce que vous aviez fait de ce crédit ?
- Si non, pourquoi pas ?
- En tant que..... Faisiez-vous parti de ces associations

2.5. L'accès aux intrants et au microcrédit a-t- il augmenté vos ventes ?

- Si oui, donnez quelques exemples
- Si non pourquoi ? donnez quelques exemples
- En tant que..... Pensez- vous que les ventes dans votre village dans l'ensemble ont-t-ils augmenté ou pas ?

2.6. En dehors des messages vulgarisés par le projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA, quels sont les autres acteurs qui ont vulgarisé des messages sur l'agriculture/élevage, la santé, la nutrition, l'eau et assainissement, la gestion des revenus, la gouvernance, le genre, la gestion des catastrophes?

2.7. En tant que..... Quels sont les changements que le projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA a apporté dans votre ménage et dans votre communauté?

## **5. Changements dans les revenus et moyens de substance des ménages**

5.1. Selon vous, pensez vous que vos revenus ont augmentés ou pas durant ces 5 dernières années ?

5.2. D'une manière générale, à quoi affectez vous le revenu provenant de la vente des produits agricole, animale et des volailles (sondez en matière de soins de santé, de la scolarisation des enfants filles et garçons de l'épargne et l'achat des intrants,)

## **6. Evolution des pratiques de nutrition**

6.1. Pouvez-vous nous dire ce que vous aviez mangé hier ? Est-ce que vous aviez également mangé la même chose avant-hier ? Combien des fois mangez- vous par jour?

- Et vos enfants de moins de 5 ans, qu'est ce qu'ils ont mangé hier ? Combien des fois ?

6.2. Que faites vous pour éviter que vos enfants de moins de 5 ans tombent malade ?

- Et quand ils sont malades, que faites-vous ?

6.3. Lorsque vous êtes enceintes ou votre épouse est enceinte, par rapport au suivi de votre/sa grossesse, qu'est-ce que vous faites ? Quels types d'aliments mangeait – t-elle ? Combien de fois par jour ?

6.4. Quel est votre opinion sur les interdits de certains aliments à une femme lorsqu'elle est enceintes ?

6.5. Quelle est la situation actuelle dans votre communauté par rapport à ces aliments interdits ?

4.6. Avez-vous partagé quelques méthodes que vous avez ou votre épouse a apprises pour améliorer l'état nutritionnel enceinte, de la femme allaitante et des enfants de moins 5 ans ?

## **5. Changement dans les normes de genre**

5.1. En tant que..... Quel est votre opinion concernant le rôle attribué à l'homme et à la femme dans le ménage relatif

- au partage des travaux ménagers,
- aux soins des enfants,
- à la prise des décisions et
- à l'affectation des revenus?

Donnez quelques exemples

5.2. Est-ce cette participation de l'homme a – t- elle toujours existé dans votre communauté ou bien elle est arrivée suite aux activités du projet ?

5.3. Pensez vous que cette participation de l'homme et de la femme va continuer ou pas après le retrait du projet de votre village ?

5.4. Est-ce cette participation de la femme a – t- elle toujours existé dans votre communauté ou bien elle est arrivée suite aux activités du projet ?

5.5. Est-ce que les femmes participent-elles dans la prise des décisions concernant la gestion des ressources communautaires et des institutions locales? Donnez quelques exemples

5.6. En tant que..... Est-ce cette participation à la prise des décisions concernant la gestion des ressources communautaires et des institutions locales a toujours existée dans votre communauté ou bien elle arrivée suite aux activités du projet ?

5.7. Pensez vous que cette participation de la femme va continuer ou pas après le retrait du projet de votre village ?

## 6. Résultats des interventions sur la Réduction des Risques des Catastrophes (RRC)

6.7. En tant que..... Avez-vous un rôle à jouer dans la réduction des risques des catastrophes dans votre communauté ?

6.8. Est-ce qu'il y a :

- Des comités locaux de développement communautaire dans votre village?
- Des comités agricoles de gestion rurale ?
- Si oui ces comités ont-ils existés avant le projet ou ont été mis en place par le projet ?
- Ces comités sont-ils fonctionnels ?
- Quel est le rôle de ces comités ? Qu'est ce que ces comités ont fait ?
- Les membres de ces comités ont-ils été formés ?
- Y-a-t-il des femmes dans ces comités ? Qu'en pensez-vous ?

Si oui, dans quels domaines ?

6.9. Pensez-vous que ces comités vont continuer ou pas après l'arrêt du projet dans votre village ?

- Quelles sont les mesures communautaires de réduction des risques liés aux catastrophes alimentaires sur la sécheresse, les maladies des plantes, des animaux, des volailles, les inondations

Au niveau des ménages et de la communauté qui ont été prise en charge par les interventions du projet?

6.10. Y a-t-il des comités mis en place dans votre communauté pour suivre l'exécution de ces mesures communautaires de préventions de catastrophes?

6.7. Quels sont les facteurs qui ont favorisé ou défavorisé l'exécution de ces mesures communautaires de préventions de catastrophes?

## 7. Résultats de la gouvernance et des initiatives de résolution des conflits

**La question 7.1 sera adressée aux bénéficiaires des projets *Mercy Corps et Food for the Hungry***

7.1. En tant que..... Avez-vous un rôle à jouer dans les initiatives de résolution des conflits ?

- Si oui lequel ?
- Si non pourquoi ?

7.1. Avez-vous des comités de gestion foncière dans votre village ?

- Ces comités sont-ils fonctionnels ?
- Les membres de ces comités ont-ils été formés ? Dans quel domaine ?

7.2. En tant que..... Quel est votre opinion concernant la distribution des terres dans votre communauté ?

7.3. Et vous-même aviez-vous eu accès aux terres distribuées par le projet?

7.4. Donnez quelques exemples qui montrent que les initiatives mises en place par le projet ont permises aux membres de la communauté :

- d'accéder aux terres ?
- de résoudre les conflits au sein de la communauté

7.5. Pouvez-vous citer quelques initiatives qui ont plus au moins bien marché dans la résolution des conflits fonciers?

7.6. Après le retrait du projet de votre village, à qui reviendront ces terres ?

***N.B Les questions 7.6, 7.7 et 7.8 seront adressées aux bénéficiaires et aux non bénéficiaire du projet JENGA JAMAA II.***

7.7. D'habitude, y a-t-il dans votre communauté des filles qui se marient avant 18 ans ?

- Si oui, que pensez-vous de cette situation?

7.8. Dans votre communauté, quelles sont, selon vous les causes pour lesquelles certains hommes violentent leurs femmes?

7.9. En cas de viol d'une femme/fille, que fait la famille de la survivante et la communauté (attitudes et réactions)?

**8. Durabilité des interventions du programme**

8.2. Pourriez-vous donner quelques exemples qui montrent que les activités mise en œuvre par le projet vont continuer ou s'arrêter après le retrait du projet de votre village ?

**GUIDE DE DISCUSSION DES GROUPES**  
**Catégorie : BENEFICIAIRES EN GENERAL**

Date : _____	Province : _____
Zone de Santé : _____	
Aire de Santé: _____ Village : _____	
Nom et prénoms de l'Animateur : _____ et Preneur de note : _____	
Heure début de l'entretien : _____ Heure fin de l'entretien : _____	

**INTRODUCTION**

Bienvenu et merci de prendre votre temps pour participer à cette discussion ce jour. Mon nom est ..... (Modérateur) et c'est ..... (Preneur des notes). Nous travaillons pour le compte de The Mitchell Group (TMG) et de Centre de Renforcement des capacités et d'Etudes sur la Santé, Population et Développement (CRESPOD).

Nous sommes là pour évaluer les activités du projet **RISE/JENGA JAMAA II/TUENDELEE PAMOJA** relatives à la sécurité alimentaire dans votre communauté. La contribution de chacun de vous va nous donner une idée sur la sécurité alimentaire dans votre.

**REGLES DE CONDUITE :**

Nous nous intéressons à chacune de vos opinions et vos sentiments. Il n'y a ni des bonnes ni des fausses réponses. Nous avons besoins de vos idées. Ainsi, aucune critique ne vous sera adressée. Nous vous encourageons à donner des commentaires francs qui peuvent améliorer notre étude.

Certaines d'entre vous peuvent approuver ou pas les réponses des autres ; Ce qui est normal. Je vais vous donner la parole à tour de rôle. S'il vous plaît, n'interrompez pas l'autre pendant qu'il parle. Chacune aura le temps de s'exprimer. Cette session va durer approximativement ..... à.....heures

**CONFIDENTIALITÉ ET UTILISATION DES DICTAPHONES :**

Tout ce qui se dit dans cette salle est confidentiel et nous ne dirons à personne que vous avez participé à cette discussion. Un enregistreur va enregistrer ce qui est dit pour que nous

puissions prendre correctement note de vos points de vue afin de nous aider à améliorer les programmes. Mon collègue va également prendre des notes pour nous aider à ce sujet. Est-ce que vous acceptez que nous puissions enregistrer la discussion ?

## PRESENTATION DES PARTICIPANTS :

Nous voulons que chacun de vous puisse se présenter pour mieux se connaître, en vue de faciliter l'entretien.

### **0. Question introductive**

#### ***01. Que savez-vous du projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?***

#### **1. Efficacité des modèles de formation en SBCC:**

- 1.3. Au cours de ce projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA, aviez-vous suivi une formation ? Si oui, dans quel domaine ?
  - Qu'aviez-vous retenu de cette formation ?
  - Aviez-vous partagé les informations reçues de cette formation avec d'autres personnes qui n'avaient pas participé à cette formation ?
  - Si oui, pourriez-vous nous donner quelques exemples des informations partagées?
  - Si non, pourquoi ne l'aviez-vous pas fait?
- 1.4. Au cours du projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA, aviez-vous participé à des causeries éducatives organisées par ce projet ?
  - Si oui, pouvez-vous nous citer quelques messages que vous avez retenus et qui vous ont aidé à changer certaines pratiques quotidiennes dans votre ménage ?
  - Si non pourquoi n'aviez-vous participé à ces causeries ?

#### **2. Force des liens avec les marchés et les services publics**

- 2.8. Parlant de la production (agricole et animale), aviez-vous eu accès aux semences ? aux bêtes ? aux volailles ?
  - Si oui, qui vous les avait donné ?
  - Si non, pourquoi n'aviez-vous pas accès à ces intrants ?
- 2.9. Existe-t-il des associations des microcrédits et d'épargne dans votre communauté ?
  - Si oui, lesquelles ? Sont-elles fonctionnelles ?
  - Aviez-vous eu accès au microcrédit ?
  - Si oui, Qu'est-ce que vous avez fait de ce crédit ?
  - Si non, pourquoi pas ?
- 2.10. L'accès aux intrants et au microcrédit a-t-il augmenté vos ventes ?
  - Si oui, donnez quelques exemples
  - Si non pourquoi ? donnez quelques exemples
- 2.11. En dehors des messages vulgarisés par le projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA, quels sont les autres acteurs qui ont vulgarisé des messages sur l'agriculture/élevage, la santé, la nutrition, l'eau et assainissement, la gestion des revenus, la gouvernance, le genre, la gestion des catastrophes?
- 2.12. Quels sont les changements que le projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA a apporté dans votre ménage et dans votre communauté?

#### **3. Changements dans les revenus et moyens de subsistance des ménages**

**6.6.** Selon vous, pensez vous que vos revenus ont augmenté ou pas durant ces 5 dernières années ?

Si non pourquoi?

6.7. D'une manière générale, à quoi affectez vous le revenu provenant de la vente des produits agricole, animale et des volailles (sondez en matière de soins de santé, de la scolarisation des enfants filles et garçons de l'épargne et l'achat des intrants, nourriture)

## **7. Evolution des pratiques de nutrition**

7.1. Pouvez-vous nous dire ce que vous aviez mangé hier ? Est-ce que vous aviez également mangé la même chose avant-hier ? Combien des fois mangez- vous par jour?

- Et vos enfants de moins de 5 ans, qu'est ce qu'ils ont mangé hier ? Combien des fois ?

7.2. Que faites vous pour éviter que vos enfants de moins de 5 ans tombent malade ?

- Et quand ils sont malades, que faites-vous ?

7.3. Lorsque vous êtes enceintes ou votre épouse est enceinte, qu'est-ce que vous faisiez ? Quels types d'aliments mangeais-tu ou mangeait – t- elle ? Combien de fois par jour ?

7.4. Quel est votre opinion sur les interdits de certains aliments à une femme lorsqu'elle est enceintes ?

7.5. Quelle est la situation actuelle dans votre village par rapport à ces aliments interdits ?

4.6. Avez-vous partagé quelques méthodes que vous avez ou votre épouse a apprises pour améliorer l'état nutritionnel de la femme enceinte, de la femme allaitante et des enfants de moins 5 ans ?

## **5. Changement dans les normes de genre**

7.6. Quel est le rôle de l'homme dans le ménage relatif

- au partage des travaux ménagers,
- aux soins des enfants,
- à la prise des décisions et
- à l'affectation des revenus?

Donnez quelques exemples

7.7. Est-ce cette participation de l'homme a – t- elle toujours existé dans votre village ou bien elle est arrivée suite aux activités du projet ?

7.8. Pensez vous que cette participation de l'homme va continuer ou pas après le retrait du projet de votre village ?

7.9. Quel est le rôle de la femme dans le ménage relatif

- au partage des travaux ménagers,
- aux soins des enfants,
- à la prise des décisions et
- à l'affectation des revenus?

Donnez quelques exemples

7.10. Est-ce cette participation de la femme a – t- elle toujours existé dans votre village ou bien elle est arrivée suite aux activités du projet ?

7.11. Pensez vous que cette participation de la femme va continuer ou pas après le retrait du projet de votre village ?

7.12. Est-ce que les femmes participent-elles dans la prise des décisions concernant la gestion des ressources communautaires et des institutions locales? Donnez quelques exemples

7.13. Est-ce cette participation à la prise des décisions concernant la gestion des ressources communautaires et des institutions locales a toujours existée dans votre village ou bien elle arrivée suite aux activités du projet ?

7.14. Pensez vous que cette participation de la femme va continuer ou pas après le retrait du projet de votre village ?

## 6. Résultats des interventions sur la Réduction des Risques des Catastrophes (RRC)

6.11. Est-ce que vous avez :

- Des comités locaux de développement communautaire dans votre village?
- Des comités agricoles de gestion rurale ?
- Si oui ces comités ont-ils existé avant le projet ou ont été mis en place par le projet ?
- Ces comités sont –ils fonctionnels ?
- Quel est le rôle des ces comités ? Qu'est ce que ces comités ont fait ?
- Les membres des ces comités ont – ils été formés ?

Si oui, dans quels domaines ?

6.12. Pensez- vous que ces comités vont continuer ou pas après l'arrêt du projet dans votre village ?

6.13. Quelles sont les mesures communautaires de réduction des risques liés aux catastrophes alimentaires:

- sécheresse,
- maladies des plantes, des animaux, des volailles,
- inondations

Au niveau de la communauté qui ont été prises en charge par les interventions du projet?

6.14. Y a- t il des comités mis en place dans votre communauté pour suivre l'exécution de ces les mesures communautaires de préventions de catastrophes?

7.7. Quels sont les facteurs qui ont favorisé ou défavorisé l'exécution de ces mesures communautaires de préventions de catastrophes?

## 7. Résultats de la gouvernance et des initiatives de résolution des conflits

**La question 7.1 sera adressée aux bénéficiaires des projets *Mercy Corps et Food for the Hungry***

7.10. Avez-vous des comités de gestion foncière dans votre village ?

- Ces comités sont ils fonctionnels ?
- Les membres de ces comités ont-ils été formés ? Dans quel domaine ?

7.11. Avez-vous eu accès aux terres ?

7.12. Donnez quelques exemples qui montrent que les initiatives mises en place par le projet ont permises aux membres de la communauté :

- d'accéder aux terres ?
- de résoudre les conflits au sein de la communauté

7.13. Pouvez-vous citer quelques initiatives qui ont plus au moins bien marché dans la résolution des conflits fonciers?

**7.14.** Après le retrait du projet de votre village, à qui reviendront ces terres ?

***N.B Les questions 7.6, 7.7 et 7.8 seront adressées aux bénéficiaires et aux non bénéficiaire du projet JENGA JAMAA II.***

7.15. D'habitude, y a- t-il dans votre communauté des filles qui se marient avant 18 ans ?

- Si oui, que pensez-vous de cette situation?

7.16. Dans votre communauté, quelles sont, selon vous les causes pour lesquelles certains hommes violentent leurs femmes?

7.17. En cas de viol d'une femme/fille, que fait la famille de la survivante et la communauté (attitudes et réactions)?

## 8. durabilité des interventions du programme

8.3. Pourriez-vous donner quelques exemples qui montrent que les activités mise en œuvre par le projet vont continuer ou s'arrêter après le retrait du projet de votre village ?

## Annex 9. Mini-Survey Questionnaire and Household Visit Guide

### MINI-SURVEY

#### MODULE 0 : IDENTIFICATION

N° de la question	Variable d'identification	Code
01	Province	/__/_/
02	Zone de santé	/__/_/
03	Aire de santé	/__/_/
04	Village/localité/Campement/Cité	/__/_/
05	Type de ménage par rapport à la participation ou non au Projet FFP  1= Ayant bénéficié l'assistance du projet  2= N'ayant pas bénéficié l'assistance du projet	/__/_/

#### RESULTAT DE L'ENQUETE

Questionnaire administré le :	jour /__/_/ mois /__/_/ Année /__/_/
Par : Nom de l'enquêteur :	..... /__/_/
Résultat :	1= rempli ; 2= Partiellement rempli ; 3= Non rempli /__/_/
Vérifié le :	jour /__/_/ mois /__/_/ Année /__/_/
Par : Nom du vérificateur :	..... /__/_/
Saisi le :	jour /__/_/ mois /__/_/ Année /__/_/
Par : Nom de l'agent de saisie :	..... /__/_/

## Module 1 : Caractéristiques socio-démographiques du ménage

N°	Question	Modalités de réponses encercler la modalité correspond au bon choix	Codes
101	Sexe du répondant	1= Masculin                      2= féminin	/ _ /
102	Age du répondant	.....ans	/ _ / _ /
103	Lien avec le chef de ménage	1= Chef de ménage                      2= Conjoint du CM 3= Enfant majeur du CM                      4= Autre membre (majeur)	/ _ /
104	Nombre de personnes dans le ménage	..... (indiquez le nombre)	/ _ / _ /
105	Nombre d'enfants de – 5ans	..... (indiquez le nombre)	/ _ /
106	Nombre d'enfants de 5-17 ans	..... (indiquez le nombre)	/ _ / _ /
107	Nombre d'adultes de 18 ans et plus	..... (indiquez le nombre)	
108	Depuis combien de temps habitez-vous ce village/cité/Campement/Localité ?	1= Depuis la naissance                      4= Entre 5 et 10 ans 2= Depuis moins d'1 an                      5= Depuis plus de 10 ans 3= Entre 1 et 5 ans	/ _ /
109	Etat matrimonial du répondant	1= Célibataire    2= Marié(e) monogame    3= Marié(e) polygame 4= Union de fait    5= Séparé(e)                      6= divorcé(e) 7= Veuf/veuve	/ _ /
110	Quel est votre niveau d'études ?	0= Sans instructions                      1=primaire 2=Secondaire                      3=supérieur ou universitaire	/ _ /
111	Quelle est votre activité principale actuelle ?	0= Sans emploi/ménagère 1= Cultivateur/trice 2= Eleveur/se 3= Agent de l'Etat 4= Agent dans une ONG/UN 5= Commerçant 6= Pasteur/Religieux 7= Autre (à préciser).....	/ _ /

## Module 2 : Efficacité des modèles de formations

N°	Question	Modalités de réponses encercler la modalité correspond au bon choix	Codes
201	Aviez-vous bénéficié les formations dispensées par le projet <b>RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b>	1= Oui 2= Non	/___/
202	D'une manière générale, ces formations ont-elles apporté des améliorations dans les domaines suivants dans votre communauté ?  <b>Répondez par oui ou par Non (plusieurs réponses sont possibles)</b> A= adoption des nouvelles pratiques agricoles (agriculture/élevage) B= transformation des produits C= vente de produits agricoles/élevages D= stockage de produits agricoles/élevages E= Aucune amélioration	A= 1 :Oui 2 : Non  B= 1 :Oui 2 : Non  C= 1 :Oui 2 : Non  D= 1 :Oui 2 : Non  E= 1 :Oui 2 : Non	A=/___/  B=/___/  C=/___/  D=/___/  E=/___/
203	Etes-vous satisfait de la façon dont les bénéficiaires des formations ont été sélectionnés ? Si 203=2, allez à 205	1= Oui 2= Non 3= NSP	/___/
204	Si oui, pourquoi ?	1= Transparence des procédures (critères non discutables) 2= Absence des magouilles (ni corruption ni tribalisme) 3= Autre (à préciser).....	/___/
205	Si non, pourquoi ?	1= Procédures opaques (critères flous) 2= choix basé sur le clientélisme (ni corruption ni tribalisme) 3= Autre (à préciser).....	/___/

### Module 3: Force des liens avec les marchés et les services publics

301	Dans votre communauté, entre les produits agricoles ou d'élevage transformés et non transformés, lesquels se vendent bien ?	1= Produits transformés 2= Produits non transformés 3= NSP	/__/
302	Selon vous, y a-t-il de plus en plus des gens qui reçoivent des micro-crédits ?	1= Oui 2= Non 3= NSP	/__/
303	Aviez-vous sollicité un micro-crédit  <i>Si 303= 2, allez à 305.</i>	1= Oui 2= Non	/__/
304	Si oui, l'aviez-vous reçu en entre 2010 et 2015 ?	1= Oui 2= Non	/__/
305	Si vous n'aviez pas cherché un crédit, quelle en était la raison principale ?	1= Manque d'informations 2= difficultés de préparer le dossier 3= On ne sert pas tout le monde 4= Evite les dettes 5= Autre (à préciser)..... .....	/__/
306	Selon vous, y a-t-il eu amélioration ou non des conditions de vie de la population de votre communauté entre 2010 et aujourd'hui ?  <i>Si 306= 2, allez à 308.</i> <i>Si 306= 3, allez à 309.</i>	1= Conditions améliorées 2= Conditions de vie dégradées 3= Pas de changements	/__/
307	Si changement, quel est le principal facteur qui l'a permis ?	1= Interventions du <b>projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b> 2= Interventions d'autres projets des partenaires (UN, ONG) 3= Interventions de l'Etat 4= Autre (à préciser).....	/__/
308	Si conditions de vie dégradées, quel est le principal facteur qui est à la base de cette situation?	1= Mauvaises interventions du <b>projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b> 2= Interventions d'autres projets des partenaires (UN, ONG) 3= Interventions de l'Etat 4= Autre (à préciser).....	/__/
309	En cas de Statu quo : Raison principale	1= Aucun apport des interventions du <b>projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b> 2= Absence d'interventions d'autres projets des partenaires (UN, ONG) pour soutenir/renforcer les interventions du <b>projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b> 3= Aucune interventions de l'Etat 4= Autre (à préciser)..... .....	/__/

310	Selon vous, y a-t-il eu amélioration des infrastructures (routes, centres de santé, écoles, marchés, points d'eau, latrines, ...) entre 2010 et aujourd'hui ?	1= Oui 2= Non	/__/
311	Est-ce que les produits agricoles/élevages se sont bien vendus entre 2010 et aujourd'hui dans cette communauté ?	1= Oui 2= Non	/__/
312	En quel état préfère-t-on vendre les produits agricoles/élevages dans cette communauté ?	1= Non transformés 2= Transformés 3= Ne sait pas	/__/

## Module 4 : Changements dans les revenus et moyens de substance des ménages

N°	Question	Modalités de réponses encercler la modalité correspond au bon choix	Codes
401	Ces cinq dernières années, vos revenus se sont-ils améliorés ou dégradés ? <i>Si 401= 2, allez à 403.</i>	1= Améliorés 2= Dégradés	/ __/
402	En cas d'amélioration de revenus, quels seraient les facteurs qui en sont responsables ?  <i>Plusieurs réponses sont possibles</i> A= Bonnes interventions du <b>projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b> B= Bonnes interventions d'autres projets des partenaires (UN, ONG) C= Bonnes interventions de l'Etat D= Autre (à préciser).....	A= 1 :Oui 2 : Non  B= 1 :Oui 2 : Non  C= 1 :Oui 2 : Non  D= 1 :Oui 2 : Non	A=/ __/  B=/ __/  C=/ __/  D=/ __/
403	En cas de la dégradation de revenus, quelles pourraient en être les causes ?  <i>Plusieurs réponses sont possibles</i> 1= Mauvaises interventions du <b>projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b> 2= Mauvaises interventions d'autres projets des partenaires (UN, ONG) 3= Mauvaises interventions de l'Etat 4= Autre (à préciser).....	A= 1 :Oui 2 : Non  B= 1 :Oui 2 : Non  C= 1 :Oui 2 : Non  D= 1 :Oui 2 : Non	A=/ __/  B=/ __/  C=/ __/  D=/ __/
404	D'après-vous, entre 2010 et aujourd'hui, vos conditions de vie se sont-elles ou non améliorées ? <i>Si 404= 2, allez à 406</i>	1= Améliorées 2= Dégradées	/ __/
405	En cas d'amélioration de conditions de vie, quels seraient les facteurs qui en sont responsables ?  <i>Plusieurs réponses sont possibles</i>  1= Bonnes interventions du <b>projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b> 2= Bonnes interventions d'autres projets des partenaires (UN, ONG)		

	<p>3= Bonnes interventions de l'Etat  4= Autre (à préciser).....</p>	<p>A= 1 :Oui 2 : Non    B= 1 :Oui 2 : Non    C= 1 :Oui 2 : Non    D= 1 :Oui 2 : Non</p>	<p>A=/_/_/    B=/_/_/    C=/_/_/    D=/_/_/</p>
<b>406</b>	<p>En cas de la dégradation des conditions de vie, quelles pourraient être les causes ?</p> <p><i>Plusieurs réponses sont possibles</i></p> <p>1= Mauvaises interventions du <b>projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b>  2= Mauvaises interventions d'autres projets des partenaires (UN, ONG)  3= Mauvaises interventions de l'Etat  4= Autre (à préciser).....</p>	<p>A= 1 :Oui 2 : Non    B= 1 :Oui 2 : Non    C= 1 :Oui 2 : Non    D= 1 :Oui 2 : Non</p>	<p>A=/_/_/    B=/_/_/    C=/_/_/    D=/_/_/</p>

## Module 5 : Changement des pratiques/habitudes nutritionnelles

N°	Question	Modalités de réponses encercler la modalité correspond au bon choix	Codes
501	Combien de repas consommez-vous par jour ?	..... nombre	/ __/
502	<p>Quels aliments avez-vous l'habitude de consommer dans votre ménage ?</p> <p style="text-align: center;"><i>Plusieurs réponses possibles</i></p> <p>1= Haricots</p> <p>2= Patate</p> <p>3= Banane</p> <p>4= Manioc</p> <p>5= Maïs</p> <p>6= Arachides</p> <p>7= Légumes (ngai-ngai)</p> <p>8= Volailles</p> <p>9= Chèvres</p> <p>10= Autre (à préciser).....</p>	<p>1= 1 :Oui 2 : Non</p> <p>2= 1 :Oui 2 : Non</p> <p>3= 1 :Oui 2 : Non</p> <p>4= 1 :Oui 2 : Non</p> <p>5= 1 :Oui 2 : Non</p> <p>6= 1 :Oui 2 : Non</p> <p>7= 1 :Oui 2 : Non</p> <p>8= 1 :Oui 2 : Non</p> <p>9= 1 :Oui 2 : Non</p> <p>10= 1 :Oui 2 : Non</p>	<p>1=/ __/</p> <p>2=/ __/</p> <p>3=/ __/</p> <p>4=/ __/</p> <p>5=/ __/</p> <p>6=/ __/</p> <p>7=/ __/</p> <p>8=/ __/</p> <p>9=/ __/</p> <p>10=/ __/</p>
503	Combien de fois l'avez-vous consommé au cours de la dernière semaine ?	.....fois	/ __/
504	Combien de fois par semaine consommez-vous les poissons ou la viande de chèvre/mouton/Vache/volaille ou autre?	.....fois par semaine	/ __/

N°	Question	Modalités de réponses encercler la modalité correspond au bon choix	Codes
505	D'où provient principalement l'eau de boisson que vous buvez ?	1. Robinet 2. Puits à pompe ou forage 3. Puits creusé 4. Eau de source 5. Eau de pluie 6. Eau de rivière, fleuve, lac 7. Eau en bouteille 8. Autre :.....	/ __ /
506	Si l'eau de boisson provient d'une source non aménagée, que faites-vous pour la traiter avant de la boire?	1= Bouillir 2= Laisser se reposer 3= Mettre un produit chimique 4= Autre (à préciser) .....	/ __ /
507	Comment se fait l'évacuation des ordures ménagères ?	1. jeter décharge publique 2. Brûler/incinérer 3. Enfouir 4. jeter dans la rue/caniveau 5. jeter dans un cours d'eau 6. jeter dans la brousse 7. Autre.....	/ __ /
508	Votre ménage dispose-t-il une latrine	1= Oui 2= Non	/ __ /
509	Votre ménage dispose-t-il des moustiquaires imprégnées d'insecticide ?	1= Oui 2= Non	/ __ /
510	Est-ce que, la nuit dernière, tous les membres du ménage ont dormi sous une moustiquaire	1= Oui 2= Non	/ __ /
511	Est-ce que, la nuit dernière, tous les enfants de moins de 5 ans du ménage ont dormi sous une moustiquaire	1= Oui 2= Non	/ __ /
512	Est-ce que, la nuit dernière, toutes les femmes enceintes du ménage ont dormi sous une moustiquaire	1= Oui 2= Non	/ __ /
513	Les membres de votre ménage ont-ils l'habitude de laver régulièrement les mains ?	1= Oui 2= Non	/ __ /
514	Y a-t-il un dispositif de lavage des mains à côté des latrines ?	1= Oui 2= Non (si non passer au Module 7)	/ __ /

515	<p>Est-ce que, d'habitude, les membres de votre ménage lavent-ils régulièrement les mains à ces occasions ?</p> <p><i>Plusieurs réponses sont possibles</i></p> <p>Répondre par : 1=oui, 2=non :</p> <p>A= avant la cuisson des repas</p> <p>B= avant de manger</p> <p>C= après avoir été à la toilette</p> <p>D= après avoir fait un travail manuel</p>	<p>A= 1=oui, 2=non :</p> <p>B= 1=oui, 2=non :</p> <p>C= 1=oui, 2=non :</p> <p>D= 1=oui, 2=non :</p>	<p>A= / ___ /</p> <p>B= / ___ /</p> <p>C= / ___ / D</p> <p>= / ___ /</p>
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## Module 6 : Changements dans les normes de genre

N°	Question	Modalités de réponses encercler la modalité correspond au bon choix	Codes
601	Combien d'enfants en âge scolaire (5-17 ans) avez-vous?  <i>Si pas d'enfants d'âge scolaire dans le ménage, allez à 606</i>	Nombre de filles..... Nombre de garçons.....	/___/ /___/
602	Combien des garçons fréquentent-ils l'école ?	.....	/___/
603	Au cas où au moins un garçon ne fréquente pas l'école, demander les raisons pour au plus un enfant	1= Cas de maladie 2= Manque des moyens financiers 3= Il est moins intelligent/Ne s'applique pas bien/dérangeur 4= Les études en sont importantes pour un garçon 5= Autre (à préciser).....	/___/
604	Combien des filles fréquentent-elles l'école ?	.....	/___/
605	Au cas où au moins une fille ne fréquente pas l'école, demander les raisons pour au plus un enfant	1= Cas de maladie 2= Manque des moyens financiers 3= Il est moins intelligent/Ne s'applique pas bien/dérangeur 4= Les études en sont importantes pour une fille 5= Autre (à préciser).....	/___/
606	A quel âge une fille peut-elle se marier dans votre communauté ?	1= moins de 18 ans 2= 18 ans et plus	/___/___/
607	A quel âge un garçon peut-il se marier dans votre communauté ?	1= moins de 18 ans 2= 18 ans et plus	/___/___/
608	Dans votre communauté, est-il permis, à ce jour, à un homme de discuter avec son épouse/partenaire sur les questions de planification familiale ?	1= Oui 2= Non	/___/
609	Si non, pourquoi ?	1= C'est interdit par la coutume/tradition/église 2= Pour éviter d'être importunée par elle plus tard 3= Autre (à préciser).....	/___/

610	Dans votre communauté, est-il permis, actuellement, à un homme de discuter avec son épouse/partenaire sur les questions liées aux dépenses du ménage ?	1= Oui 2= Non	/__/
611	Si non, pourquoi ?	1= C'est l'homme qui est chef 2= cela ne rentre pas dans les attributions de la femme dans le foyer 3= Autre (à préciser).....	/__/
<b><i>Instruction : lire cette déclaration à l'intention de l'enquêté : vrai ou faux</i></b>			
612	Il est normal que toutes les décisions du ménage soient prises par l'homme	1= Vrai 2= Faux 3= Ne sait pas	/__/
613	Les travaux du ménage c'est le domaine exclusif de la femme et de la jeune fille	1= Vrai      2= Faux 3= Ne sait pas	/__/
614	L'école est réservée aux garçons, les filles doivent se préparer uniquement au mariage	1= Vrai 2= Faux 3= Ne sait pas	/__/
615	Il est normal qu'un homme batte sa <del>sans</del> femme s'il estime que celle-ci se comporte mal.	1= Vrai 2= Faux 3= Ne sait pas	/__/
616	L'argent de la femme ne lui appartient pas. Elle doit remettre tout à l'homme qui doit apprécier ce qu'il doit lui donner.	1= Vrai 2= Faux 3= Ne sait pas	/__/
617	Une femme qui va participer aux réunions de femmes dans des ONG mérite avec raison des sanctions de la part de son mari.	1= Vrai 2= Faux 3= Ne sait pas	/__/
618	L'homme qui discute avec sa femme sur le nombre des enfants à mettre monde est un lâche	1= Vrai 2= Faux 3= Ne sait pas	/__/

### Module 7 : Santé de l'enfant et de la mère

N°	Questions	Modalités	Codes
701	Y-t-il dans le ménage un enfant de 0 à 6 mois ?  <i>Si 701= 2, allez à 705</i>	1= Oui                      2= Non	/__/
702	Si oui, le bébé âgé entre 0 et 6 mois est-il allaité au sein?	1= Oui                      2= Non	/__/
703	Est-ce que cet enfant a-t-il été vacciné contre la rougeole TB, tétanos, polio?	1= Oui                      2= Non	/__/
704	La maman a-t-elle été suivie au cours de sa grossesse (vérifier carnet de santé)	1= Oui                      2= Non	/__/
705	Le vaccin peut entrainer d'autres maladies	1=Vrai                      2= Faux	/__/
706	La poliomyélite se soigne mieux : ?	1=Chez le tradipraticien 2=A l'hôpital 3=Autre	/__/
707	Est-ce que le centre de santé de votre village réalise les activités de planification familiale?	1= Oui                      2= Non	/__/



		.....	
807	A quel moment ces comités avaient-ils été créés ?	1= Avant le projet <b>RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b> 2= Après le projet <b>RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b>	/_/_/
808	Pensez-vous que ces comités vont continuer ou pas après le projet <b>RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b>	1= vont continuer 2= ne vont pas continuer	/_/_/
809	Pourquoi pensez-vous que les comités vont terminer après le projet <b>RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b>	1= La communauté n'a pas les moyens financiers et techniques de continuer les activités 2= Personne n'a vraiment compris l'importance du travail abattu par ces projets 3= Autre (à préciser) .....	/_/_/
810	Pourquoi pensez-vous que les comités ne vont pas se terminer avec la fin du projet <b>RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?</b>	1= La communauté va se prendre en charge et trouvera les moyens financiers et techniques pour continuer les activités 2= Il y a eu déjà transfert des compétences 3= Autre (à préciser) .....	/_/_/

N°	Question	Modalités de réponses encercler la modalité correspond au bon choix	Codes
811	Votre communauté a-t-elle pu déceler des situations de risque de catastrophes naturels ou de conflits (à caractère ethnique ou foncier) durant les cinq dernières années ?  <i>Si 811= 2, allez à 813</i>	1= Oui 2= Non	/ __/
812	Si oui, comment a-t-elle pu gérer cela ?	1= Dialogue avec la population et les voisins 2= Sensibilisation de la population sur l'attitude à tenir 3= Autre (à préciser).....	/ __/
813	Etes-vous informé de l'existence des plans et des micro-projets exécutés pour diminuer les risques ?	1= Oui 2= Non	/ __/
814	Est-ce que les comités de développement local aident à mettre en œuvre les politiques nationales/provinciales ou locales, par exemple pour adapter l'agriculture aux changements climatiques ou lutter contre les épidémies ?	1= Oui 2= Non	/ __/
815	Est-ce que le projet RISE /JENGA JAMAA II/ TUENDELEE PAMOJA?  A= a permis l'amélioration de l'agriculture ? B= a permis l'amélioration de la gestion des ressources naturelles C= a permis l'amélioration la transformation des produits ? D= a permis l'amélioration de la vente de produits ?	A= 1=oui, 2=non : B= 1=oui, 2=non : C= 1=oui, 2=non : D= 1=oui, 2=non :	A=/ __/ B=/ __/ C=/ __/ D=/ __/

**Remerciez l'enquêté(e) et mettre fin à l'entretien.**

**Demandez-lui l'autorisation de visiter sa concession.**

## Household Observation Guide

<b>Agriculture</b>			
<b>A observer (moyennant accord)</b>		<b>Entourez la réponse donnée....</b>	
Y a-t-il un champ/jardin dans la concession/parcelle ?			
Si oui, quelles plantes ?			
Y a-t-il d'arbres fruitiers dans la concession/parcelle ?		Commentaires (types d':	
Si oui, quelles espèces ?		.....	
Demandez en quelle année ils ont été plantés.		.....	
La technique utilisée pour les planter/semer répond-t-elle aux techniques modernes ? ( <b>observer si les plantes sont semés en ligne ou en désordre, utilisation des semences améliorées et fertilisants</b> )		Oui	Non
		Commentaires	
Demandez si ces plantes sont destinées à la consommation du ménage et/ou à la vente. A quel moment on avait cueilli la dernière fois pour la consommation. A quel moment elles avaient été vendues pour la dernière fois ?  A quoi avait servi l'argent acquis à la suite de la vente ?		Commentaires :	
<b>Elevage</b>			
<b>A observer (moyennant accord)</b>		<b>Entourez la réponse donnée....</b>	
Y a-t-il des traces des animaux/Volailles domestiques dans la concession/parcelle ?		Oui	Non
Si oui, quelles espèces ?			
Demandez le nombre de têtes		..... (têtes)	
Demandez en quelle année a commencé ces élevages.		..... (année)	
La technique utilisée pour l'élevage répond-t-elle aux techniques modernes ? ( <b>la présence des mangeoires et abreuvoir, cage/loge, suivi sanitaire des animaux : vaccination des animaux</b> )		Oui	Non
		Commentaires	

<p>Demandez si ces animaux sont destinés à la consommation du ménage et/ou à la vente. A quel moment on avait abattu la dernière fois pour la consommation. A quel moment ils avaient été vendus pour la dernière fois ?</p> <p>A quoi avait servi l'argent acquis à la suite de la vente ?</p>	Commentaires :	
<b>Situation sociale</b>		
<b>A observer (moyennant accord)</b>	Entourez la réponse donnée....	
Le chef de ménage est-il monogame ou polygame ?	....	
<p>Si monogame ou polygame, y-a-t-il des femmes apparemment mariées à moins de 18 ans entre 2010 et 2016 ?</p>	Oui	Non
<p>Ya-t-il succession des enfants avec un faible écart intergénéral ? (<b>espacement des naissances et planification familiale</b>)</p> <p>Si pas apparent, posez la question sur le nombre d'enfants de moins de 5 ans par femme.</p>	Oui	Non
Y-a-il des enfants de moins de 18 ans qui ne vont pas à l'école ?	Oui	Non
Si oui, vérifiez, combien des filles et combien des garçons	Filles : .....	Garçons : .....
Demandez les raisons	Raisons filles :	Raisons Garçons :
<b>Demandez : Y a-t-il des filles du ménage qui ont été mariées avant 18 ans entre 2010 et 2016 ?</b>	Oui	Non
<p>Si oui, cherchez à savoir le pourquoi (le ménage n'avait-il entendu parler de violences sexuelles ou de l'interdiction de ce genre de mariages par une loi ?</p>	Commentaires :	

Vérifiez la nature de relations entre ce ménage et un de ses voisins	Bonne	Mauvaise
Si mauvaise, demander s'ils ont eu un conflit ouvert ayant conduit à des affrontements (bagarres, insultes).	Oui, en quelle année ?.....	Non
Si oui, y-a-il déjà eu des médiations ?	Oui, en quelle année ?.....	Non
Issues des médiations	Réconciliation	Pas de réconciliation
Autres commentaires :		

### Sécurité alimentaire

<b>A demander</b>		
Combien de repas avez-vous mangé hier	....	
Demandez, quelle était la composition de ce repas ?	.....	
Combien le ménage a-t-il consommé le même repas au courant de la semaine passée ?	.....	
<b>observer</b>	Oui	Non
Quel est l'état de santé de la mère ?	Bon	Mauvais
Quel est l'état de santé des enfants de moins de 5 ans	Bon	Mauvais

Commentaires (Y a-t-il des signes de malnutrition chez la mère et les enfants ? Si oui, lesquels ?)

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### L'usage des moustiquaires

<b>A observer (moyennant accord)</b>	Entourez la réponse donnée....	
Combien de moustiquaires sont disponibles dans le ménage (à vérifier) ?	.....	
Sont-elles placées au dessus des lits/nattes avant le coucher ?	Oui	Non

Tous les lits/nattes ont-ils une moustiquaire ?	Oui	Non	
Sont-elles toutes en bon état ? (absence de trous)	Oui	Non	
Ont-elles été reçues ou achetées récemment (- de 3 ans) ?	Oui	Non	
Depuis quand le ménage utilise-t-il les MII (avant 2010 ou après?)			
<b>A demander</b>			
D'autres moyens de prévention du paludisme sont-ils utilisés ?	Oui	Non	
Lesquels ?			
Au cas où le ménage n'utilise pas les MII, demander pourquoi utilisez vous ou n'utilisez vous pas les moustiquaires comme moyens de prévention contre le paludisme ?			
Autres commentaires :			
<b>Le lavage des mains</b>			
Y a-t-il un dispositif de lavage des mains à côté des latrines ? (demander l'autorisation pour les voir)	Oui	Non	
Y a-t-il dans ce dispositif quelque chose permettant de se désinfecter les mains (cendres, savon,...)	Oui	Non	
Les adultes les utilisent-ils avant les repas ?	Oui	Non	
Les adultes les utilisent-ils après les repas ?	Oui	Non	
Les enfants les utilisent-ils avant les repas ?	Oui	Non	
Les enfants les utilisent-ils après les repas ?	Oui	Non	
Enfants et adultes les utilisent-ils à la sortie des toilettes ?	Oui	Non	
Utilise-t-on d'autres moyens pour se laver les mains ?	Oui	Non	
Lesquels ?			
<b>L'allaitement et le suivi de la grossesse</b>			
Le bébé âgé entre 0 et 6 mois est-il allaité?	oui	non	
Pourquoi ?			
Le bébé a-t-il reçu le colostrum ? (= lait des 3 premiers jours, de couleur jaunâtre)	oui	non	
Les bébés allaités reçoivent-ils une autre nourriture en plus du lait maternel ?	oui	non	
Pour qu'elles raisons ?			

La maman a-t-elle été suivie au cours de sa grossesse (vérifier carnet de santé)	oui	non	
CPN 1	oui	non	
CPN 2	oui	non	
Pourquoi ?			
La maman a-t-elle été suivie après sa grossesse (vérifier carnet de santé)	oui	non	
CePoN 1	oui	non	
CePoN 2	oui	non	
Pourquoi ?			
<b>La vaccination</b>			
	<b>Enfant 1 :</b>		<b>Enfant 2 :</b>
Complétez les cases pour les enfants de 0 à 5 ans en commençant par le plus jeune	.....ans		.....ans
Le carnet de santé est disponible (entourez la bonne réponse)	Oui      Non	Oui Non	
L'enfant a été vacciné contre la poliomyélite (VPO)	Oui      Non	Oui Non	
L'enfant a été vacciné contre la rougeole	Oui      Non	Oui Non	
L'enfant a été vacciné contre la diphtérie, le tétanos et la coqueluche (DTP)	Oui      Non	Oui Non	
L'enfant a été vacciné contre la tuberculose (BCG)	Oui      Non	Oui Non	
L'enfant a reçu le vaccin anti amaril (VAA)	Oui      Non	Oui Non	
L'enfant a reçu le vaccin contre l'hépatite virale B (HepB)	Oui      Non	Oui Non	
L'enfant a-t-il reçu de la vitamine A	Oui      Non	Oui Non	

## Annex A10. Select Findings from Mini-Surveys and House Visits

### MERCY CORPS Survey Findings

Characteristic	Beneficiaries	Non-Beneficiaries
Percentage of households consuming less than two meals per day	18.1	21.4
Percentage of children under 2 vaccinated for yellow fever	74.2	55.6
Percentage of children under 2 vaccinated for polio	80.6	83.3
Percentage of children under 2 vaccinated for tuberculosis	58.1	50.0
Percentage reporting use of water from rivers, lakes, or other natural sources	28.9	55.0
Percentage stating that it is normal that all household decisions be made by the husband	9.6	14.3
Percentage stating that it is acceptable for husbands to beat their wives	29.1	40.0
Percentage who have solicited a loan	65.1	14.3

### ADRA Survey Findings

Characteristic	Beneficiaries	Non-Beneficiaries
Percentage of households consuming less than two meals per day	30.4	31.4
Percentage of children under 2 vaccinated for yellow fever	67.8	63.2
Percentage of children under 2 vaccinated for polio	89.8	94.7
Percentage of children under 2 vaccinated for tuberculosis	74.6	68.4
Percentage reporting use of water from rivers, lakes, or other natural sources	16.5	31.5
Percentage stating that it is normal that all household decisions be made by the husband	17.7	8.6
Percentage stating that it is acceptable for husbands to beat their wives	29.6	40.2
Percentage who have solicited a loan	38.0	22.7
Percentage of respondents who took part in a program-related training (direct or cascade)	94.9	22.9
Percentage indicating that their livelihood conditions have improved over last 5 years	77.2	25.7
Percentage of mothers showing signs of	18.5	30.0

malnutrition		
Percentage of women observed regularly during pregnancy	72.1	66.7
Percentage of households in which children under 5 show signs of malnourishment	32.9	22.8

### FOOD FOR THE HUNGRY Survey Findings

Characteristic	Beneficiaries	Non-Beneficiaries
Percentage of households consuming less than two meals per day	3.2	18.8
Percentage of children under 2 vaccinated for yellow fever	67.8	63.2
Percentage of children under 2 vaccinated for polio	81.8	89.8
Percentage of children under 2 vaccinated for tuberculosis	72.1	73.3
Percentage reporting use of water from rivers, lakes, or other natural sources	44.5	59.4
Percentage stating that it is normal that all household decisions be made by the husband	22.2	34.4
Percentage stating that it is acceptable for husbands to beat their wives	23.8	3.1
Percentage who have solicited a loan	22.7	14.5

### Select Household Observations (Pooled across DFAPs)

Characteristic	Share of Beneficiary Households	Share of Non-Beneficiary Households
Fruit trees in the concession/household	61.3	63.2
Evidence of domesticated animals	64.5	57.8
Presence of a married girl aged less than 18 between 2000 and 2016	60.3	68.2
Evidence of a succession of births by one mother with little gap in between	19.1	20.2
Presence of children under 18 who do not attend school	59.6	68.7
Mosquito nets were observed on beds	70.3	71.9
All beds in the household have mosquito nets	55.1	54.5
A handwashing station is observable near the latrine	38.7	24.2

## A11. GPS-based Map of Evaluation Sites

