



**West Georgia
Community Mobilization Initiative**

Final Report

September 2000 through September 2004



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Periodic Activity Report – Cover Sheets



Submitted to USAID / Caucasus Georgia
Office of Humanitarian Response and Social Transition

Date Submitted: September 2004

Please submit these cover sheets with your periodic activity report. The narrative sections of the report should follow the format agreed upon by the relevant USAID activity manager. Unless otherwise agreed, please use the same format as the logical framework and/or work plan submitted with the original proposal.

I. Activity Data

Activity Name: **West Georgia Community Mobilization Initiative (West GCMI)**

Implementing Partner: **CARE International**

Award/Amendment No. and Type (C, CA, G, IAA): CA 114-A-00-00-00149-00

Report for the Period: **September 2003-April 2004** Life of Activity: **September 2000 – September 2004**

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Number of pages in this report (including cover sheets):

Purpose of Activity: **To contribute directly and quantitatively to the reduction of suffering for vulnerable and isolated groups and communities in Western Georgia**

Major Customers/Beneficiaries: **Most vulnerable and isolated groups including IDPs, orphans, widows, single mothers with small children, isolated groups as well as local residents**

Linked to USAID SO No: **3.1**
3.1.2.2

Linked to IR No(s): **3.1.2, 3.1.2.1,**

II. Linkages to USAID's Performance Indicators

Please report your progress toward each of USAID's SO 3.1 performance indicators. Disaggregate data as appropriate. Please do not double count when calculating totals.

Strategic Objective 3.1 Reduced Human Suffering

Indicator: **# of vulnerable individuals with improved access to basic services**

Life Activity Planned	Target For 6 Months	Actual		Life of the project		
		Previous	Current (Last 6 month)	Difference	% Variance	End of Project
555,000	148,000	1,390,971	607,017	1,849,988	333.3%	1,997,988

The total number of 1,997,998 includes direct and indirect beneficiaries together and was calculated on a per Micro and Small projects basis (535).

Indicator: Number of community projects completed
 Result: IR 3.1.2 Vulnerable communities meet own needs
 Activity: West GCMi CARE

	Life Activity Planned	THIS PERIOD (past 6 month)		LIFE OF THE PROJECT				
		Planned	Actual		Total	Variance	% Variance	Cumulative to Date (since project inception)
			Previous	Current				
Total: Micro and Small projects	550	50	435	100	535	-15	-2.8%	97.3%
Total: RFA(s)	34	0	57	0	57	23	40.4%	167.6%

Indicator: Value of community contribution to community development projects
 Result: IR 3.1.2.1 Increased Capacity to Deliver Health and Other Services
 Activity: West GCMi CARE

	Life Activity Planned	THIS PERIOD (past 6 month)		LIFE OF THE PROJECT				
		Planned	Actual		Total	Variance	% Variance	Cumulative to date
			Previous	Current				
Total value:	888,730	81,250	2,093,842	461,153	2,554,995	1,666,265	65.2%	287.5%
Cash:	0	0	1,800	12,500	14,300	14,300	100.0%	
Material:	355,317	32,500	795,659	171,961	967,620	612,303	63.3%	272.3%
Labor (skilled):	88,302	8,125	362,303	101,453	463,756	375,454	81.0%	525.2%
Labor (unskilled):	445,111	40,625	934,080	175,239	1,109,319	664,208	59.9%	249.2%
Average % per project:	25%	25%	41.58%	39.85%	41.49%	NA	16%	40.7%
Number of projects:	550	50	435	100	535	-15	-2.8%	97.3%

Indicator: Number of direct beneficiaries receiving services from activities under IR 3.1.2.1
 Result: IR 3.1.2.1 Increased Capacity to Deliver Health and Other Services
 Activity: West GCMi CARE

	Life Activity Planned	THIS PERIOD (last 6 month)		LIFE OF THE PROJECT				
		Planned	Actual		Total	Variance	% Variance	Cumulative to date
			Previous	Current				
Total:	410,000	37,250	535,699	313,313	849,012	439,012	51.7%	207.1%
Female:	225,500	20,488	284,790	167,650	452,440	226,940	50.2%	200.6%
Male:	184,500	16,762	250,909	145,663	396,572	212,072	53.5%	214.9%
IDP:	28,700	2,608	29,527	15,435	44,962	16,262	36.2%	156.7%
Local:	381,300	34,642	506,172	297,878	804,050	422,750	52.6%	210.9%
Adult:	311,600	28,310	399,425	212,951	612,376	300,776	49.1%	196.5%
Youth	98,400	8,940	136,274	100,362	236,636	138,236	58.4%	240.5%

Indicator: Number of jobs created by USAID-sponsored activities under IR 3.1.2.2
 Result: IR 3.1.2.2 More active participation of vulnerable groups in the Economy

Indicator: Number of jobs created by USAID-sponsored activities under IR 3.1.2.2
 Result: IR 3.1.2.2 More active participation of vulnerable groups in the Economy
 Activity: West GCMi CARE

	Life of Activity Planned	This period (past 6 month)		LIFE OF THE PROJECT			
		Actual		Total	Variance	% Variance	Cumulative to date
		Previous	Curent				
Total:	3500	171	2977	3148	-352	-10.1%	89.9%
Female:	1925	35	2536	2571	646	33.6%	133.6%
Male:	1575	136	441	577	-998	-63.4%	36.6%
IDP:	350	1	792	793	443	126.6%	226.6%
Local:	3150	170	2185	2355	-795	-25.2%	74.8%

Indicator: Number of loans provided by USAID-sponsored activities under IR 3.1.2.2
 Result: IR 3.1.2.2 More active participation of vulnerable groups in the Economy
 Activity: West GCMi CARE

	This period (past 6 month)		LIFE OF THE PROJECT	
	Actual		Total	Variance
	Previous	Curent		
Total:	0	1716	1716	1716
Female:	0	1430	1430	1430
Male:	0	286	286	286
IDP:	0	345	345	345
Local:	0	1371	1371	1371

III. Feedback for USAID

We welcome suggestions from our implementing partners. Please provide brief comments below.

Feedback on this reporting format: **xxx**

Comments or suggestions for general improvement of USAID activity management: **xxx**

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INTRODUCTION

The West Georgia Community Mobilization Initiative (W-GCMI) was an ambitious four-year, \$11.5 million USAID-funded project implemented by CARE International in Georgia (CARE) from September 2000 - September 2004. As the lead organization, CARE managed the overall implementation of the project while International Medical Corps (IMC) focused on Health and Social Welfare activities. In 2002, a second partner, Horizonti joined the W-GCMI focusing its work on the social policy activities in Western Georgia¹. Together the three organizations implemented the W-GCMI in accordance with the cooperative agreement program description and any further adaptations as approved by USAID.

CARE's methodology for the West GCMI focused on vulnerable rural communities in the west of the country to help. Involving community members as stakeholders in the process mobilization and grants process was a key activity that directly benefited not only the sustainability and ownership of the project but also how community leaders could replicate mobilization for other projects. By including community members into the process of electing board members and prioritizing needs in the community, villagers' trust rose and they contributed more toward each project. Also, CARE found that providing opportunity for multiple grants to CBOs was an effective way to reinforce the principles of community mobilization, financial management, and other community development tools. It was also found that there was a correlation between the number of projects a CBO did and the percentage of contributions from the community, which rose per project.

The overall goal of W-GCMI was to contribute directly and quantitatively to the reduction of suffering for vulnerable and isolated groups and communities, internally displaced persons, and local residents in Western Georgia. The purpose of the project addressed USAID's Strategic Objective 3.1 "Reduced Human Suffering in Targeted Communities," four intermediate results:

- 3.1.2: vulnerable communities better able to meet their own needs;
- 3.1.2.1: increased capacity to delivery health and other services;
- 3.1.3: vulnerable communities identified and,
- 3.2.2.2: more active participation of vulnerable groups in the economy.

In order to maximize both impact and effective coordination with other assistance and development implementers in Western Georgia, CARE designed and developed the following Outcome and Effect Indicators:

- To Initiate and Support Grassroots Activities. Community Based Organization Development
- To Build Capacity. Improved Service Delivery to Vulnerable Communities
- To Strengthen Civil Society. Integration
- To Improve Economic Activity

The CARE Team believes that these Outcome effect indicators realistically represent the achievable and sustainable summation of West GCMI activities implemented over the four-year life of the GCMI Program, which will be presented in this report.

¹ Social Policy activities were implemented in close coordination with Mercy Corps, implementer of the EGCMi and the major partner of Horizonti for all Social Policy activities.

The purpose of the project was to contribute directly and quantitatively to the reduction of suffering for vulnerable and isolated groups and communities in Western Georgia. This was to be measured by achieving the following indicators

Accomplishment of W-GCMI Indicators

Indicator	Target	Accomplished	% Achieved
# of vulnerable individuals with improved access to basics services (indirect beneficiaries)	550,000	1,148,976	152 %
# of direct beneficiaries receiving services	410,000	849,012	207 %
# of direct beneficiary IDPs	28,700	44,962	156 %
# of female direct beneficiaries	225,500	452,440	200 %
Communities mobilized	300	300	100 %
# of community projects completed	550	535	97 %
Value of community contribution to development projects	\$887,730	\$2,554,995	285 %
Local NGOs strengthened receive funding.	30	34	113 %
# of grants awarded through RFAs	34	57	167 %
# of jobs created by (related) USAID sponsored activities	3500	3148	90 %
Increased use of health care facilities (compared to Baseline)	498	674	26 %
Increased school attendance (compared to Baseline)	88	97	10 %
Improved access to social services (compared to Baseline)	46	114	60 %

Overall, the project successfully identified, implemented and completed community mobilization activities in over 300 communities who in turn implemented 535 projects. W-GCMI has met or substantially exceeded all but two of its objectives. In these two objectives, # of projects implemented (97%) and # of jobs created (90%), CARE came very close to achieving these objectives. Additionally the W-GCMI supported over 34 local NGOs through an RFA process to implement projects in community mobilization, health and social welfare, agriculture and economic opportunities in the five West Georgian regions of Imereti, Samegrelo-Upper Svaneti, Racha-Lechkhumi & Lower Svaneti, Guria, and Adjara. Please see the USAID data tables at the front of this report and the W-GCMI performance data table in Annex 1 for more specific information on achievement of goals and objectives.

This final report is structured using the following W-GCMI Outcome: Effect indicators which would, if successful, ensure the project purpose, these are: 1) CBO Development, (2) Improved Basic Services to Vulnerable Communities, (3) Civil Society Integration of Sectors and (4) Economic Opportunities. The Output indicators within each Outcome/ Effect section will be used to measure W-GCMI accomplishments.

EXECUTIVE SUMMARY

I. MANAGEMENT AND ADMINISTRATION

Overall, the W-GCMI achieved nearly all goals and objectives of the project as defined in the original program description and modified during the project. The unfortunate difficulties in starting the project in a timely manner hindered initial project activities and, combined with ambitious targets for the projects, required the CARE team to accelerate project implementation in years 2 - 4. The team was able to accelerate the project through a combination of staffing and programmatic adaptations.

1.1 Staffing

In the second year of the project, the CARE team expanded grants, mobilization staff and created a unit for Quality and Standards to handle the increased workload. Additionally, the project opened satellite offices in the regional centers of Adjara, Samegrelo, Upper Svaneti and Racha-Lechkhumi as well as a seasonal office in Lower Svaneti. These two combined factors enabled CARE staff to provide closer and improved support to communities.

Staffing changes for key staff for the first two years of the project were many with the 3rd Chief of Party (COP) arriving in August 2001 and remaining to the end of the project. The Grants Manager (GM) position was filled three times with the third GM arriving in May 2002 and remaining in his post through the end of the project. The Community Mobilization Manager (CMM) was also filled three times with third CMM arriving in January 2003 and remaining until the end of the project. The IMC Health and Social Welfare Advisor (HSWA) position was filled four times with the fourth HSW Advisor remaining at his post from September 2002 - June 2004. However, by the spring of 2002, W-GCMI team had the internal capacity and the learning to begin to actively implement the project. With the Key staff in place for the last two years of the project, the CARE team was able to accelerate and reach nearly all of the proposed targets.

1.2 Administration

One of the primary administrative burdens in the W-GCMI was the significant number of sub grants to be awarded to the communities and local NGOs. As a result, the project created a grants unit in addition to its regular finance department to manage the grants processes and allow it to focus more on transparency and capacity building of grant awardees. Given the primary focus of communities in rehabilitation and the procurement intensive processes, CARE initially conducted all purchases for CBO grants through its procurement office to ensure that all necessary procurement policies were being adhered to given the issues of corruption in Georgia. Upon arrival in August 2001, the COP and GM in consultation with the Country Director initiated a pilot program to decentralize procurement to registered Community Based Organizations (CBOs) who would have a bank account, bylaws, a board of community members and training in procurement and budgeting procedures. This successful pilot was a critical innovation in the project that had the effect of:

- significantly accelerating the pace of project implementation by communities;
- reducing the administrative burden on a small procurement office in CARE;
- reducing the overall cost per project due to high costs of going through consolidators and thus enabling communities to do more with the same amount of money;
- Strengthened CBO organizational capacity to manage procurement activities.

Recognizing that decentralizing procurement increased risk of abuse of funds, CARE instituted a number of accountability and transparency measures such as financial management and procurement training to CBOs, enhanced Grants Officer monitoring of procurement activities and the creation of the Quality and Standards unit to ensure that communities were buying what they planned to purchase according to their sub grant agreements.

1.3 Amendments and modifications to W-GCMI

After the first 15 months of project implementation CARE requested and received approval to modify 3 project targets to better achieve the W-GCMI overall goal of reducing human suffering by strengthening the capacity of individuals, CBOs and NGOs to contribute toward the development of a dynamic civil society. This request, approved by AID in April 2002 resulted in a decrease in the number of communities to be mobilized from 400 to 300 and also the number of projects to be implemented by these communities from 630 to 550. Additionally, CARE proposed and received approval to increase the number of RFAs up to 25 to address NGO identified sector and non-sector specific needs of vulnerable groups in western Georgia. The main purpose for this request was to provide CARE the flexibility to issue awards of lower value to local NGOs with limited capacity. Higher value RFA awards were awarded to NGOs that had demonstrated capacity for larger awards.

2. COMMUNITY MOBILIZATION - 300 COMMUNITIES MOBILIZED

Background – The Methodology

The W-GCMI was designed to instill the democratic principles of Accountability, Transparency and Participation (ATP) within communities through the creation of CBO(s), which in turn would be awarded a series of project grants. The W-GCMI provided ATP principled inputs such as CBO grants management capacity building and training (consensus building, democratic decision-making, transparent leadership, budget reporting, etc) as well as funds in order for CBO(s) and their communities to develop and implement projects identified at the grass roots level. CBO project results therefore enhanced the general welfare of their communities through improved services such as education, health, economic development, etc. which were utilized by their constituencies. The outcome or result of CBO projects and subsequent service utilization was an increased trust, unity, confidence and an "attitude" that participation does bring dividends; these "attitude" changes (outcomes) based on "behavior" changes (W-GCMI inputs) became a sustaining factor as communities began to support ATP principles as the pre-condition to their own development and begin to demand it when it was lacking. Therefore, the W-GCMI was a project that depended very much on repeated CBO community contact, through an extended period of time, in order to reach this goal; the underlying assumption being that development in any form would not occur if the pre-condition of ATP was not present. ATP was in essence the foundation on which community mobilization was based and on which development and sustainability were dependent.

Therefore, the final report is structured using the following W-GCMI Outcome Effect indicators, which would, if successful, ensure the project purpose:

...To enhance vulnerable communities' ability to meet their own needs via enhanced community association, CBO(s) and NGO(s), by local citizens in support of shared interests.

2.1 Outcome/ Effect Indicator: Grassroots Activities and CBO Development

2.1.1 Indicator: # of CBO(s) formed, trained, functioning for at least one year

CARE's mobilization methodology outlined above was refined over the life of the project. In the first year of the project CARE piloted and implemented community mobilization in approximately 30 communities. After further refinements in the methodology and increased staff capacity, understanding and experience, CARE, identified and strengthened the capacity of local NGOs through an RFA process to implement community mobilization activities in over 200 communities. This was a critical step in building local capacity and constituencies for local CBOs NGOs and it to allow for the W-GCMI to achieve the mobilization objective of reaching 300 communities in four years.

During fiscal year 2001-2002 W-GCMI staff mobilized a total of 81 communities while partner NGO(s), through a series of RFA(s), mobilized a total of 115 communities. During fiscal year 2003-2004 a total of 104 communities were mobilized allowing W-GCMI to achieve its objective of 300 mobilized communities by the end of March 2004.

In addition, mobilization activities were undertaken by CARE in partnership with the "Georgian Social Investment Fund" (GSIF) between May and July 2004. A total of 33 Sacrebulos were remobilized using a jointly redeveloped mobilization approach facilitated by CARE with GSIF and W-GCMI Local NGO mobilization partners.

2.1.2 Indicator: # of supported CBO(s) showing evidence of improved organizational functioning -100%

During the W-GCMI two "Capacity Enhancement" tenders were announced which aimed to build the organizational capacity of CBO(s). The Charity Humanitarian Center Abkazeti (CHCA) was awarded both tenders, the first being a six month project for 60 CBO(s) starting in June of 2002; the second 10 month tender followed the first and concluded in July 2004 reaching a total of 100 CBO(s). During the second tender an Organizational Capacity Assessment Tool (OCAT) was developed between CARE and partner CHCA to better measure both the effects of the program against a preliminary baseline assessment, but also to better determine what follow up courses would be needed to address certain areas unique to each CBO. It was found that most CBO(s), as fairly new entities, upon completion of the program were found to be between *emerging* and *expanding* in terms of their organizational development.

2.1.3 Indicator: # CBO(s) that have completed Micro/Small Projects

Through a succession of grants the W-GCMI was able to offer up to three grants for those CBO(s) that could prepare, implement and complete projects in a timely manner. The W-GCMI was able to successfully achieve a total of 473 micro-projects, 62 small projects equaling a total of 535 projects over the life of the program or 97% of the project target of 550. The concept that multiple projects in a community strengthened the community mobilization experience is highlighted in the W-GCMI's final evaluation conducted in September 2004.

A total of 195 projects addressed educational issues, which were the biggest priority for CBO communities making up 36.4% of the total 535 projects. Cultural centers ranked second at 71 projects making up 13.3%, health ranked third at 68 projects, or 12.7 % of the total number of projects and electrification ranked fourth at 63 projects, or 11.8% of the total. Water and transportation projects ranked just below at 59 and 54 projects making up 11% and 10.1% of the total. Environmental, agriculture and social protection issues amounted to just 1.3%, 0.9% and 1.1% of the total.

2.2 Outcome/ Effect Indicator: Improved basic services to vulnerable communities

2.2.1 Indicator: # of Vulnerable Households/ Beneficiaries with improved access to basic services

The total number of direct beneficiaries reached through 535 completed micro small-projects equals 649,899. 550,000 was targeted. The micro-projects implemented by communities have directly benefited various cross-sections of their respective members. The composition of direct beneficiaries for a total of 535 micro small-projects indicates 53.3% of beneficiaries are female and 46.7% male. Of these, 26.65% are children teens while 5.28% make up IDPs. The total households, which benefited equals approximately 185,682. As basic services improved and were utilized by communities an increase in trust and confidence developed between beneficiaries and CBO(s).

2.2.2 Indicator: # of Micro Projects in sustained operation post completion with evidence of maintenance supported by local resources:

Out of the total 535 CBO projects completed under the W-GCMI, 472 CBO(s) have collected USD \$ 55,831 in maintenance funds to sustain projects post completion. The remaining 58 CBO(s), who may have not collected to date, represents a lack of information since some projects have only recently been completed and funds have not yet been collected. Maintenance funds collection and upkeep of projects suggests a greater ownership and trust (attitude) within communities and their CBO which is essential for sustainability and further development post W-GCMI.

2.2.3 Indicator: % change of utilization rates for health, Education, Electrical, Cultural centers, etc

Under the W-GCMI all projects were given a standard set of "success indicators" in order to measure pre-project numbers, before a respective CBO began project implementation, with a post project measure which usually was conducted by the CBO six months post project completion. In order to validate positive change a random sample of 30 CBO communities, equaling a 7.3 % sample of 300 communities mobilized, were selected.

Ambulatory projects saw an average 28% increase in utilization rates from pre project rates to post project rates. *Electric projects* saw an average 121.8 % increase in the availability of electricity which in turn affected local business operations. *Feeder road rehabilitation projects* saw an average increase of 96.3 % concerning how businesses, attendance at schools and visits per ambulatories were positively influenced by improved roads. *Secondary School projects* averaged a 67.5% increase in the number of students attending class, number of total classes held in winter and number of graduates from pre project numbers. Ambulatory visits by students decreased by 200% due partly to warmer classroom conditions post project. *Sport hall rehabilitation projects* showed an average increase of 57.6 % concerning the number of sporting and cultural events held, number of student playing sports and teachers teaching sports and cultural activities. Cultural center projects saw an average 5 times increase in the number of events, types of clubs and memberships from pre project data with post project numbers.

With increased social welfare due to successful CBO project completion and improved services, communities are more able to see for themselves that they too have a responsibility for their own development and that participation brings dividends.

2.3 Outcome/Effect: Civil Society Strengthening and Integration of Sectors

2.3.1 Indicator: average amount of community, local government and private contributions per Micro Project

W-GCMI's extensive community mobilization activities for its 535 funded projects leveraged over USD 5 2,554,995 through community, local government and private sector contributions. Contributions from CBO(s) came in the form of skilled labor (18.15%), unskilled labor (43.42%) and transportation and materials (37.87%). Overall, the value of community contributions for all CBO projects under the W-GCMI amounted to 41.49% from the original cost-sharing requirement of 25% per micro-project. Based on this information, the W-GCMI believes that the increase in the levels and forms of local resource cost sharing, across sectors, may be due to the number of projects each CBO completes which could be demonstrated by the communities' increased confidence in the CBO and by the benefits communities feel they are receiving based on completed projects. As CBO accountability and transparency increase, participation across sectors grows as citizens begin to see a positive change based on trust.

2.3.2 Indicator: # of CBO(s) using Advocacy skills to increase local government and private sector contributions

The W-GCMI provided the opportunity for basic advocacy skills workshops for all CBO(s) that were mobilized under the program. Out of the 300 CBO(s) created under the W-GCMI a total of 293 CBO(s) attended these two day workshops conducted by local partner Horizonti.

3. GRANT MANAGEMENT- 535 GRANTS TO 300 CBOS AND 57 SUB GRANTS TO 34 NGOS

Background

With over \$5.6 million in grants funding, CARE established a Grants Unit consisting of a grants manager, a grants coordinator and nine grants officers to ensure that the grants process was transparent and accountable as well as to train and build financial management capacity of CBOs and strengthen Local NGO capacity. Concurrently, CARE's Finance unit provided financial accounting, reporting and internal audit support.

The CBO and NGO grants activities formed the foundation of the W-GCMI project as the vehicle for which community mobilization was built upon. Communities could see the physical results of their work and have a sense of accomplishment. Grants to communities and NGOs to improve access to and quality of services required significant investment in the rehabilitation of the community infrastructure and in the case of the Local NGO community provision of capacity building and other critical services to vulnerable groups.

Community-Based Micro & Small projects contributed to the reduced human suffering in targeted communities through increasing the availability and accessibility of basic social services such as primary and secondary schools, ambulatory (health posts), rural transportation infrastructure, agriculture and electric supply (to name just a few). Additionally, the improvement of primary-level social infrastructures assisted selected communities to transition

from a post-conflict situation toward the development of their own communities and begin economic investment. For instance, the rehabilitation of an electric system attracts the private sector to start small enterprise development and creates employment opportunities for the vulnerable. The rehabilitation of rural roads mitigates the complete isolation of rural communities from administrative centers, allows the assignment of public buses, reduces transportation cost, and the price of consumer goods and increases market outlets for the subsistence farmers. The availability of health posts ensures the accessibility of basic health care services for poor mothers, children, elderly people and other most vulnerable beneficiaries who do not have the choice to use other level of health services elsewhere.

3.1 Grant Management

The Grants Unit was responsible for the transparent and accountable management of all CBO and NGO grants. The Grants Manager and his team developed grants management procedures for both CBOs and NGOs that met CARE's and USAID policies and regulations. These systems were created to be both transparent and also fully accountable. With over 535 CBO sub grants and over 57 sub grants to 34 NGOs through RFAs, the Grants Unit was critical in ensuring the success of the overall program during the selection, implementation and project closure processes for CBOs and NGOs.

Note: Grants were awarded through the RFA mechanism in five strategic areas: 1) Agriculture, 2) Community Mobilization, 3) Health & Social Welfare, 4) Economic Opportunities, 5) Voter Education (two of the three Voter Education RFAs were mostly funded by OSCE), and 6) Food Distribution. W-GCMI has met its RFA goals.²

3.1.2 Solicited and Unsolicited Grants

Unsolicited and Solicited Grant Proposals Received and Proposals Funded: An average of 54 proposals were received and 23 were funded per Grant Cycle (not including the following special Grant Cycles – 'SPWG 1', 'SPWG 2', and 'SbS', these were given per arrangements with CARE's W-GCMI partner Horizonti and through RFAs).

Note: For details on the breakdown by "Region", "Number of Proposals Received" and "Number of Proposals Funded" for all of the Grant Cycles please see *Grants Annex 4 – Proposals Received vs. Funded*

3.2 Transparency and Accountability in Grants Management

Outcome/Effect Indicator Civil Society Sector Strengthened

The W-GCMI project operated in the community context where after 10 years of 'transition', vulnerable communities remain in many cases deeply impoverished. Community members were indifferent to address their common problems and locally elected government officials had unclear mandates and limited or no resources. Most ordinary people had little knowledge or ownership of policy reforms and local people were frustrated by false promises from the government. Finally, the lack of transparency and petty corruption that exists on a day-to-day basis remains still high with Georgia consistently in the top ten most corrupt countries according to Transparency International. These attitudinal obstacles that exist in most communities represented one of the largest challenges for the W-GCMI. To overcome these obstacles the W-GCMI project continued to strengthen the capacity and skills of its staff to better strengthen community empowerment methodologies, improve coordination with all stakeholders, develop and integrate a social policy strategy and improve upon our timely implementation of activities.

3.2.1 Transparency in W-GCMI: Throughout the implementation of the W-GCMI project, CARE has consistently attempted to improve its Grants Management Systems to make them more transparent. The impact of increased attention on transparency as a cross cutting theme is also directly related to strengthening civil society. Please see the annex 3 for show diagrams that clearly explain the grant award process: for Micro Small Project Selection NGO RFAs.

² For Details of all RFAs, including name of NGO, exact amount of award, etc, please see *Annex 4 – RFA NGO Grant Winners*

W-GCMI has attempted to implement a transparent system when reviewing and awarding proposals. This system includes: 1) Inviting CBOs/NGOs with rejected proposals to come into the CARE-Kutaisi office with a more detailed explanation. 2) Providing more than one opportunity for financial training. 3) Implementing regular site visits to check budgets, financial records, and transparency posters.

3.2.2 Stakeholder Relations

- W-GCMI continued the dissemination of more than 1500 copies of Transparency Posters to promote ATP (Accountability, Transparency, Participation), which were put, in three public locations within the Sacrebulo. These posters encouraged CBOs to be more accountable and transparent to community members and W-GCMI.
- A total of nine Newsletters were drafted and disseminated to W-GCMI communities and stakeholders. The Newsletters assisted W-GCMI to be more transparent about its activities and supported transparency and information dissemination in rural communities, which was (and still is) sorely lacking. Furthermore, in order to support community mobilization, the 8th issue of the W-GCMI Newsletter was printed along with the Universal Declaration of Human Rights (which was adopted and proclaimed by General Assembly resolution 217 A (III) of 10 December 1948).
- Information meetings for RFAs, Stakeholder conferences for CBOs, NGOs and local government, and Press Conferences were activities that sought to enhance dialogue between civil society sectors.

3.3 Accountability of Donor Resources

W-GCMI has responded to all accusations of misallocation of funds. CARE briefed USAID when these incidents occurred, ensuring full transparency with the Donor. In addition CARE found the District Gangeoba's (all newly appointed by the Saakashvili government) extremely helpful when communities in West Georgia ran into trouble.

In April 2004, CARE identified that in some cases receipts had not been issued for some of the funds that were to be returned by the grantee (CBO or NGO) once the project was completed. CARE completed an investigation and identified that some receipts (less than 8,000 GEL) were indeed not given to some CBOs that returned unused grant funds. CARE moved quickly to further refine and strengthen its financial systems to ensure that the risk of future unallowable expenses is decreased. The funds that could not be accounted for was not expensed to USAID and was covered by CARE's own resources.

3.4 Economic Activity

Outcome/Effect Indicator More Active Participants in the Economy

Though the primary activities of the W-GCMI assisted vulnerable communities through the community mobilization process that focused on enhancing community services, CARE also supported economic activities on a much smaller scale than its social sector projects. Recognizing that economic development is an essential piece of the development puzzle for further community development, CARE supported economic development activities by providing short term employment opportunities for skilled labor in W-GCMI communities, agriculture income generation projects implemented by local NGOs and finally through the micro finance initiative implemented by Constanta foundation. Below is a list of RFAs that helped the economic development in rural West Georgia:

- Through the W-GCMI Funded Agricultural RFAs 70 jobs were created in Imereti and over 3,912 farmers in 19 Communities of Samegrelo, Imereti, Guria, Racha-Lechkhumi & Lower Svaneti increased their awareness of optional feeding systems and horticultural practices. Also, they were provided with the recommendations for the future replication of the project's innovations. W-GCMI's three horticultural projects beneficiaries developed future business plans and linked with the USAID funded "Ag Vantage" (ACDI VOCA) project were established.
- Constanta Foundation served 1,716 micro-entrepreneurs and disbursed a total of 606,472 GEL (Through the Individual and Group Lending mechanism). Approximately 2500 jobs are sustained in the

businesses funded by loans through the Constanta Foundation including owner-operators: More than 3,500 people, clients (including their family members) have improved their living conditions in Adjara, Imereti, and Samegrelo.

- Within the Social Protection RFA 407 jobs were created for IDPs settled in Samegrelo and Imereti regions.

Indicator: # of short term jobs created

The W-GCMI was able to provide short-term employment opportunities to communities through CBO micro and small project grants. As most CBO projects were infrastructure related both skilled labor and transportation costs were key to the project's successful completion and were covered by W-GCMI obligated funds. The total amount of funds allocated for short term employment were labor costs amounting to \$245,126 for 24,514 person days of work and transportation (machinery, trucks, excavators, cranes, etc) amounting to \$262,011 USD covering 5,240 person days of work. The total contribution from W-GCMI which supported short-term employment income amounted to \$507,137 USD or, 15% of the total \$3,489,654 USD W-GCMI obligated funds for CBO projects.

4. HEALTH AND SOCIAL WELFARE INITIATIVE - INTERNATIONAL MEDICAL CORPS

Outcome/Effect Indicator: Improved Basic Services to Vulnerable Communities

CARE awarded a sub-grant award to International Medical Corps in September 2000, to operate the Health and Social Welfare Unit within the West Georgia Community Mobilization Initiative (W-GCMI). International Medical Corps and CARE have worked closely as partners to implement the W-GCMI since that time. The Health and Social Welfare Unit (HSWU) was primarily responsible to ensure that health and other social services were provided through the W-GCMI to compliment the community mobilization, infrastructure rehabilitation, and construction activities of the CARE team.

The role of the Health and Social Welfare unit evolved during the life of the project. During the first two years of the W-GCMI, the HSWU provided technical support to CARE staff as well as LNGO implementing partners to ensure that health and other social needs were included into the community mobilization process. This was accomplished through the development of special assessment tools and training packages for CARE and LNGO community mobilizers to use during the training and organization of community based organizations. These tools are described further in section Annex 8.

During the final two years of the W-GCMI, the focus of the HSW unit shifted to the development of sectoral Request for Applications (RFA) for local NGOs to respond to and implement programs. The aim of the RFA process was twofold. First, the RFAs were intended to allow local civil society institutions to design, plan and deliver specialized health and social service programming to communities within the five regions of the W-GCMI. Second, the RFA process would allow for the capacity development of the implementing partners (LNGOs) in terms of management, financial administration, proposal design and fundraising, strategic planning, monitoring and evaluation, and reporting.

The end results were excellent. The W-GCMI issued four health and social welfare RFAs plus a special non-solicited tender for the Step-by-Step expansion program to rural areas. A total of 13 grant awards were provided to 11 LNGOs under the W-GCMI HSW unit. This included two consortium grants; one for health education and one for the Social House in Ozurgheti, a mental health project. A total of \$450,597 USD was awarded to LNGOs under the RFA solicitation. Of this amount, LNGO contributed \$164,906 USD (or 39%) in cash, labor, materials, logistical support, transport, and other in-kind. In addition to improving health and social services and conditions for people in west Georgia, the RFA projects also improved economic opportunities by producing jobs. A total of 230 jobs were created for beneficiaries through two LNGO projects; The Vocational Training and Job Center project and the Community based health finance project implemented by Curatio Foundation. Sixty men, sixty women, 53 youth, and 67 IDPs gained valuable skills and found employment through the RFA projects. Jobs ranged from accountants to car mechanics and included positions in local companies and non-profit organizations.

The programs covered a wide variety of health and social welfare initiatives including **community based social services** (e.g. mental health, elderly outreach services, vulnerable children's programs, vocational training for IDPs and vulnerable populations), **community health and health finance** (e.g. Integrated Management of Childhood Illnesses, community based health finance, community based health education), and **education** (Step-by-Step primary education development).

During implementation of the W-GCMI, a total of 535 community micro projects were completed. Of these, 68 involved the rehabilitation or construction of health clinics and ambulatories. This represents 12.7% of all community based micro projects and demonstrates the high demand from communities for development projects to meet self identified needs for improved healthcare. It also provides evidence that health is prioritized as a key social need within west Georgian communities.

The culmination of the HSW unit's work was the LNGO RFA program. Evidence of the success of the LNGO RFA projects and how they benefited communities and individuals in west Georgia is summarized in table XX. The table provides detailed information about the impact of the health and social welfare LNGO program.

Table 1: Impact for LNGO RFA program beneficiaries

RFA Sector	Women	Men	Children	IDP	Total
Community Based Social Services	1,435	1,139	764	316	3,338
Primary Education	80		880	80	960
			508 (girls)		452 (boys)
Health Education	28,808	25,219	12,469	1,947	66,496
Community Integrated Management of Childhood Illness			40,000	521	40,406
			21,415 (girls)		18,991 (boys)
Community Based Health Finance	3,979	2,654	1,021	79	6,033
TOTAL	34,302	29,012	55,134	2,943	121,391

5. SOCIAL POLICY INITIATIVE – IMPLEMENTED BY THE HORIZONTI FOUNDATION

Outcome/Effect Indicator: Civil Society Sector Strengthened

Horizonti Foundation, in partnership with Management Systems International (MSI), led the social policy component of GCMI's efforts in close collaboration with Mercy Corps and CARE. The overall objective for the GCMI's Social Policy Unit (SPU) was to enable citizenry to take initiatives to promote social development with the government, NGOs and other civil society groups. More precisely, the SPU sought to:

- Promote NGOs/CBO effective collaboration with civil society groups or other sectors (government/business) to improve the lives of vulnerable groups;
- Increase understanding of government social reforms and community/civil sector involvement in the formulation of these reforms;
- Maintain development of sound social policies at the national level;
- Enhance capacity of local advocacy alliances (SPWGs) and communities to carry out advocacy activities;
- Facilitate networking and cooperation between communities, NGOs, public and private sectors.

Through the social policy activities GCMI made critical efforts to maintain further mobilization of communities in terms of enhancing local community initiatives aimed at securing better social services to vulnerable members of communities. Moreover, increasing advocacy skills in over 250 local communities had the effects of keeping up the benefits or improvements obtained through GCMI's community mobilization and NGO grants components. Further to respond to identified social needs of local communities the SPU has been engaged into the national policy development efforts and with its technical and intellectual input has participated in social policy formulation at the national level in education, primary healthcare and social welfare reform thus offering a channel to community leaders to participate in the national policy development.

Although the social policy initiatives were first launched within the EGCM framework (managed by Mercy Corps), after one year since the Program was started the SPU developed its strategy also for W-GCMI in collaboration with CARE. The strategy was based in part on the successful methods the SPU applied with Mercy Corps for EGCM. Important events included establishing a Horizonti Foundation office in Kutaisi and the recruitment of social policy analysts in three of the W-GCMI regions, presentation of the social policy strategies and actions at regional W-GCMI stakeholder conferences, organizing and conducting regional and district level education reform, healthcare, social child welfare and PREG-P community meetings, establishing and capacity building of Social Policy Working Groups, and organizing a regulatory framework and advocacy training workshops, etc. The major SPU achievements can be summarized as follows:

5.1 Increased capacity of communities to design and implement advocacy initiatives through networking with other civil society groups

In terms of enhancing the skills of CARE/MC mobilized community leaders to advocate for positive change before the local, regional or central government, Horizonti staff organized a series of basic and advanced level advocacy training workshops for all communities involved in the GCMI program. Community members effectively utilized the knowledge obtained through these trainings in their interactions with regional or local authorities, whose share of co-funding for the CARE/MC mobilization projects grew gradually and was considerable at the end of the program.

To supplement the advocacy workshops and further strengthen lobbying capacities of community leaders regulatory framework workshops were given that mostly addressed laws and regulations related to local governance and self-governance, freedom and accessibility of information, lobbying authorities, exercising constitutional rights and freedoms, land ownership issues, etc. Though these interventions the SPU assisted in filling, to some extent, the huge information gap in this area, access to information on government reform initiatives at the community level remains difficult.

The SPU assisted by the CARE mobilization and NGO grants teams, facilitated the establishment and capacity building of volunteer civic alliances – Social Policy Working Groups (SPWG) in three of the W-GCMI regions. Through this intervention the SPU sought to strengthen community participation in shaping policies at national, regional or district levels and to support community advocacy aimed at influencing authorities to respond to citizens' social needs. In terms of capacity building of the SPWG members the SPU organized a number of training

workshops and thematic seminars on prioritized social policy issues. Further with technical and financial input from the SPU or CARE the SPWGs implemented a series of information sessions, advocacy and monitoring initiatives to increase the public awareness with regard to the social sector reforms as well as the social benefits provided under various public social programs and improve the quality of social services provided to communities by public authorities.

5.2 Increased understanding of social reforms and community/civil sector involvement in the formulation of these reforms

The SPU organized regional level community information workshops in GCMI targeted regions where detailed information was provided regarding the social reforms and programs being implemented in the area of education, healthcare, poverty reduction and social welfare. Based on the materials developed for the regional workshops the SPWGs subsequently organized district-level workshops for a greater number of community leaders, many of whom effectively utilized the information obtained for securing access to the social services or benefits.

Further the SPU took the efforts to address the failure of the central government to establish proper information exchange mechanisms with regional/district agencies or local service providers in meeting the need of informing or updating the local agencies or units regarding the most recent policy reform initiatives. Through networking with community leaders and SPWG members transparency of the social sector reforms and the level of stakeholder inclusion in these public sector interventions had been measured. In 2003 the SPU surveyed GCMI communities and created a report on the findings of a monitoring study on the World Bank Education Reform process and the limits of stakeholder inclusion. The findings as well as the recommendations developed were communicated and presented to the Ministry of Education and nonprofits. Moreover the SPU has effectively responded to the information hunger at many of the east and west Georgia schools in regard to the anticipated policy changes in the area of school administration and boards of trustees.

To respond to the informational "hunger" in Georgian regions the SPU published eight issues of *Social Policy in Georgia Journal*, with a distribution of close to 12000 in Georgian, Russian and English. Each of the issues had a main topic covering the principal trends of the social policy development in the country and highlighting the innovations in the policy reforms. An emphasis has been always made on the roles and functions communities can assume in formulating and implementing social policies at the local level.

5.3 Development of sound social policy at the national level promoted

Having a regard to identified social needs of local communities the SPU has been actively involved in shaping national policies. The SPU facilitated round table discussions and reviews of the social sector reforms by civil society players who presented their suggestions to advancing the level of community participation in these national interventions, mainly, in the area of education, healthcare and social welfare. Thus specific recommendations were developed with a view to improve the effectiveness of various interventions provided by the education reform document. Further with technical and intellectual input from the SPU the government enacted regulations regarding the public schools and boards of trustees. Based on the SPU suggestions several amendments were also made in the regulations to address the shortcomings identified.

In response to community requests for addressing social, particularly, child welfare issues, the SPU along with a NGO workgroup, and GCMI stakeholders, and partner CBO-NGOs drafted the National Strategy for Social Protection of Children. In April 2004 advocacy campaign before the Georgian Parliament was successfully completed. The SPU facilitated drafting of a number of amendments into the Education Law that once enacted should lead to better access to education by disabled children.

To meet the urgent need of initiating social work in Georgia's communities the SPU took the lead in organizing and facilitating regular meetings of the Social Work Education Expert Group. The Group brought and discussed new possibilities for the development of Social Work in Georgia. In August 2003 in Kutaisi the Social Policy Unit organized four-day training sessions for regional community social workers, in partnership with the Ministry of Labor, Healthcare and Social Affairs. Moreover a Code of Ethics for social work in Georgia had being discussed and developed with representatives from across the country, including the SPWGs and MoLHSA officials. Adequate report and recommendations have also been developed with an aim to promote improved regional social services.

6. OBSTACLES ENCOUNTERED AND LESSONS LEARNED

6.1 Management, Community Mobilization and Grants - CARE

Partnership Challenges – Delays in project implementation required all three partners in the W-GCMI to accelerate their programs in years 2-4. As mentioned above staffing key positions in the first year of the project slowed implementation. As a result, IMC's development of a coherent health and social welfare strategy required almost 18 months to complete. Horizonti's social policy program took almost 18 months to negotiate the details of its activities in Western Georgia due to disagreements on major focus areas – National or Grassroots approaches. It is encouraging to note that within the second year, most of these issues had been resolved and clarified and as the evaluations indicate, the program partners were successful in their program accomplishments.

Project startup - The W-GCMI was able to mobilize 298 communities within its lifetime, which then allowed all CBO(s) to apply for a minimum of one project grant. Due to a slow project start up in year one and regional scope, time was an issue which forced mobilization to work faster and broader so as to allow newly formed CBO(s) the time to develop, present, implement and close projects, as well as apply for a second and third in some cases. Of the 298 CBO(s) mobilized W-GCMI was able to award 97% of proposed projects totaling 535 grants over the course of the project.

Working in a climate of Corruption – Given the climate of corruption in Georgia and the nature of the W-GCMI as one of the first large scale grant making programs in the rural areas that empowered communities to manage resources, CARE mitigated many of the incidents of misallocation of funds through close on-sight monitoring, strong financial systems and clear policies. However, incidence of misallocation of funds did occur on a very small scale. In these instances, CARE worked closely with USAID, government officials, CBOs and NGOs to resolve the issue. In instances where the problems were not solved, the donor was informed and CARE covered these costs through its own funds.

Increased Proposals & Grants = Increased Risk: W-GCMI has addressed this risk by executing a series of measures. This includes, but is not limited to: 1) Improving updating grant documentation procedures, 2) Designing new site visit evaluation forms and translating them into Georgian so community members will be more aware of what they are being graded on, 3) Drafting and disseminating informational leaflets on the Micro and Small Grant Approval Process, 4) Providing a rough draft of official steps CARE-W-GCMI will take when accusations of corruption are made, 5) Continuing to be vigilant in the financial reconciliation process, 6) Making sure that the Community Mobilization process is being transparent and involving all community members, 7) Making sure that communities are advertising in a public location the W-GCMI line-item budgets, activity plan, and success indicators.

Awarding Micro/Small Grants: W-GCMI was unable to award all of the planned 550 Grants (it only awarded 535). This occurred because of the: 1) Rose Revolution, 2) Uncertain security situation in Western Georgia before during after elections, 3) Blockade in Adjara, and 4) delays in the first year and a half of the project.

6.2 Health and Social Welfare - International Medical Corps

Coordination with other initiatives - In initial phase of project implementation the HSW unit coordination with SPIG was not as consistent as desired by both IMC and the Horizonti staff. The synergy of these units was critical to accomplish mobilization activities and achieve GCMI mission. There was also gap in day-to-day coordination between CM officers, grants managers and HSW officers that caused some problems in regional team's performance. To address these problems a special memorandum between these sectors was developed that clearly stated the roles and responsibilities of each sector staff in each project activities (site-visits, short-listing, cover sheet preparation, etc).

Due to delays in finalizing a coherent HSW strategy, most health and social welfare LINGO implemented projects were implemented in years 3-4 thus preventing ongoing monitoring of project impact.

6.3 Social Policy Horizonti - Foundation

The enormous information vacuum in communities The need for information was unending. "Some of the constraints in receiving information as identified by the participants included: incompetence of public servants, bureaucracy, lack of professionalism, indifference and blocking information by state officials and deliberate withholding of information by government officials, having no information on citizens' rights, to whom people can apply to... disruption of direct communication due to lack of electricity, corruption... non-existence of TV broadcast in some districts, scanty information in the mass media, language barriers, non-existent independent local press... inactivity of communities and weak collaboration with NGOs, low level of social-economic wealth of population (cannot buy a newspaper), poor level of performance by mass media and incompetence of relevant cadres responsible for information dissemination, and lack of social sector database." In later months during GCMI the challenge was somewhat diminished; however USAID began to question the number of meetings necessary for the SPU to address this important information issue. The SPU tried to develop other means to make a wider impact.

Continuing need for information in communities after two years i.e., rural-level community information workshops, surveys, focus group discussions. The SPU had not yet developed a wide-ranging grass-roots strategy to increase the level of information and monitor it. This was likely due to the limited means at their disposal (transportation, communications, printing costs, etc).

Change in Government in 2004. This often meant that—even though democracy made a big step in some ways—many efforts to get local authorities on board went for naught. New persons replaced them and the communities had to begin all over to 'make friends' with local authorities. Similarly, valid employees at the national level were often 'phased out' simply for having worked in the former government, even if they were knowledgeable and held the key to important issues.

1. MANAGEMENT AND ADMINISTRATION

Overall, the W-GCMI achieved all the important goals and objectives. The unfortunate difficulties in starting the project in a timely manner hindered initial project activities and combined with ambitious targets for the projects required the CARE team to accelerate project implementation in years 2 - 4. The team was able to accelerate the project through a combination of staffing and programmatic adaptations. Please see the below diagram that reflects how CARE and its partners supported the mobilization of communities and better capacity to deliver health and other essential services.



West GcMi Partners Lngo Mobilization And Support To Communities And Improve Access To Services.

1.1 Staffing

In the second year of the project, the CARE team expanded grants, mobilization staff and created a unit for Quality and Standards Engineers to handle the increased workload and to better ensure project quality at the community level. Additionally, the project opened satellite offices in the regional centers of Adjara, Samegrelo, Upper Svaneti and Racha Lechkhumi as well as a seasonal office in Lower Svaneti. These two combined factors enabled CARE staff to provide closer and improved support to communities.

Staffing changes of key staff for the first two years of the project were many with the third Chief of Party arriving in August 2001 and remaining to the end of the project. The Grants Manager (GM) position was filled three times with the third GM arriving in May 2002 and remaining in his post through the end of the project. The Community Mobilization Manager (CMM) was also filled three times with third CMM arriving in January 2003 and remaining until the end of the project. The IMC Health and Social Welfare Advisor (HSWA) position was filled four times with the fourth HSWA remaining at his post from September 2002 – June 2004. However, by the spring of 2002,

the W-GCMI team had the internal capacity and the learning to begin to actively implement the project. With the Key staff in place for the last two years of the project, the CARE team was able to accelerate and reach virtually all of the proposed targets. Please see the Periodic Data Tables at the beginning of this report.

1.2 Administration

One of the primary administrative burdens in the W-GCMI was the significant number of sub grants to be awarded to the communities and local NGOs. As a result, the project created a grants unit in addition to its regular finance department to manage the grants processes. Given the primary focus of communities in rehabilitation and the intensive procurement processes, CARE initially conducted all procurement through its procurement office to ensure that all necessary procurement policies were being adhered to given the issues of corruption in Georgia. Upon arrival in August 2001, the COP, GM in consultation with the Country Director initiated a pilot program to decentralize procurement to registered CBOs who would have a bank account, bylaws, a board of community members and training in procurement and budgeting procedures. This successful pilot was a critical innovation in the project that had the effect of:

- significantly accelerating the pace of project implementation by communities;
- reducing the administrative burden on a small procurement office in CARE;
- reducing the overall cost per project due to high costs of going through consolidators and thus enabling communities to do more with the same amount of money;
- Strengthened CBO organizational capacity to manage procurement activities.

Recognizing that decentralizing procurement increased risk of abuse of funds, CARE instituted a number of accountability and transparency measures such as financial management and procurement training to CBOs, enhanced Grants Officer monitoring of procurement activities and the creation of the Quality and Standards unit to ensure that communities were procuring materials approved and budgeted for as well as ensuring that the quality and quantity of these materials were sufficient for the project.

1.3 Amendments and Modifications to W-GCMI

After the first 15 months of project implementation CARE requested and received approval to modify 3 project targets to better achieve the W-GCMI overall goal of reducing human suffering by strengthening the capacity of individuals, CBOs and NGOs to contribute toward the development of a dynamic civil society. This request, approved by AID in April 2002 resulted in a decreased in the number of communities to be mobilized from 400 to 300 and also the number of projects to implement by these communities was reduced from 630 to 550. Additionally, CARE proposed and received approval to increase the number of RFAs up to 25 to address NGO identified sector and non-sector specific needs of vulnerable groups in western Georgia. The main purpose for this request was to provide CARE the flexibility to issue awards of lower value to local NGOs with limited capacity. High value RFA awards were awarded to NGOs with demonstrated capacity for larger awards.

1.4 Milestones of the Project.

Comprehensive List of W-GCMI Milestones

Bold indicates the key moments in the life of the project.

CY 2000

- 9/00 **Signing 4 year grant.**
 Non-acceptance of contract by document-proposed COP.
 Replacement COP hired.

CY 2001

- 2/01 **W-GCMI field staff hired.**
 3/01 **First four regional stakeholders conferences held.**
 4/01 **Start of community mobilization in 30 communities**
 6/01 **W-GCMI website launched.**
 7/01 **Second COP and Grant Manager resigns and New Grant Manager Arrives stays until 5/02.**

- 8/01 USAID visit to project; questions pace of activity of project after one year.
Arrival of new Chief of Party – leads W-GCMI to EOP.
Baseline survey conducted by Curatio used to focus LNGO Sectoral RFAs
- 9/01 Pilot project to decentralize project procurement - Important experiment to speed procurement and to enhance community and CBO management skills.
First W-GCMI Newsletter published; published every 4 months thereafter.
End of Year 1 - 12 projects concluded.
- 12/01 Gilmore Consultancy on developing RFA systems and improved data collection.

CY 2002

- 1/02 **RFA-I published, Community Mobilization** via LNGOs. Spreads the responsibility of community organization among four organizations effectively quadrupling the pace of project activities.
- 3/02 **Quality & Standards Department created in CARE.** Strengthens project quality
Expansion of project activities to mountainous regions -Ajara, Svaneti and Racha.
RFA-II published, Social Protection.
SAR # 3 reports 25 projects newly completed.
- Spring Opening of decentralized offices in five regions. Supervision decentralized
- 4/02 **AID approves LOP targets reduced to 550 projects and 300 CBOs.**
- 5/02 Grants Manager resigns. Arrival of Grants Manager – Remains through EOP.
- 6/02 CARE seeks AID input on discontinuing IMC partnership on non-performance and departure of IMC HSW Advisor
- Summer: Second Regional stakeholders' conferences.
GACC Internal Audit.
Advocacy training for W-GCMI staff.
Barton consultancy on Participatory Monitoring and Evaluation.
Forbes consultancy on Strategic Review. Resulted in Major reorganization and realignment of responsibilities as a result of this consultancy.
Internal Mid-term process review by Jeff Gowa.
Capacity Enhancement Grant-I issued to CHCA to strengthen CBOs.
- 9/02 **Arrival of new IMC HSW Advisor / Director.**
SAR # 4 reports 34 projects newly completed.
- 10/02 Civil Society Workshop.
Departure of Mobilization Manager.
- 12/02 RFA-III published, Adjara Racha Mobilization.
Suspension of activities by Horizonti.
Internal Audit from CARE HQ successfully conducted.

CY 2003

- 1/03 **Arrival of Mobilization Manager.**
CBO coalitions begin to be formed.
- 1,5 and 6/03: Three RFAs for Agricultural development.
- 3/03 IMC Mid-term evaluation.
SAR # 5 reports 88 projects newly completed.
- 4/03 RFA-IV announced for Health Education; results in 13 different grants for H&SW activities.
- 6/03 CBO regional Conferences on Sustainability.
Multi-phase project approval process begins.
- 7/03 Project review process made electronic, thus shortening review time.
RFA let to Constanta for micro-credit and employment generation.
- Summer: Social Policy Working Group- (SPWG-I) grant awarded.
RFA for IDP Social Protection awarded.
DAI Mid-Term Evaluation: strong project endorsement as "back on track."
- 8/03 Filming of W-GCMI training films; aired on national television in November.
Gowa consultancy on Income Generation Activities.

9/03	Organizational Capacity Assessment Tool developed (OCAT). Consultation with Georgia Social Investment Fund (GSIF) begins. SAR # 6 reports 147 projects newly completed and 300 communities mobilized (100% of target.)
11/03	"Rose Revolution:" Shevardnadze ousted.
11/03	Development of CY 04 Annual Action Plan.
12/03	Two grants received from OSCE for voter education.
CY 2004	
1/04	AID informs CARE that a cost project extension for W-GCMI is not feasible
2/04	SPWG-II grant awarded. At AID's request RFA for Food Distribution awarded.
3/04	SAR # 7 reports 129 projects newly completed. One-month delay in receipt of USAID funds slows project activities at a critical juncture in reaching target of 550.
4/04	USAID decision to allow existing project to expire in September. CARE Financed McCarthy consultancy on Local Government. CARE Strategic planning workshop.
5/04	Grant-making ceases. Grant Close-out process begins.
7/04	W-GCMI Lessons Learned workshop.
9/04	Final Evaluation conducted.
Sept. 24	Close of project.

1.5 Evaluations

During the life of the project, CARE conducted an internal review in June 2002, IMC conducted a midterm evaluation in March 2003 and USAID conducted a midterm evaluation in June 2003. CARE conducted a final evaluation of the project in September 2004. For details on the IMC midterm report please see Section B, the Health and Social Welfare Initiative, of this report.

1.5.1 Internal Review - June 2002

In June 2002, CARE identified a consultant to conduct an internal review of the mobilization and grants activities. Specifically the review provided observations and recommendations for CARE to clarify roles and responsibilities between various components and streamline grants review, monitoring and implementation procedures. Most of the recommendations provided by the consultant were implemented and contributed to CARE's success in achieving the overall goals and objectives of the project.

1.5.2 Development Associates Mid-Term Evaluation of CARE - June 2003

In the summer of 2003, USAID contracted Development Associates Inc. to conduct a Mid-term review of both East and West GCMI. The DAI document commented on the state of the project in language seldom found in project evaluations. Since the document is well known to USAID/G, it will not be referenced in detail. However, it is worthwhile to cite several paragraphs from the Executive Summary.

As it is currently being managed, the GCMI program represents an exemplary example of development assistance that is being successfully targeted and that is reaching, as intended, the poorest of the poor and the most vulnerable communities in a developing country. The results achieved to date were well worth the resources invested...

Satisfaction with the results of GCMI mobilization activities at the community level is generally high. Expressions of satisfaction came through during Assessment Team meetings with local government leaders as well as with community members and members of teams that undertook to implement projects themselves.

The underlying design of GCMI, which allows communities to submit up to three project concepts for funding on a sequential basis, is one of the more important factors in ensuring program impact and sustainability. Community groups have had the opportunity to learn from one experience and to carry that learning on to their next project. Nearly all communities could cite examples of a project that they had conducted on their own utilizing their mobilized community team...

Both Mercy Corps and CARE have been efficient and effective in mobilizing communities in their respective target areas in east and west Georgia and both have established good financial and project implementation monitoring systems. Mercy Corps has been effectively managing a sizable sub-grant component since the first year of GCMI program operations, an area where CARE has also made considerable progress over the past year. They have both also demonstrated their capacity to implement multi-sector interventions at the district level involving coalitions of CIGs CBOs and Local NGOs, and have demonstrated that they have the capacity to link communities with micro-finance institutions.

1.5.3 External Final Evaluation – September 2004

A Final Evaluation was carried out focused on change in beneficiary lives, as well as assessing Community Based Organizations' (CBO) and local Non-Governmental Organizations' (LNGO) achievements and lessons learned. The month-long evaluation concluded on Sept 17, 2004, one week before the close of the project. Included here are the conclusions of the evaluator.

A review of project milestones suggests that W-GCMI became well organized about halfway through the life of the grant. Effectively, W-GCMI had two-and-half years of work rather than four. Ironically, the IMC component suffered a similar fate. However, by the time of two independent Mid-term evaluations, both implementers had made a number of personnel, administrative and programming adjustments and the project was back on track.

Focus group discussions with randomly selected communities showed across-the-board improvements in Trust, Accountability and Participation. Substantial decreases in Passivity and Pessimism were also reported, as were enormous increases in community sense of pride, self-worth, and ability to accomplish tasks.

Quality of the village activities financed by the grant is generally good across the communities visited. Community contributions in both financial and labor terms are half again more than budgeted. As a result, W-GCMI has achieved quite high value for its development dollar.

On the "softer" side, Mobilization as a development concept is well understood by CBO leaders, much less so by community members. The project has also fostered changes in attitudes and behaviors in a few local Government representatives. Social Policy Working Groups seem to have learned new skills, and are creating networks of like-minded activists that speak well for improved public decision-making in the future.

Assessing the overall impact of IMC, one judges it a qualified success. Clearly IMC helped W-GCMI organize, monitor, and evaluate the Health and Social Welfare side of activities; and a number of innovative pilots were implemented. IMC's late start meant these pilots do not appear to have received the follow-up they perhaps merited.

Local Non Governmental Organizations' (LNGO) contribution to W-GCMI was essential; the project would not have succeeded without them. In general, both CARE and the LNGOs think the relationship brought mutual organizational gains; however there are areas that could make some future relationship a more effective vehicle for achieving LNGO long-term sustainability.

Total expenses of the \$11.6 million budget will likely be at the 96-97% level of budget.

Overall, W-GCMI has achieved all important goals and objectives and should be viewed as a significantly successful project. Playing catch up has likely been a management mind-set for three years; and as effectively as the project has been run and as much as has been accomplished; one speculates more in-depth impact could have been achieved.

Conclusions are offered at the Input, Output and Impact level. At the Impact level, the following thoughts are offered:

- CBO leadership is almost universally impressive: articulate, self-confident, thoughtful, forward-thinking. It is clear that for these people, substantial changes in attitude, mind set, world view, and behavior can be confidently assumed.
- The capacity of CBO leaders to organize quickly and effectively toward common goals seems almost universally high.
- In the absence of some follow-on donor financing, USG or other, most CBOs will not last long. However, some few CBO "stars," perhaps 15%, should survive even in the absence of donor funds.
- Attributable directly to W-GCMI, tens of thousands of children have a demonstrably better learning environment, thousands of ambulatory patients are being better served, hundreds of families are receiving more water and electricity, and hundreds of cultural events are newly taking place.
- Substantial change in community attitudes has been achieved in some degree; substantial change in community behavior seems less likely.

2. COMMUNITY MOBILIZATION

2.1 Background/ Outline

The USAID/Caucasus Mission started the Georgia Community Mobilization Initiative (GCMi) program in the fall of 2000. CARE and USAID signed their cooperative agreement and began activities on September 10th of that year. The USAID strategy to reduce human suffering in Georgia by focusing, in large part on the establishment of Community-Based Organizations CBO(s), provided the institutional base from which USAID could launch and sustain other interventions and initiatives at the grass roots level. Therefore, the CARE West Georgia Community Mobilization Initiative () purpose was:

...To enhance vulnerable communities' ability to meet their own needs via enhanced community association (CBOs and NGOs) by local citizens in support of shared interests.

Based on the project purpose the CARE W-GCMI team and partners mobilized a total of 300 communities in Western Georgia and provided funding opportunities, through small and micro grants, to these newly created community based organizations CBO(s). A total of 535 micro and small project grants were implemented by partner CBO(s) during the W-GCMI, which addressed problems, identified and prioritized in communities. CBO projects, although improving basic services, also provided the catalyst for which communities could mobilize around in order to build trust, confidence and unity and begin to take responsibility for their own development.

2.2 Community Mobilization Activities

Outcomes/ Effect Indicator: CBO Development

Indicator: # of CBO(s) formed, trained, functioning for at least one year

In order for the W-GCMI to achieve the mobilization objective of reaching 300 communities in four years a series of RFA(s) were awarded to local NGO(s) to assist the W-GCMI mobilization team.

During fiscal year 2001-2002 W-GCMI staff mobilized a total of 81 communities while partner NGO(s), through a series of RFA(s), mobilized a total of 115 communities. During fiscal year 2003-2004 a total of 104 communities were mobilized which allowed the W-GCMI to achieve its objective of 300 mobilized communities by the end of March 2004.

Partner NGO(s) were trained in the mobilization process and also contributed to the mobilization strategy development through the life of the project. The RFA process allowed partners the experience and training by W-GCMI staff, to not only mobilize communities through participatory techniques, but also to take part in CBO project development and project monitoring.

Timeframe of community mobilization activities by W-GCMI and LNGOs

Regions	W-GCMI	USA I	USA II	USA III	USA IV	USA V	Total
	FY Apr 01 May 02	FY Mar 02 Sep 02	FY Jan 03 Oct 03	FY Mar 03 Dec 03	FY May 03 Mar 04	FY May 03 Mar 04	
Imereti	21	30		27			78
Samegrelo*	23	30		20			73
Guria	19	15		8			42
Racha-Lechkhumi and Low Svaneti	5		20		9	10	44
Adjara	5		20		20	5	50
Up Svaneti*	8					5	13
Total:	81	75	40	55	29	15	295

Note: * indicates that the regions of Samegrelo and Upper Svaneti constitute one region in the W-GCMI.

2.2.1 Georgian Social Investment Fund (GSIF)

Through a collaborative effort to improve community mobilization in GSIF World Bank project communities, the World Bank and USAID agreed that GCMI funds could be used for mobilization purposes while World Bank funds continue to be used to cover community project costs. The idea was to mesh the community mobilization USAID approach to grass roots development with Peri-Statal funding that would allow both top down as well as bottom up development to promote transparency and accountability of all stakeholders.

On March 26th, GSIF facilitated its first workshop meant to inform its partners on its implementation cycle, procedures and GSIF/ Implementing Partner's (IP) roles and responsibilities, including: District and Sacrebulo selection, procurement, contractor selection procedures as well as GSIF engineering responsibilities. CARE staff and LNGO mobilization partners attended the workshop and were given time to ask clarifying questions to gain further background on the GSIF (World Bank) CARE W-GCMI (USAID) partnership.

Mobilization activities were undertaken by CARE in partnership with the "Georgian Social Investment Fund" (GSIF) between May and July 2004. A total of 33 Sacrebulo's were remobilized using a jointly redeveloped mobilization approach facilitated by CARE with GSIF and W-GCMI LNGO mobilization partners. Bi-weekly meetings were held by LNGO mobilization partners to ensure the mobilization process was working and to make any necessary changes. Monthly meetings were held with GSIF representatives to inform them of the process and general issues. By the end of July 2004 33 communities delivered their *community development council* CDC plans to GSIF which stated their community problem prioritization and needs as part of the GSIF process, which is still ongoing. GSIF was very pleased with the results and is on schedule, concerning these communities, as part of their agreement with the World Bank.

Of the total 33 Sacrebulo's mobilized, 13 are in Samegrelo, 8 in Guria, 4 in Imereti and 8 in Racha.

Communities remobilized by W-GCMI identified by GSIF

LNGO	Region	Municipalities	Communities	Count
Erani	Samegrelo	Tsalendjikha	Sachino, Chkvaleri.	13
		Zugdidi	Anaklia, Akhalsopeli.	
		Chorotsku	Khabume, Choga, Lesichine.	
		Martvili	Gachedili.	
		Senaki	Potsko, Gejeti, Teklati.	
		Khobi	Dzveli Khibula, Pirveli Khrga.	
HB&E	Guria	Chokhatauri	Zoti, Khidistavi.	8
		Lanchkhuti	Aketi, Nigvziani, Mamati.	
		Ozurgeti	Jumati, Vakijvari, Askana.	
Abkhazintercont	Imereti	Vani	Saprasia.	4
		Chiatura	Vachevi.	
		Tkibuli	Mukhura, Satsire.	
Abkhazintercont and ACDR	Racha	Oni	Parakheti, Tskhmori.	8
		Ambrolauri	Velevi, Namanevi, Znakva.	
		Tsageri	Orbeli.	
		Lentekhi	Kheledi, Jakhunderi.	
Total W-GCMI mobilized by GSIF				37

2.2.2 Capacity enhancement of internally mobilized CBO(s)

Indicator: # of supported CBO(s) showing evidence of improved organizational functioning

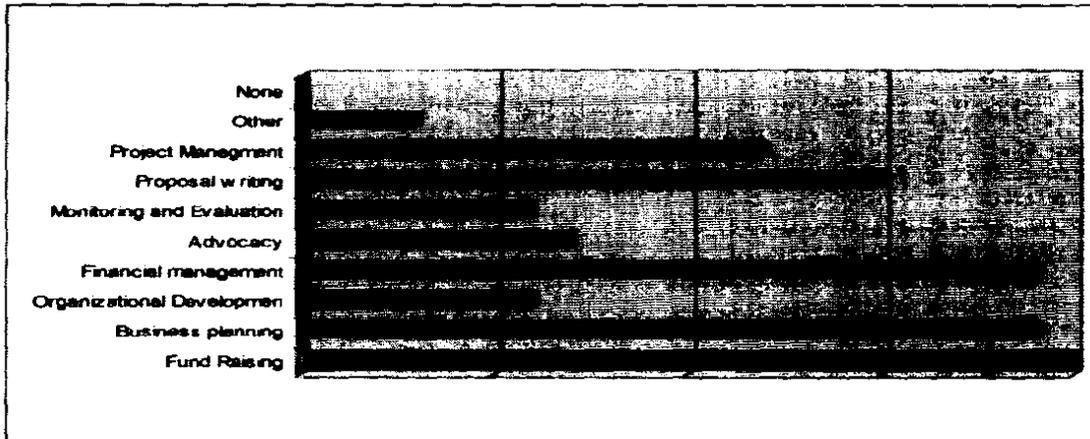
During the W-GCMI two "Capacity Enhancement" tenders were announced which aimed to build the organizational capacity of CBO(s). The Charity Humanitarian Center Abkazeti (CHCA) was awarded both tenders, the first being a six month project for 60 CBO(s) starting in June of 2002; the second 10 month tender followed the first and concluded in July 2004 reaching a total of 100 CBO(s).

CHCA identified that CBO(s), due to being new entities, were basic in their understanding and practical arrangements concerning organizational behavior and needed training in order to ensure their sustainability. Therefore, the first capacity building tender focused on the following five key capacity building areas:

- 1) Leadership and team building
- 2) Problem solving and decision-making
- 3) Basic accounting and grants management
- 4) Organizational development
- 5) Strategic Planning

Findings following the first capacity enhancement program did not adequately identify and measure, as CARE and CHCA felt, the specific organizational areas needing more attention. However, it was found during the completion of the first capacity enhancement program that participants suggested the following topics, ranked by importance, for possible future capacity building initiatives:

Ranking of training needs



Therefore, based on the first program findings the second program adjusted courses to better focus on the above identified areas of concern which included the following core competencies:

1. Assessment of Stakeholders & CBO internal/external environment
2. Problem Analysis (objective oriented project planning)
3. Strategic Planning
4. Business (small business management)
5. Management (leadership and team building)
6. Sustainability (fundraising and public relations)

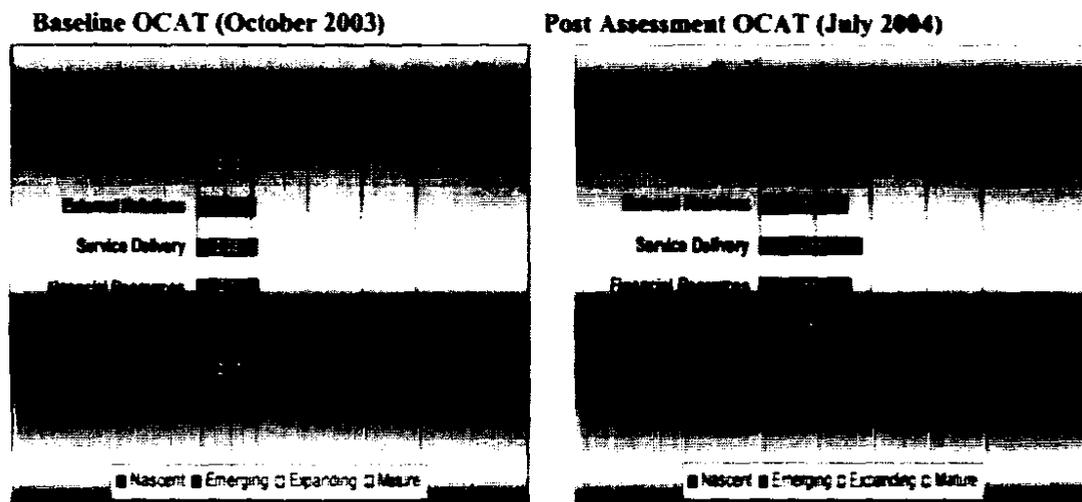
Moreover, during the second program an Organizational Capacity Assessment Tool (OCAT) was developed between CARE and partner CHCA to better measure both the effects of the program against a preliminary baseline assessment, but also to better determine what follow up courses would be needed to address certain areas unique to each CBO.

All CBO(s) were measured using the following scale: nascent, emerging, expanding and mature, and given an appropriate score following each assessment. Two assessments were conducted with one done at the beginning of the program providing the baseline and another one done at the end of the program in order to measure growth due to the program implementation.

Equating rating scale to stages of development	
Rating	Stage
1 to 2.05	Nascent
2.05 to 3.05	Emerging
3.05 to 4.05	Expanding
4.05 to 5	Mature

Each CBO organization was evaluated using a 1-5 evaluation system which focused on the following components: Governance, Management Practices, Financial Resources, Service Delivery, External Relations, and Sustainability. During the 10 months of the program CBO(s) clearly moved from a baseline average of *nascent* to *emerging* towards an *emerging* and *expanding* level of

organizational development.



Following the post assessment OCAT, the following recommendations were made in order to move CBO(s) higher up the scale of organizational development in the future.

Component - Governance

Each CBO needs to further elaborate their organizational policies and procedures, and strictly follow the conditions and rules set in their policies. Moreover, CBO vision of their organization should be worked out clearly and be reflected in their activities. CBO mission should be widely introduced to all stakeholders, as much as possible, as well as to other CBO(s).

Component - Management Practices

CBO(s) need to further develop and regularly review their organizational systems. The administrative procedures and manuals should clearly reflect the distribution of tasks and duties. Each staff member is to be exactly understood and comply with his/her responsibilities; job descriptions updated and followed. Procedures for determining qualifications for employment, recruitment, hiring and termination need to be further elaborated on.

Component - Financial Resources

Further financial accounting skills needs to be administered while also highlighting budgetary skills and projections, including filing and organizational systems pertaining to budget accountability. Documents reflecting financial policy and procedures, financial statements and operational budgets need to be further developed. Financial reports should be reviewed by board staff and disseminated.

Component - Service Delivery

CBO(s) need to improve the delivery of services, which will reflect the changing needs of stakeholders. Further training in monitoring and evaluation should be a priority so as to better strategize and address needs of stakeholders. The CBO should develop and undertake the system of marketing activities so that stakeholders know about their activities.

Component - External Relations

Each CBO needs to further develop their coalition building and coordination skills with other partners, including local and district governments. Advocacy activities should be undertaken. Each CBO should

define its microenvironment. The government representatives as well as the CBO members must be involved together and share responsibility of activities; resources and experiences must be shared. Public relation activities need to be further developed and refined promoting the CBO and its activities for the public eye.

Component - Sustainability

Sustainability plans need further development that depend less on external donors and of which seek support from various government and private sectors within their communities. Each organization should draft a plan of identifying and applying for local resources in their activities. Concrete networking opportunities need to be further acted upon and understood as a way to get out and be known and to gauge possible opportunities in the future.

Moreover, based on the assumption that CBO(s) will become more developed as they experience and undertake micro-projects, the capacity enhancement program also suggests, though small, that with each project undertaken by CBO(s), acting as an independent variable, does affect the organizational development score, dependent variable.

Average CBO scoring according to # of projects implemented

# of Projects Implemented	# of CBO(s)	Average Score	Score
1	37	2.51	Emerging
2	47	2.69	Emerging
3	16	2.78	Emerging
Total:	100	-----	-----

2.3 Assist the capacity of vulnerable communities to implement community-based micro-projects

Indicator: # CBO(s) that have completed Micro Project, Small Projects

The W-GCMI was able to mobilize 298 communities through the creation of CBO(s) who would in turn prepare and implement micro and small projects, through grant funding from CARE, to address problems identified by them in their communities. The W-GCMI also provided grants to 65 non W-GCMI mobilized CBO communities who presented and passed the project review committee. Moreover, three "Social Policy Working Groups SPWG(s)" were also awarded grants to undertake policy and advocacy projects, which they prepared and implemented.

Through a succession of grants the W-GCMI was able to offer up to a total of three grants for those CBO(s) who could prepare, implement and complete projects in a timely manner. As outlined in the table below, 343 micro-projects and 23 small projects, totaling 366 projects, were completed by CBO(s) and SPWG(s) in the first round. Second projects amounted to 113 micro and 27 small projects for CBO and SPWG(s) totaling 140 projects with fewer achieving a third project at 16 micro-projects and 9 small- projects, totaling 25 projects; SPWG(s) did not have the time to implement a third project under the W-GCMI timeline. However, under the Step-by-Step (SbS) project, four additional projects were implemented by W-GCMI communities allowing some CBO(s) to have a fourth project opportunity. The W-GCMI was able to successfully achieve a total of 473 micro-projects, 62 small projects equaling a total of 535 projects over the life of the program.

Type and number of projects funded by W-GCMI to date.

	# of CBO(s) funded	Graduated 1st round WSP		Graduated 2nd round WSP		Graduated 3rd round WSP		Graduated 4th round WSP		Total	
		MP(s)	SP(s)	MP(s)	SP(s)	MP(s)	SP(s)	MP(s)	SP(s)	MP	SP
WGCMi mob CBO(s)	298	288	10	86	26	15	9	1	3	390	48
Unsolicited CBO(s)	65	53	12	24	1	1	0	0	0	78	13
SPWG	3	2	1	3	0	0	0	0	0	5	1
Total	366	343	23	113	27	16	9	1	3	473	62
Grand Total		366		140		25		4		535	

Community-based micro/small projects have contributed to the reduced human suffering in targeted communities through increasing the availability and accessibility of basic social services such as primary and secondary schools, Ambulatory health posts, rural transportation infrastructure, water supply, electric supply, environmental protection, cultural centers, agricultural, access to information and other projects. A total of 195 projects addressed educational issues, which by far was the biggest priority for CBO communities making up 36.4% of the total 535 projects. Cultural centers ranked second at 71 projects making up 13.3%, health ranked third at 68 projects, or 12.7 % of the total number of projects and electrification ranked fourth at 63 projects, or 11.8% of the total. Water and transportation projects ranked just below at 59 and 54 projects making up 11% and 10.1% of the total. Environmental, agriculture and social protection issues amounted to just 1.3%, 0.9% and 1.1% of the total.

Type, number and % of (Micro/Small) Projects Implemented to date:

Geographic Regions	Samgrelo	Imreli	Guria	Racha	Adjara	Svaneti	Total	Percentage
1 Education	57	49	21	9	41	18	195	36.4%
2 Cultural center	12	37	11	2	5	4	71	13.3%
3 Health	24	19	14	3	8	0	68	12.7%
4 Electrification	7	24	9	22	1	0	63	11.8%
5 Water	14	13	12	15	4	1	59	11.0%
6 Transportation	20	8	8	15	3	0	54	10.1%
7 Environmental Protection	0	0	5	2	0	0	7	1.3%
8 Social Protection	3	2	1	0	0	0	6	1.1%
9 Agricultural	3	1	1	0	0	0	5	0.9%
10 Better access to information	0	2	0	0	0	2	4	0.7%
11 Others	1	2	0	0	0	0	3	0.6%
Total	141	157	82	68	62	25	535	
Percentage	26.36%	29.35%	15.33%	12.71%	11.59%	4.67%		

2.4 Increased the number of direct beneficiaries receiving services from W-GCMI- assisted projects.

Outcome/ Effect Indicators: Improved basic services to vulnerable communities

Indicator: # of Vulnerable Households/ Beneficiaries with improved access to basic services

The total number of direct beneficiaries reached through 535 completed micro/small-projects under the W-GCMI equals 649,899. The micro-projects implemented by communities have directly benefited various cross-sections of their respective members. The composition of direct beneficiaries for a total of 535 micro/small-projects indicates 53.13% of beneficiaries are female and 53.31% male. Of these, 26.65% are children and youth while 5.28% make up IDP. The average total Households, which benefited under the WGMCI equals approximately 185,682 – this number being calculated by dividing the total beneficiary population by the average household size of 4.

Category of Beneficiaries

Category of Beneficiaries	Actual as of last r-period	Actual as of this r-period	Total	
Total # of direct Beneficiaries Reached (535 completed Micro/Small Projects)	535 699	114 190	649 889	185682
%of direct women beneficiaries	53.16%	54.01%	53.31%	
%of youth beneficiaries	25.44%	32.32%	26.65%	
%of IDP beneficiaries	5.51%	4.17%	5.28%	

The number of IDP direct beneficiaries planned to benefit from the W-GCMI was 28,700 persons. However, the total direct IDP beneficiaries reached by the W-GCMI was greater at 34,292 (119%) due to new strategies under CBO grants as well as under the Social Protection (SP) RFA and the Community Based Social Services (CBSS) RFA.

IDP(s) met through M/SP(s) and RFA Activities

Grant	Planned W-GCMI	Previous Report	Currently Met this Report	Total reached under the W-GCMI	Cumulative to Date
M/SP	28,700	29,527	4,766	34,293	119%

2.5 Maintenance and Sustainability of micro/small –projects

Indicator: # of Micro and Small projects in sustained operation post completion with evidence of maintenance supported by local resources:

Out of the total 535 CBO projects completed under the W-GCMI 472 CBO(s) have collected maintenance funds to maintain projects post completion, amounting to USD 55,831. The remaining 58 CBO(s), who may have not collected to date, again represents lack of information on two counts: 1) projects have recently completed and funds have not yet been collected and; 2) not all information can be collected due to the completion of the W-GCMI.

The following table shows the break down of funds collected by 472 CBO(s), per region, that have completed projects under the W-GCMI.

Distribution of maintenance fees collected by CBO(s) per region

Region	Number of CBOs Completed	Collection in days	Amount Collected
Samegrelo	141	124	15,537
Imereti	157	135	16,852
Guria	82	68	8,433
Adjara	62	61	7,921
Upper Svaneti	25	19	1,391
Racha Lechkhumi/Lower Svaneti	68	65	5,697
Total	535	472	65,731

Indicator: % change of utilization rates for health, Education, Electrical, Cultural centers, etc

Under the W-GCMI all projects were given a standard set of "success indicators" in order to measure pre-project numbers, before a respective CBO began project implementation, with a post project measure which usually was conducted by the CBO six months post project completion. Any given project could then be measured to see if there was any positive increase, or difference, from before a project was implemented with post project completion of six months or more. In order to validate positive change a random sample of 30 CBO communities, equaling a 7.3 % sample of 300 communities mobilized, were selected by staff and assessed by comparing pre-project numbers with post project numbers; total projects implemented by the sample 22 communities equaled 38.

Ambulatory projects saw an average 28% increase in utilization rates from pre project rates to post project rates. Utilization indicators focused on visits per month, number of vaccinations, types of interventions and tests conducted.

Electric projects saw an average 121.8 % increase in the availability of electricity which in turn affected local business operations. Indicators focused on the number of businesses affected, number of employees per business, number of additional businesses starting up post project, number of households with meters and finally, how many additional hours a day community, school and ambulatory have electricity.

Feeder road rehabilitation projects saw an average increase of 96.3 % concerning how businesses, attendance at schools and visits per ambulatories were positively influenced by improved roads to communities six months post project completion.

Secondary School projects averaged a 67.5% increase in the number of students attending class, number of total classes held in winter and number of graduates from pre project numbers. Ambulatory visits decreased due to warmer classrooms by 200% due partly to warmer classroom conditions post project.

Classroom equipment projects averaged an 82% increase from pre project to post project numbers. Indicators focused on number of students at school, teachers trained in new teaching methodologies, short term development plans for students designed, written records about children's health documented, training procedures on safety and hygiene and parental training on child rearing practices.

Sport hall rehabilitation projects showed an average increase of 57.6 % concerning the number of sporting and cultural events held, number of student playing sports and teachers teaching sports and cultural activities.

Cultural center projects saw an average increase of 555 % increase in the number of events, types of clubs and memberships from pre project data with post project numbers.

Please see Annex 2 for detailed data on Success Indicators for Micro projects

2.6 Ensure the use of local resources and increase contributions to micro/ small-projects implementation

Outcome/Effect Indicator: Civil Society Strengthening Integration of Resources

Indicator: average amount of community, local government and private contributions per Micro and Small Projects

Overall, W-GCMI's extensive community mobilization activities for its 535 funded projects leveraged over USD \$ 2,554,995 through community, local government and private sector contributions. Contributions from CBO(s) came in the form of skilled labor (18.15%), unskilled labor (43.42%), transportation and materials (37.87%) which were given a value based on W-GCMI's updated bi-annual market survey. Other contributions came in the form of financial inputs from various sectors equaling 0.56%. Overall, the value of community contributions for all CBO projects under the W-GCMI amounted to 41.49% from the original cost-sharing requirement of 25% per micro-project. The breakdown of the value of contributions for each of the region is indicated in the following table.

Value of community, local government and private sector contributions to micro-projects, by region

Region	Total No. of projects	Value of contributions	Percentage
Imereti	157	\$758,014	41.48%
Samcgrelo	141	\$662,249	40.57%
Guria	82	\$433,456	43.07%
Racha-Lenchkumi	68	\$292,001	41.20%
Zemo-Svaneti	25	\$104,053	38.66%
Ajara	62	\$305,222	42.75%
Total	535	\$2,554,995	41.49%

Local resource contribution:

	Community	Local Government	Private Sector	Total
Total value:	2,093,842	461,153	2,554,995	100%
Cash:	1,800	12,500	14,300	0.56%
Material:	795,659	171,961	967,620	37.87%
Labor (skilled):	362,303	101,453	463,756	18.15%
Labor (unskilled):	934,080	175,239	1,109,319	43.42%
Average % per project:	41.58%	39.85%	41.49%	41.49%
Number of projects:	435	100	535	535

Based on this information, the W-GCMI believes that the increase in the levels and forms of local resource cost sharing, across sectors, may be due to the number of projects each CBO completes which could be demonstrated by the communities' increased confidence in the CBO and by the benefits communities feel they are receiving based on completed projects. As CBO accountability and transparency increase, participation across sectors grows as citizens begin to see a positive change based on trust.

Success and Human Interest Story

To Participate or not to participate – that is not a question for Hamlet and his fellow men.

Irene Javakhadze, Grants Officer

Article from the West GCMJ Newsletter #9 Summer 2004

After an hour of jumping up and down on a pitted road I found them at the school, working hard, disregarding the heavy rain outside. It was one of their usual working days, considering that my visit was unexpected.

They are ordinary people, living in a high mountainous village of Samegrelo region and have nothing to do with the Prince of Denmark or Shakespeare, except the famous name of their CBO Chairperson and the truth that we all share: at least once in our lives we face the necessity to make a choice: to be or not to be, i.e. to do or not to do, to develop or stamp the same ground, to make our own decisions or let others decide on our behalf.

People living in Letsurtsume village decided to participate, when CARE/WGCMJ came to mobilize the community and required local contribution for tackling their priority problem.

CARE funded the elected CBO to undertake the secondary school rehabilitation project.

Considering that it was their first initiative, the community contribution was very significant: about 1,4 times higher than the necessary minimum: 36 percent of the total project cost;

Government also contributed some construction material and cost for their transportation. But that was not all: "We've been working as one team. Gamgebeli was supporting us in all the ways he could" – words of the CBO members make me think that they've been lucky with the local administration. According to what I've observed in the communities, behavior of local government in similar cases differs from community to community. Some are actively supporting, others do not interfere and there are some, who prevent. The latter are mainly those who have no authority in the community and see the enemy in the CBO that develops as a parallel structure of self-governance in the village and sometimes earns more trust of the community members than Gamgebeli. Government and CBO of Letsurtsume village chose to be partners not enemies.

"The very essential precondition for high participation is transparency. We maintain regular communication to the rest of the village as well as the local Gamgeoba about all the issues concerning the project, including the budget; it raises trust and the latter encourages participation" - important to hear it from the accountant of the CBO, Jemel Damania, who is the critical person in managing the project funds. I know that these are not mere words, intended to please me, as the donor representative. Quality of the work done speaks for itself.

Not only adults participate in the school renovation. Shalva is a twelve-year old boy, who, despite the heavy rain and summer holidays, is spending his time at the school helping others. "I've found it exciting to help them. In fact, they are helping us. This is my school. All of my classmates were helping the adults in some way: mainly fetching water and painting walls, girls were cleaning the floors before we painted them." - Prompting questions persuade Shalva to speak up. He says he has two brothers, who also participated. The youngest one appears with sparkling eyes and tells me his name is Gio. On my question whether their parents participated as well, Shalva takes his look away and shortly says "No". Someone whispers in my ear: "his father is in prison". I avoid the further query about the issue, instead ask Shalva to show me his classroom. The kids can't help expressing their happiness about how everything has changed to the better. Then Shaiva takes a brush and continues to help his neighbor, Mr. Tamaz, with the same cheerful manner.

Encouraged by the successfully implemented project within CARE, the CBO has already addressed their next priority problem: ambulatory rehabilitation. They developed the proposal and got funding from UNOMIG. "The funds are not that much (\$2000), though, given the high level of community participation, we'll do it" - says Hamlet.

Nevertheless that they are working honestly and efficiently, it is difficult for the CBO to survive, working on a base enthusiasm. "Life is difficult in Letsurtsume, like the rest of Georgia and especially its mountainous part. The only income for villagers comes from nuts production. People try hard to make ends meet" – for the sake of CBO sustainability, they anticipate undertaking income-generation projects in the future.

Yet, these are just plans. Before that there is something that the CBO of Letsurtsume and the rest of the community have already achieved: made their choice between being and dying, because to do, to try, to participate, to develop is the only way to survive and have a future.

2.7 Promotion of CBO(s) participation in social sector reforms and policy dialogues

Indicator: # of CBO(s) using Advocacy skills to increase local government and private sector contributions

2.7.1 CBO Basic Advocacy Capacity Building Workshops

The W-GCMI provided the opportunity for basic advocacy skills workshops for all CBO(s) that were mobilized under the program. Out of the 300 CBO(s) created under the W-GCMI a total of 293 CBO(s) attended these two day workshops conducted by local partner Horizonti. The most common form of advocacy by CBO(s) was to seek out both community and government (Saqrebulo, District and Rayon) financial or "in kind" contributions (labor, equipment, etc) for projects. With an average community contribution at 41.49% per project, basic community advocacy initiatives, in conjunction with ATP principles, have added greatly to increasing these numbers.

Basic Advocacy Workshops/ Per Region

Regions	Total W-GCMI mobilized communities	Basic advocacy trainings conducted to date
Guria	42	38
Imereti	78	75
Samegrelo	73	73
Racha	44	44
Svaneti	13	13
Adjara	50	50
	300	293

Indicator: # and nature of Successful advocacy initiatives by SPWG(s) to address systemic or policy related causes of local level issues/ problems

For detailed information concerning Social Policy Working Groups SPWG(s), please refer to Section "5 - Social Policy Initiative"

2.8 Employment Opportunities Generated through Micro and Small projects

Outcome/ Effect Indicator Economic Activity

Indicator: # of short term jobs created

Region	Communities	Total USD	Total Person Days	Transportation	Labor	Equipment	Other	Total Person Days	Total USD	
		(a+b+c)	a	b	c	d	e	(b+d)	(c+e)	
1	Ajara	62	408,693	370,423	18,122	1,812	20,148	403	38,270	2,215
2	Guria	82	572,963	491,414	44,586	4,459	36,963	739	81,549	5,198
3	Imereti	157	1,069,442	945,802	74,305	7,431	49,335	987	123,640	8,418
4	R.I.&L.S*	68	303,234	184,083	31,497	315	87,655	1,753	119,152	4,903
5	Samegrelo	141	970,255	840,533	68,197	682	61,525	1,230	129,722	8,055
6	Zemo Svaneti	25	165,067	150,263	8,419	842	6,385	128	14,804	970
TOTAL		535	3,489,654	3,082,700	248,021	24,781	240,711	2,973	528,166	33,651
			100%	123%	10%		11%		21%	

* Racha, Lechiumi & Low Svaneti

Amounts in USD.

The W-GCMI was able to provide short-term employment opportunities to communities through CBO micro and small project grants. As most CBO projects were infrastructure related both skilled labor and transportation costs were key to project successful completion and were covered by W-GCMI obligated funds. The table above reflects the total amount of funds allocated for short term employment with labor costs amounting to \$245,126 for 24,514 person days of work and transportation (machinery, trucks, excavators, cranes, etc) amounting to \$262,011 USD covering 5,240 person days of work. The total contribution from W-GCMI, which supported short-term employment income, amounted to \$507,137 USD or, 15% of the total \$3,489,654 W-GCMI obligated funds for CBO projects.

2.9 Monitoring and Evaluation

The W-GCMI developed two qualitative tools comprising a *CBO monitoring* and a *CBO self-appraisal* approach to better measure if mobilization activities and project implementation outcomes were making a qualitative impact.

2.9.1 CBO Monitoring

In order to measure CBO changes over time the mobilization unit developed CBO monitoring forms, based on outcome indicators of the W-GCMI Log Frame, for a selected random sample of 53 CBO communities. Monitoring formats were filled out by mobilization staff based on focus group discussions with CBO communities. By interviewing CBO representatives and community members the mobilization unit wanted to measure, if in fact, that the core assumption of the W-GCMI *"The more projects a CBO do the greater the mobilization,"* was indeed related.

The following table breaks down the number of micro-projects, one, two or three, that the selected CBO(s) sample has done under the W-GCMI.

# of Projects	Sub-Total	%	Total Projects	Total CBO(s)
1 Micro Project	21	28%	75	53
2 Micro Project	44	59%		
3 Micro Project	10	14%		

Although 28% of CBO(s) have done one project, with 59% completing second projects and 14% completing a third project, final data shows positive movement based on the number of projects completed by CBO(s) in the following table summary:

WGCMII Log Frame Outcome Indicator	Sub-Total	%	%
# CBO(s) with improved functioning	-1	Going Up	25 47%
		Stable	28 53%
		Going Down	0 0%
# CBO(s) using participatory methods	-2	Not at all	3 6%
		Sometimes	41 77%
		Often	9 17%
# CBO Self Help projects	-3	None	7 13%
		One	33 62%
		More than one	13 25%
Community perception on quality of services	-4	Going up	36 68%
		Stable	17 32%
		Going Down	0 0%
# of CBO(s) formed and functioning	-5	Less than one year	0 0%
		More than one year	53 100%
# of Micro-projects functioning post completion with evidence of maintenance	-6	Going up	13 25%
		Stable	37 70%
		Going Down	3 6%
Overall trend in community contributions to projects	-7	Going up	34 64%
		Stable	19 36%
		Going Down	0 0%
Total CBO Sample:			

(1) # CBO(s) with improved functioning: (Roles and Responsibilities, Leadership, Participation, Confidence, Organization, Trust)

CBO(s) have reported an increase in confidence, community trust and participation as well as trust in their CBO leadership as of this final report. The final assessment shows a 9% increase from previous assessments from 38% to 47% now feeling their CBO is improving or "going up." It is felt that as CBO(s) have more experience with project implementation and undertake more than one project they become more confident and proactive.

(2) # Of CBO(s) using participatory methods: (Define, Identify and Target resources)

With 6% saying "not at all," 77% saying "sometimes" and 17% saying "often," it appears that more experience and support is needed for CBO(s) to engage communities to participate in their own development. There is a trend that CBO(s) do all the work and are not always transparent with community

members by engaging and seeking them out or organizing human resources for projects. This may also suggest a more hierarchical power structure where participatory methods to include others opinions are not fully developed. More time would be needed with CBO communities in order to make lasting change to rural cultural in this regard.

(3) # of CBO Self Help Projects: (Confidence, Trust, Organization, Participation, and Motivation)

With 13% of respondents saying "none," 62% saying "one," and 25% saying "more than one," it appears in the sample that CBO communities are beginning to organize resources in their own communities and take on small scale, often, small repair projects. Recommendations often expressed to W-GCMI mobilization staff from CBO(s) is to fund and support income generation projects so that CBO(s) can sustain their activities when W-GCMI stops.

(4) Community Perception on Quality of Services:

With 68% of CBO respondents saying "going up," and 32% saying "stable" or "no change," and 0% responding "going down," suggests that poverty alleviation is occurring to some degree through rehabilitation of community infrastructure. However, depending on type of project, such as water, electricity, education or health, service impact will be perceived differently.

(5) # of CBO(s) formed and functioning:

100% of CBO(s) in this sample have been functioning for more than one year. It appears that the majority of CBO(s) have taken more than one year to become registered entities and complete their first project. This is not surprising as first projects take longer initially for new CBO(s) than more experienced second project, or third project, CBO(s).

(6) # of Micro-Projects functioning post completion with evidence of maintenance:

Evidence of maintenance fee collection and works following project completion is high as reflected with 25% of cases "going up," 70% as "stable" or "no change" and 6% of cases as "going down." This is an important indicator as it relates to the attitude and values of ownership and responsibility. These findings suggest that if communities are given the chance to improve their own lives they will not only do the project as best they can with funds but also protect their works following completion.

(7) Overall trend in community contribution to projects: (Trust)

With 64% of cases as "going up," 36% as "stable" and only 0% "going down," community contribution has risen dramatically. This indicator and its scores suggest a huge increase in "trust" for CBO projects in communities. Although project criteria for W-GCMI first projects is 25% and second projects 35%, community contributions average 36% for first projects and 37% for second projects. Government and private sectors have also contributed in addition to communities with a 4.6% average for first projects and 7.7% average for second projects.

2.9.2 CBO Self Appraisal

The W-GCMI designed a CBO Self Appraisal tool so that CBO members could also participate in their own monitoring. The same sample of 53 CBO(s) was used focusing on qualities of: trust, confidence, organization, leadership, independence and unity in communities. A Likert scale was used with (1) being poor, (2) low, (3) Satisfactory, (4) high and (5) very high.

Aggregated table of CBO Self Appraisal

Mobilization Question	Scale	% Response
-1 Trust (4 Questions)	Poor	0%
	Low	6%
	Satisfactory	25%
	High	62%
	Very High	8%
-2 Confidence (7 Questions)	Poor	0%
	Low	2%
	Satisfactory	30%
	High	57%
	Very High	11%
-3 Organization (3 Questions)	Poor	2%
	Low	4%
	Satisfactory	36%
	High	47%
	Very High	11%
-4 Leadership (3 Questions)	Poor	0%
	Low	2%
	Satisfactory	32%
	High	57%
	Very High	9%
-5 Independence (4 Questions)	Poor	0%
	Low	8%
	Satisfactory	53%
	High	36%
	Very High	4%
-6 Unity (2 Questions)	Poor	0%
	Low	0%
	Satisfactory	51%
	High	34%
	Very High	15%

(1) Trust:

As indicated by scores in this final assessment, 62% of CBO(s) perceive themselves to have "high" *trust* within their communities with 6% saying *low* and 8% saying *very high*. Trust between communities and CBO(s) is higher than between local governments with *trust* low overall for the private sector. Mobilization believes this to be due to transparency principles followed under project grants, including financial documentation, posted budgets in communities and CBO poster's in communities outlining activities.

(2) Confidence:

With the 59% of CBO(s) in this sample implementing two projects, 14% completing three projects and 28% completing only one project, mobilization has seen an 3% increase in *confidence* from past assessments overall as CBO(s) implement additional projects and participate in capacity enhancement (competencies) training.

(3) Organization:

The *organization* section focused on 3 key questions relating to CBO ability to organize resources, both material and human as well as local government and private sector contributions to projects. With 47% of CBO(s) feeling that their *organization* ranked *high*, 36% saying *satisfactory* and 11% saying *very high*, the trend supports the build up of trust between communities, local government and CBO(s) as it relates to community contributions exceeding the 25% minimum criteria for grants with the average hovering around 40.63% for first projects, 43.34% for second projects and 47.14% for third projects.

(4) Leadership:

Although the majority of CBO(s) perceived themselves to be high at 57% with 32% reporting *satisfactory*, mobilization felt that lower scores generally would be more close to the truth due to what leadership means to them. Staff felt that scores reflected leadership as defined on the older hierarchical style of the past and not so much on inclusive participatory type leadership styles. Staff felt that this traditional type of leadership would take time to change in communities.

(5) Independence:

Independence questions focused on 4 elements that related to CBO ability to solve their own problems post W-GCMI through self-help initiatives. Not surprisingly, 53% saw their ability to do so as *satisfactory* with only 36% saying *higher*. Mobilization feels that due to lower financial contributions to projects outside W-GCMI, usually in the form of in-kind labor, CBO(s) are dependent on community enthusiasm, trust and past project impact if they are to receive any financial or in-kind contribution to undertake activities in the future. *Independence scored lower than all other sections.

(6) Unity:

The *unity* section focused on two questions which pertained to attitudes and perception surrounding issues of tri-sector collaboration of working together to address shared problems. With 51% of CBO(s) perceiving *satisfactory* conditions, 34% saying *high* and 15% saying *very high*, CBO(s) feel that local government is still responsible for many issues and not them. However, the recent "Rose Revolution" has impacted communities in that they feel they have some power to make positive change now, through CBO activities, and are holding both CBO(s) and government more responsible due to these political changes.

3. GRANTS ACTIVITIES SEPTEMBER 2000 – SEPTEMBER 2004

With over \$5.6 million in grants funding, CARE established a Grants Unit consisting of a grants manager, a grants coordinator and nine grants officers to ensure that the grants process was transparent and accountable. Concurrently, CARE's Finance unit provided financial accounting and internal audit support. The grants unit managed the selection and financial accountability of each of the 535 CBO implemented projects and the 34 Local NGO implemented projects.

The CBO and NGO grants activities formed the foundation of the WGCM project. Grants to communities and NGOs to improve access to and quality of services required significant investment in the rehabilitation of the community infrastructure and in the case of the Local NGO community provision of capacity building and other critical services to vulnerable groups.

Community-Based Micro & Small projects contributed to the reduced human suffering in targeted communities through increasing the availability and accessibility of basic social services such as primary and secondary schools, ambulatory (health posts), rural transportation infrastructure, agriculture and electric supply (to name just a few). Additionally, the improvement of primary-level social infrastructure assisted targeted communities to transition from a post-conflict situation to the development of their own communities and begin economic investment. For instance, the rehabilitation of an electric system attracts the private sector to start small enterprise development and create employment opportunities for the vulnerable. The rehabilitation of rural roads mitigates the complete isolation of rural communities from administrative centers, allows the assignment of public buses, reduces transportation cost, and the price of consumer goods and increases market outlets for subsistence farmers. The availability of health posts ensures the accessibility of basic health care services for poor mothers, children, elderly people and other most vulnerable beneficiaries who do not have the choice to use other level of health services elsewhere.

3.1 Transparency

Outcome Effect Indicator – Civil Society Strengthened

Transparency in the Georgian Context: WGCM operated in the community context where after 10 years of 'transition', vulnerable communities were and remain in many cases deeply impoverished. Community members were indifferent to address their common problems and locally elected government officials had unclear mandates and limited or no resources. Most ordinary people had little knowledge or ownership of policy reforms and local people are frustrated by false promises from the government. Finally, the lack of transparency and petty corruption that exists on a day-to-day basis is still high. These attitudinal obstacles that exist in most communities represented one of the largest challenges for the WGCM. To overcome obstacles of petty corruption, CARE, through the Grants Unit focused on three primary areas:

- CARE - strengthened the capacity and skills of its staff in financial management, technical standards (engineering) as well as the softer skills of community empowerment methodologies, to ensure that they could support all CBOs and NGOs in their grant management skills and sustainability. Audits reviewed systems and procedures.
- CBO and LNGOS - ensured that financial and accounting systems were in place and were being followed at WGCM Sub office, CBO and NGO levels through field visits by CARE finance and grants staff, and,
- Grassroots - facilitated the creation of transparency systems at the community level to ensure that community members can hold CBO and local NGOs accountable for their actions and their activities.

Throughout the implementation of the WGCM project, CARE has consistently attempted to improve its Grants Management Systems to make them more transparent. The following annexes (located at the end of this report) show diagrams that clearly explain the grant award process for Micro Small grants and Local NGO RFA awards in Annex 3.

Newsletters: A total of nine Newsletters were drafted and disseminated to WGCMI communities and stakeholders. The community was the primary audience for the newsletter. CARE surveyed communities to determine what type of information they preferred to read about and as a result, CARE developed themes for each newsletter. Additionally, the Newsletters assisted WGCMI to be more transparent about its grants and RFA announcements, and other important activities

The newsletter also enhanced information dissemination in critical areas of interest for rural communities such as Education and Healthcare reform. Unfortunately, access to information on pertinent issues to communities remains problematic. Furthermore, in order to support community mobilization, the 8th issue of the WGCMI Newsletter was printed along with the Universal Declaration of Human Rights (which was adopted and proclaimed by General Assembly resolution 217 A (III) of 10 December 1948) and signed by Georgia.

Internet Links: To ensure that stakeholders in Tbilisi, and other regional centers where there is access to internet, WGCMI negotiated to have its logo and links of its website on some of the most popular non-profit web directories in Georgia: 1) assistancegeorgia.org.ge, 2) advocacy.ge, and 3) E-Transparency Georgia - <http://aevec.gateway.ge>.

RFA Transparency: WGCMI strived to increase the transparency of the RFA process to ensure that all applicants had a fair opportunity to be selected. For example, between one and five RFA informational meetings were conducted for each of the RFAs (the number of information meetings depend upon the type of grant being offered). A FAQ (list of Frequently Asked Questions) was composed and given out in RFA meetings and sent by e-mail to interested RFA applicants. This has enabled WGCMI to improve competition for RFAs by providing an accessible and transparent Questions & Answers forum for all interested NGOs.

Unsuccessful Applicants: Given the enormous interest in securing WGCMI funds in Western Georgia, there were a high number of unsuccessful applicants and as a result, there were some organizations that felt that they had not been fairly reviewed. To ensure that CARE was transparent, CBOs and LNGOs whose proposals were not accepted received a letter explaining the reasons why they were rejected and invited the organization to make an appointment with the WGCMI Grants Manager and Grant Officers to discuss the reasons for their unsuccessful application. Though time consuming when the project had more than 15 Micro/Small Project Grant Cycles and 12 RFA announcements, CARE found it to be a transparent way of increasing CBO or NGO capacity for future grant solicitations by CARE or other organizations.

Financial – Training / Reporting / Transparency: WGCMI routinely trained all CBOs in Accountability, Transparency, and Participation (ATP). When possible, WGCMI staff made monitoring and evaluation visits at the same time as when CBO general community meetings are held. During site visits, WGCMI staff reviewed the following:

- a. **Posting of Budgets:** All CBOs/NGOs are required to post their project's budget in an easily accessible area.
- b. **Posting of Transparency Posters:** All Micro/Small Grantees were given posters that they filled out showing information for each of their projects. More than 1500 copies of these Transparency Posters, which promoted ATP (Accountability, Transparency, Participation), were put in three public locations within the Sacrebulo. This allowed the entire CBO to be more fully informed of the CBOs activities.
- c. **WGCMI staff also reviewed CBO or NGO financial books, procurement activities, and stock cards as well as reviewed progress of projects against expenses.**

Transparency: Key Dates and Events

Given the issues of corruption, CARE's transparency and accountability activities were cross cutting and formed the basis for transparent and accountable management of Micro and Small projects. Below are some of the actions taken to ensure donor compliance:

3.2 Accountability

3.2.1 Technical Assistance – Ensuring Accountability

The Grants Unit over the course of project identified additional technical assistance to ensure that the project maintained a high degree of transparency and accountability in the grants management activities. Two audits were conducted – one by a local Audit company and another conducted by CARE - USA's internal audit department.

- **Consultant – RFA Development and Assessment.** In November 2001, the consultancy provided technical assistance to the WGCMi to develop a transparent process to develop, review and assess local NGO RFA proposals.
- **Audit Tender:** This tender was finalized in November 2002 and performed by Georgian Audit & Consulting Co (GACC), which is based in Tbilisi and authorized by USAID in Georgia to perform audits. GACC reviewed 50 CBOs and did not identify any questionable costs. It did provide recommendations to improve financial systems and taxation issues related to CBO implemented projects. The recommendations were implemented.
- **CARE-USA Audit:** As part of the December 2002 internal audit of CARE Georgia, WGCMi grants activities were closely reviewed. Auditors met with USAID representatives after the audit to share their findings. The audit of WGCMi did not identify any questionable costs. Recommendations made by the audit team were implemented according to an agreed upon timeline.
- **Intern - Revision of Grants Manual,** As part of the recommendations from the Internal Audit, an intern to WGCMi revised and updated the following: 1) "Grant Management Systems and Procedures Manual", 2) Grant Recipient Manual, and 3) Grant Instructions were revised and updated in June 2003.
- **Database Tender:** Although CARE had established a simple database at the startup of the project, a tender was issued to develop a database that organized data according to the requirements of USAID and the indicators of the WGCMi. This was an important first step in creating and updating the WGCMi database to provide timely and reliable data for reporting and programmatic needs.

3.2.2 Administrative Accountability

Central vs. Self Procurement: At the outset of the project, CARE determined that all procurement for the WGCMi would be completed internally to ensure that procurement was completed according to CARE's procurement policies. However, after assessing the efficiency of central procurement, CARE determined to pilot self-procurement by communities. After successful implementation of the pilot in November 2001, CARE finalized the assessment of six 'pilot' CBOs that conducted self-procurement activities and **phased-out central procurement and phased-in self procurement** for all recipients of WGCMi grant funding. The transition required significant training of CARE staff, CBO and LINGO procurement policies and requirements. While ensuring a high degree of accountability in the CBO procurement activities, the shift to community procurement also significantly enhanced the CBO/NGO's capacity to manage difficult and often complex activities.

Quality and Standards Engineers: As most of the community projects focused on infrastructure rehabilitation, CARE determined that additional technical assistance was required to ensure community projects met Georgian and USAID construction standards and environmental compliance. Instead of awarding a Construction Quality & Assurance Tender to monitor/evaluate the implementation of projects, WGCMi decided to hire three Quality and Standards Engineers (April '02 – Sept '02 reporting period) to help communities improve their renovation of essential services projects. Additional engineers were hired depending on the workload to prevent bottle necks in the community project review and implementation activities. These Engineers also served to increase transparency within the CBO by performing audits of the construction done by CBOs/NGOs to make sure it corresponded with the activities promised in the Sub Grant Agreement.

Reassignment of Grants Officers: In response to the CARE-USA audit conducted in December 2002, CARE periodically transferred Grants Officers from one region to another. During this first reassignment, CARE found that it was important to have the Grants Officer close out all projects he/she has started in their original region. By having the Grants Officer close out all projects they started, CARE was able to better utilize the institutional knowledge and in-depth insights the Grants Officer had gained working in particularly vulnerable communities.

3.2.3 Stewardship of Donor Resources

WGCMCI has responded to all accusations of misallocation of funds. In some cases, as with the CBO 'Alerti' in Kitsia (located in Martvili, Samegrelo), CARE worked proactively with the Sacrebulo and Gamgebeli to encourage the CBO and community members to return the funds and finish the project. CARE found the District Gamgeoba's (all newly appointed by the Saakashvili government) extremely helpful when communities ran into trouble.

In April 2004, CARE identified that in some cases receipts had not been issued for some of the funds that were to be returned by the grantee (CBO or NGO) once the project was completed. CARE completed an investigation and identified that some receipts were indeed not given to some CBOs that returned cash to CARE. While the amount was quite small (7,400 GEL for 24 CBOs) CARE moved quickly to further refine and strengthen its financial systems to ensure that the risk of future unallowable expenses is decreased. The 7,400 GEL that could not be accounted for was not expensed to USAID and was covered by CARE's own resources.

ACTIONS TAKEN BY CARE IN LIGHT OF IDENTIFIED SYSTEM WEAKNESSES AND UNALLOWABLE EXPENSES

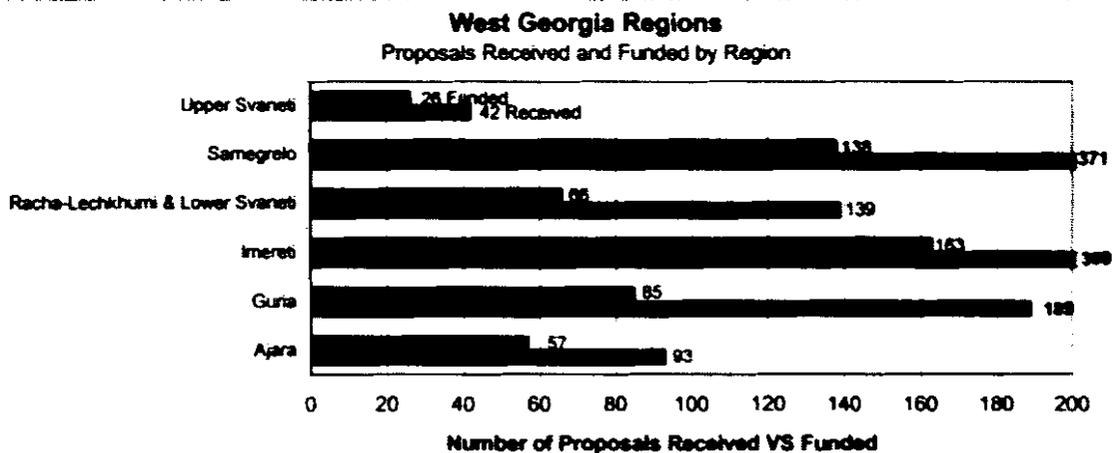
To strengthen the existing system, CARE Georgia took the following actions for all of its projects:

As of September 2nd, 2004 all payments made by CBO/NGOs to CARE above 20 GEL, will be made by bank transfer. Grant Officers are no longer permitted to collect cash payments above 20 GEL from CBOs and NGOs, if the organization has a bank account. In the case where the CBO does not have a bank account, Grant Officers will be issued a numbered receipt completed by the cashier to document the transaction between the Grant Officer and CBO, which will then be signed by the cashier, the GO and the CBO representative. This policy is effective for all CARE Georgia projects.

3.3 Grants Accomplishments:

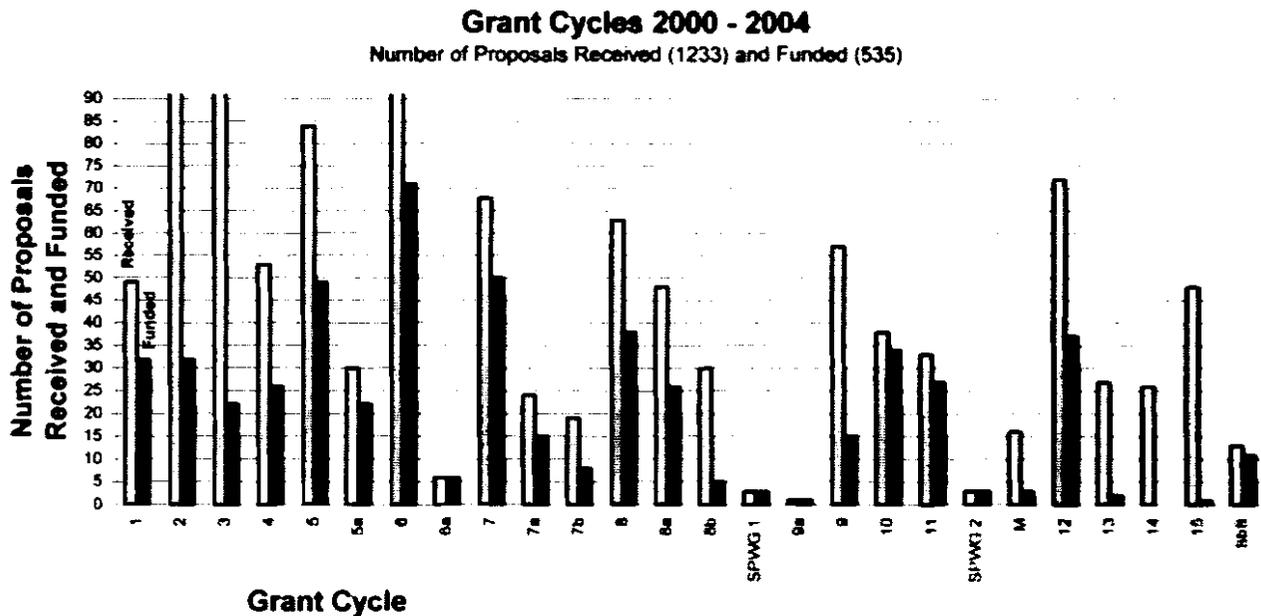
3.3.1CBO Micro Project Support and Implementation

OUTCOME/ EFFECT CBO DEVELOPMENT



Due to the significant international presence in Western Georgia since 1993, there was an existing base of communities who had already participated in community mobilization activities and were considered by CARE to be vulnerable. Since CARE did not target these communities for mobilization, CARE did support 66 communities by awarding them 92 grants (some CBOs in these communities received more than one grant) that had already been mobilized by other NGOs. CARE supported this activity as a way to support local CBO/NGO development and did not affect grant activities for WGCMI mobilized CBOs.

Unfortunately, CARE was unable to support all proposals it received from unsolicited communities. Below is a list of proposals received (light columns) and funded (dark columns) by Grant Cycle through the life of the WGCMI project. WGCMI received more proposals than it was able to fund.



Grant Cycles 1-6 were Funded in 2002. Grant Cycles 6a-14 were Funded in 2003. Grant Cycles 15 were Funded in 2004.

Unsuccessful Proposals Per Grant Cycle: Proposals were not accepted from those non-WGCMI mobilized CBOs for the following reasons: 1) Lack of previous grant experience, 2) Lack of sustainability (including lack of maintenance plan) of the proposed project, 2) Proposed project physically is not located within the WGCMI geographic target area, 3) Cost per beneficiary (CARE'S contribution number of direct beneficiaries) is more than approx. \$25, 4) Does not significantly benefit vulnerable population, etc. These are just a few of the major reasons to reject a proposal.

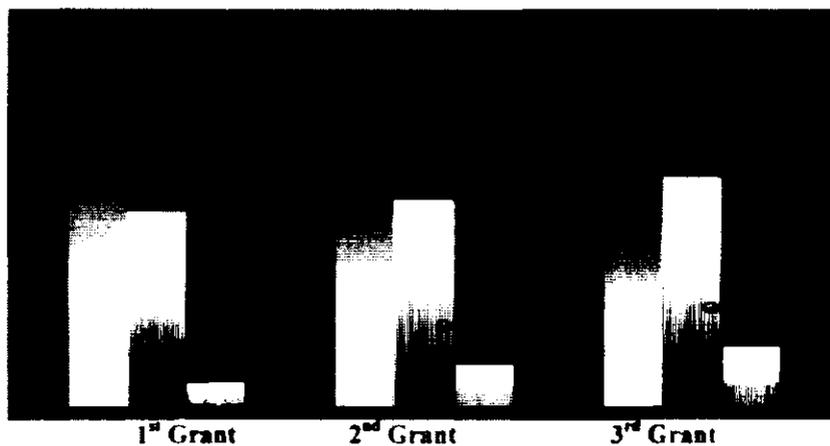
- Finance Skills and Transparency – Bookkeeping and Grant Management:** As was the practice of WGCMI's Grants Officers, several financial trainings were planned for each grant recipient. The first training occurred after they signed the Sub Grant Agreement and before they received their first transfer of grant funds – Note: Each grant award is sent in parts and not as a whole in order to reduce risk. A second financial training was provided during the grant implementation process. Furthermore, in order to improve the financial capability of our CBO/NGO grantees, the WGCMI Grants Officers continued to use more interactive financial training techniques and provide a second smaller group training for CBOs during the implementation phase. In some cases, Grants Officers also requested more experienced CBOs assist less experienced CBOs in financial reporting, which also gave them an opportunity to network and build on each others' strengths. This financial and administrative training was provided equally to solicited and unsolicited grant winners.

- Capacity Building:** CBOs that received Micro or Small Grants through WGCMI benefited from further capacity enhancement through RFA projects awarded to experienced national NGOs in the areas of: Agriculture, Community Mobilization, Health & Social Welfare, Economic Opportunities, and Voter Education. The NGOs that received RFAs focused their project activities mainly in communities that had received WGCMI grants.
NOTE: For a full list of RFA winners and amounts see *Grants Annex 4*.
- Capacity Building to improve Grant Management by WGCMI and CBOs:** WGCMI attempted to improve the quality of projects by enhancing Grants Officers' skills through participation in various technical cross-training and personnel development activities. Just a few of these activities are listed in the *Grants Annex 5*.

Other ongoing training of staff include: WGCMI staff's regular participation in Proposal Review Committee and Strategic Planning meetings, as well as Financial and Administrative training workshops for CBOs and local NGOs. As a result of these training sessions and capacity building workshops, WGCMI Grants staff continuously developed the skills necessary to more fully analyze and critically assess the efficacy of unsolicited projects and projects proposed by WGCMI mobilized communities and evaluate the capacity of CBOs/NGOs to undertake proposed activities.

Indicator: # of supported CBO(s) showing evidence of improved organizational functioning

- Multiple Grant Methodology:** CBOs that have received more than one grant have been able to reinforce their skills in mobilizing the CBO with each project awarded. As a result there has been a distinct rise in community business/local government contribution and a decrease in WGCMI contribution. CBOs that are granted more than one project appear to be better able to gather resources at a higher rate for 2nd and 3rd projects.



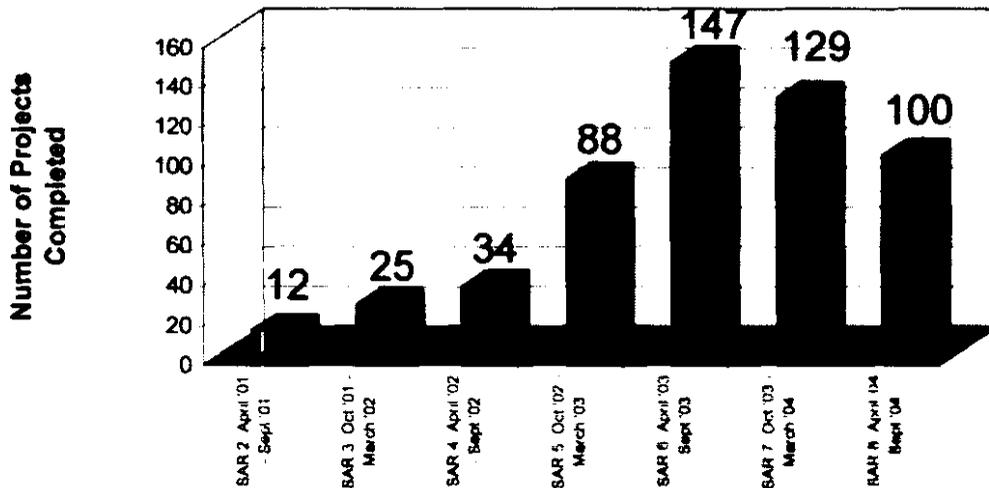
NOTE: The numbers above each item are percentages of contribution per project.

Indicator: # CBO(s) that have completed MP(s), SP(s)

In April 2002, CARE proposed to modify and received approval from USAID to modify the number of projects implemented to 550 grants to NGOs/CBOs. As of September 2004 97% or 535 of the proposed 550 projects were awarded under the WGCMI. The number of projects awarded and the quality of these projects in the communities, taking into account the scale and scope of WGCMI, is seen as a success by CARE and its partners. WGCMI was unable to meet its targets because of: 1) Delays related to startup of WGCMI resulted in fewer than anticipated projects at the end of the first year, 2) Rose Revolution, 3) Uncertain security situation in Western Georgia before/during/after elections, and 4) Blockade in Ajara in 2004. As can be seen below, the majority of these projects were completed in the last year and a half of the project.

CARE would have been able not only to meet but also exceed the total number of projects completed if USAID approved a no-cost extension until December 2004

Number of Grants Completed September 2000 - 2004
Total 535 completed per Semi Annual Report (SAR)



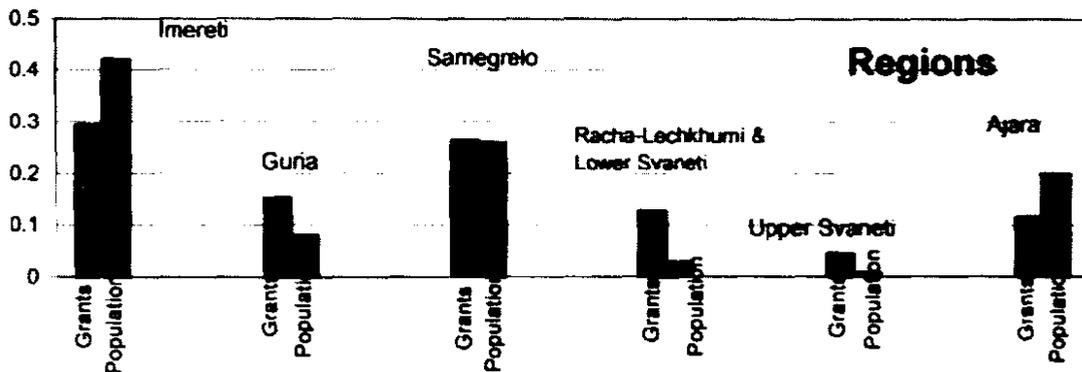
West Georgia Population Vs. Grants Awarded per Region (See Table below)

WGCMi's selection criteria for mobilization was based upon: 1) areas/communities that are the most vulnerable, 2) regions were served by other NGOs, 3) population of the region.

Therefore the distribution of grants by region may not be proportional to the general population of the region. Imereti received the most grants, although not equal to the population, as Grants were not given for projects based in Kutaisi (except for a few IDP projects). Racha-Lechkhumi & Lower Svaneti, Garia, and Upper Svaneti received more projects as compared to their population because they are more remote, underserved by NGOs in the past, and are particularly vulnerable, especially in the more mountainous regions. Ajara received fewer projects as compared with its population because WGCMi did not fund projects in more populace and well-off district centers like Kobuleti and Batumi. Samegrelo did receive an equal number of projects in comparison with its population because of the high number of IDP communities and settlements as well as many underserved vulnerable groups.

NOTE: For Details of the number of Proposals Received and funded by Grant Cycles and Regions, please see *Grants Annex 6 – Population vs. Projects Awarded Per Region.*

Percent of Population vs. Percent of Grants Funded
West Georgia



3.3.2 Support to Local NGOs through RFAs

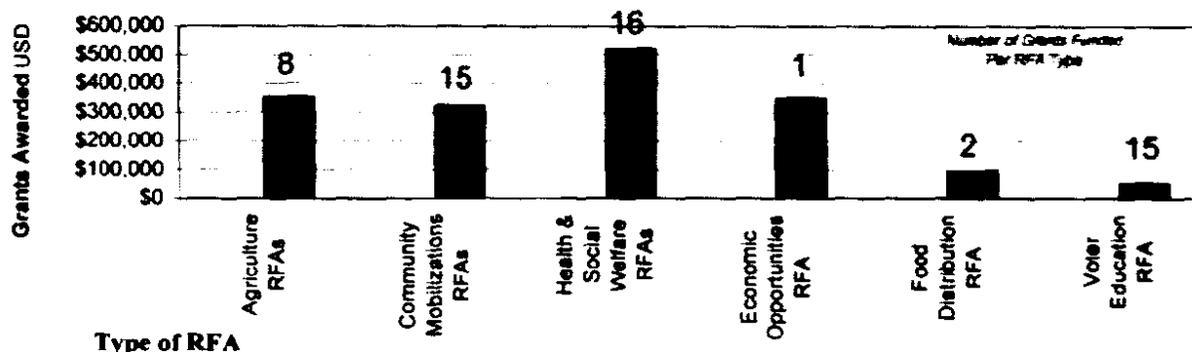
Outcome/ Effect Indicator: Improved basic services to vulnerable communities

Request for Applications (RFAs): In April 2002, CARE modified its targets to award grants through the RFA mechanism. Approximately, \$1,575,000 USD was obligated for this purpose. These grants were concentrated on experienced Local NGOs to provide and enhance services to West Georgian communities, especially vulnerable groups. Based on the baseline survey conducted in the summer of 2001, CARE and IMC determined that the RFAs would be sector focused on Agriculture, Health and Social Welfare and Economic Opportunities sectors to improve basic services. In addition, CARE provided resources to support voter education activities in November 2003 and food distribution to needy educational institutions (Winter 2004). Please see Annex 7 for a brief program description for each NGO.

Through the WGCMI Request for Applications (RFA) grant awarding mechanism, WGCMI further enhanced the lives of community members where CARE established CBOs, which is where almost all of these RFA winning NGOs operated. WGCMI has awarded 57 Grants to 34 NGOs through the RFA mechanism in five strategic areas: 1) Agriculture, 2) Community Mobilization, 3) Health & Social Welfare, 4) Economic Opportunities, 5) Voter Education (two of the three Voter Education RFAs were mostly funded by OSCE), and 6) Food Distribution. WGCMI has met its RFA goals.

NOTE: For Details of all RFAs, including name of NGO, exact amount of award, etc, please see *Grants Annex 4 – RFA NGO Grant Winners*

Types of Grants Funded through the RFA Mechanism



NOTE: The latter two of the three Voter Education RFAs were mostly funded by OSCE. The amount of money OSCE funded for these two RFAs was not included in this bar graph because they were not USAID funds. The total number of Grants Awarded for all Voter Education RFAs, however, includes those funded by OSCE in the bar graph because WGCMI staff managed the reconciliation and monitoring of these OSCE Voter Education RFAs.

Agricultural RFAs: WGCMI awarded eight grants to local NGOs to help rural communities in West Georgia increase harvest yields and general agricultural practices through: 1) Livestock and Fodder, 2) Horticulture, and 3) Agricultural school youth clubs. Improving agriculture not only increases incomes but also the quality and quantity of food for community members, which is directly related to the health of the community. For more information about income generation see: "Outcome/ Effect # 4: Economic Activity" below.

NOTE: For budget details, please see *Grants Annex 4 - RFA NGO Grant Winners*.

Health and Social Welfare RFAs: WGCMI awarded 16 grants to local NGOs through six RFAs. For more information about project descriptions and outcomes, please see the **Health & Social Welfare Unit's** section of this report.

NOTE: For budget details, please see *Grants Annex 4 - RFA NGO Grant Winners*.

Food Distribution RFAs awarded to two NGOs: 1) "Caritas Georgia" Charitable Foundation and 2) "Lazarus", Georgian Patriarchate Charitable Foundation. Operational areas for these NGOs were: Tbilisi, Samtskhe-Javakheti, Adjara, Guria, Samegrelo, Svaneti, Imereti, Kvemo and Shida Kartli, Mtskheta-Mtianeti, and Kakheti. Projects took over the provision of some of the most important staple food items to vulnerable beneficiaries (orphans, pensioners, children at boarding schools, etc) at 54 institutions in Georgia. This project is implemented through food delivery to these institutions on a monthly basis.

- Both local NGOs gathered volunteers who helped evaluate the prices of basic food products at the local food market. The work of these volunteers were, in turn, monitored and evaluated by two full-time CARE employees
- Food products purchased and weekly monitoring visits conducted by LINGOs' Staff
- 6,517 beneficiaries of 54 institutions have received 75,783.66 KG of food

Outcome/Effect: Civil Society Integration of Budgets

WGCMI has attempted to integrate all Units in the support of Civil Society. The Grants Unit has sought to include in Grants Management aspects of civil society strengthening, especially in the area of transparency. CARE believes that its training of CBOs on finance and its requirement to advertise all budgets has introduced a new kind of promotion of financial transparency with these rural communities that had not existed before. This openness with finances has the potential of being replicated at the community level by not only the CBO but also by the local government at the Sacrebulo level.

- **Information Management** - WGCMI supported the development of a civil society by: 1) Creating a website where all its projects were listed, 2) Organizing Stakeholder Conferences with its best and brightest CBOs/NGOs, and 3) Printing posters that specify the numbers of types of projects managed by the CBO/NGO.

Note: For more information, please see section *G. Stakeholder Relations* in this document.

Civil Society Strengthening – Community Based Voter Education (CBVE) RFA: WGCMI staff facilitated three Voter Education RFAs in West Georgia in the last year: 1) Parliamentary Elections, November 2, 2003, 2) Presidential Elections, January 4, 2004, and 3) Parliamentary Elections, March 28, 2004. For each of these Elections, local NGOs were given a grant to do Voter Education activities in all Saccubulos that received grants to CBOs through WGCMI. The first Grant was funded by USAID for the first election in November '03. The second and third Voter Education grants were funded by OSCE for the Presidential and Parliamentary Elections in 2004. In each of these, the local NGO winners received intensive voter education (Training-of-Trainers) from IFES. These NGOs, in turn, gave intensive voter education training in Saccubulos for each of the above-mentioned elections.

The main goal of these projects was to provide as much information as possible to voters in targeted area about the changes and reforms in electoral processes, to take informed decisions, and participate as active citizens in elections. An important part of the project implementation was that the NGO RFA winners not only provide information to beneficiaries, but also supported them in developing skills in obtaining information themselves and trained them on how to use this information for actions that create an environment where they, as citizens, were an active and integral part of democratic processes at the grass-roots level. All CBVE RFA winners during the project implementation supported established WGCMI funded CBOs to build their capacity at a local level in the area of public information dissemination and developed sustainable mechanisms at the local level for ensuring continued functioning of the project results

Outcomes/ Effect Indicator: Economic Activity

Agriculture Methodology – Agricultural RFAs: WGCMI awarded eight RFAs to local NGOs to conduct agricultural activities with communities that were awarded micro and small grants through the CARE WGCMI. Farmers in the communities received training on different types of methodologies in the areas of: 1) Livestock & Fodder and 2) Horticulture. This has increased the economic development of vulnerable rural communities that rely upon agriculture as their main source of income and survival.

Agricultural RFA (School Youth Clubs): This RFA was awarded to two local NGOs: Guria Agro-Business Center and Atinati. These two NGOs organized Agricultural Clubs in rural schools in the regions of Guria and Samegrelo. The NGOs taught these students how to work as a team, grow produce, and how to generate income from their work, which most clubs chose to give to the school or vulnerable groups. The main idea of this RFA was to build leadership skills, a sense of ownership, group decision-making, and basic business skills.

General Agricultural RFA's: This RFA was awarded to six local NGOs: 1) Business Support Center (BSC), 2) Guria Agrobusiness Center (ABC), 3) Hazelnut Growers Association (HGA), 4) Imereti Agro Ecological Association, 5) Society Development Union, and 6) Shalom Club. The goal of these projects was to improve understanding of improved agriculture techniques and marketing to improve income opportunities of rural farmers.

Micro Group/Individual Loans: WGCMI received approval from USAID on July 7th, 2003 to award LINGO Constanta Foundation the *Economic Opportunities – Group Lending Initiative (GLI) RFA*. Project Goal: Constanta Foundation provided micro and small-scale business development opportunities to communities in Imereti, Samegrelo and Adjara regions. The main focus of this grant was to inject income generation, jobs and employment opportunities into the local community level. It also promoted sustainable and long-term socio-economic development for the communities in Imereti, Samegrelo and Adjara regions through bringing in a strong and well-proven group lending as well as individual lending schemes.

Indicator: # of jobs created

- 42 jobs created within the project implemented through the sub grant agreement RFA-GC3-001-SK to Foundation SUKHUMI, Imereti
- 365 jobs created within project implemented through the sub grant agreement RFA-GC2- 003-TB to LNGO Tamari, Samegrelo
- 70 jobs created within project implemented through the sub grant agreement RFA-GC7- 003-SS to LNGO Society Development Association, Imereti
- Within project implemented through the sub grant agreement RFA-GC9-001-DT up to 2500 jobs are sustained through the businesses funded by loans through the Constanta Foundation including owner-operators; More than 3,500 people, clients (including their family members) have improved their living conditions, Ajara, Imereti, and Samegrelo

Indicator: # of Micro-Enterprise Loan Borrows

Economic Opportunities - Group Lending Initiative (GLI) RFA: During WGCMI funded project life (23/07/2003-30/09/2004) Constanta Foundation's Kutaisi and Batumi Branches, through its **group lending** activities, disbursed a total of 563,600 GEL to 1,701 micro-entrepreneurs who represented 289 groups.

Indicator: # of individuals who receive loans

Economic Opportunities - Group Lending Initiative (GLI) RFA: During WGCMI funded project life (23/07/2003-30/09/2004) Constanta Foundation's Kutaisi and Batumi Branches through its **individual lending** program served 15 clients and disbursed a total of 42,872 GEL.

3.4 Stakeholder Relations**3.4.1 Networking and Representation**

During the reporting period, CARE staff worked closely with GSIF, World Bank and USAID to develop a partnership for the community mobilization activities under GSIF.

3.4.2 WGCMI Newsletter & Promotion of WGCMI Mission and Objectives

WGCMI is in the final stage of the successful development and implementation of a public relations campaign. This campaign was designed to meet the marketing, communication, and transparency needs of CARE's West Georgia Community Mobilization Initiative. It was also meant to serve as a catalyst to enhance the capacity of communities to become proactive in addressing their needs and attaining self-reliance. WGCMI has used both 'hi-tech' and 'low tech' information dissemination techniques to fully cover all project stakeholders, including local and international NGOs, government structures and direct vulnerable beneficiaries in communities. This has allowed CARE to be as transparent as possible in the implementation of this project. WGCMI used different media outlets, such as radio, TV and local national newspapers, its own electronic mailing list and electronic list serves maintained by other international NGOs, website, newsletters, informational brochures and leaflets, regional or district level stakeholders' conferences, media briefings, NGO round tables and informational meetings.

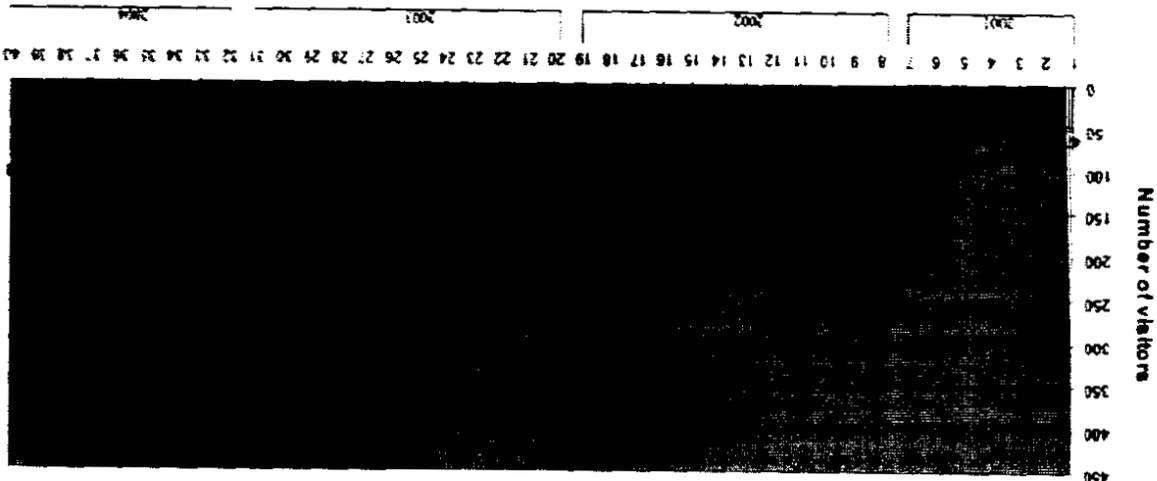
Information management, networking and dissemination

- Since its inception, there have been consistent improvements to the WGCMI project website and database, which has made it the most reliable means of disseminating current project information to all stakeholders, donors, and other NGOs. At the end of the WGCMI some additional features were added to the website such as 1) "WGCMI in the Regions" section and 2) contact information of all WGCMI mobilized CBOs/NGOs contact details, which has proven to be a useful tool for transparency and dissemination of information. (www.west-gcml.care.org.ge).
- **TraiNet Database:** Since its inception, WGCMI has provided up-to-date information on all training activities to World Learning for the TraiNet database.
 - * *TraiNet is a depository of all USAID-funded training worldwide*
- CARE Conducted nine Regional Stakeholders' Conferences in coordination with local partner CBOs/NGOs. The most active CBO/NGO leaders were invited to attend these conferences:

Date:	Event:	Location:	# Of Stakeholders
24.06.2004	Imereti Regional Stakeholders' Conference organized by WGCMI and its partner LINGO Abkhazinterkonti	Zestaphoni, Imereti	27
28.06.2004	Imereti Regional Stakeholders' Conference organized by WGCMI and its partner LINGO Abkhazinterkonti	Kutaisi, Imereti	30
30.06.2004	Samegrelo Regional Stakeholders' Conference organized by WGCMI and its partner Erani Foundation (VTJC)	Zughidi, Samegrelo	29
02.07.2004	Samegrelo Regional Stakeholders' Conference organized by WGCMI and its partner Erani Foundation (VTJC)	Senaki, Samegrelo	28
05.07.2004	Guria Regional Stakeholders' Conference organized by WGCMI and its partner LINGO Human Being and Environment (HBE)	Oruzgeti, Guria	26
07.07.2004	Racha-Lechkhumi, Lower Svaneti Regional Stakeholders' Conference organized by WGCMI and its partner LINGO Abkhazinterkonti	Ambrolauri, Racha	28
13.07.2004	Racha-Lechkhumi, Lower Svaneti Regional Stakeholders' Conference organized by WGCMI and its partner LINGO Abkhazinterkonti	Tsageri, Lechkhumi	27
16.07.2004	Ajara Regional Stakeholders' Conference organized by WGCMI	Batumi, Ajara	26
27.08.2004	Upper Svaneti Regional Stakeholders' Conference organized by WGCMI	Mestia, Upper Svaneti	26

- WGCMI disseminated more than 1500 copies of Transparency Posters to promote ATP (Accountability, Transparency, Participation) in three public locations within the Sacrebulo. These posters encouraged CBOs to be more accountable and transparent to community members and WGCMI.
- A total of nine Newsletters were drafted and disseminated to WGCMI communities and stakeholders. The Newsletters assisted WGCMI to be more transparent about its activities and supported transparency and information dissemination in rural communities, which was (and still is) sorely lacking. Furthermore, in order to support community mobilization, the 8th issue of the WGCMI Newsletter was printed along with the Universal Declaration of Human Rights (which was adopted and proclaimed by General Assembly resolution 217 A (III) of 10 December 1948).
- The WGCMI project website [www.west-gcml.care.org.ge]
Number of hits per month from the beginning of the project. There has been a steady increase in the number of hits. The peaks occurred especially around advertising RFAs (see below).

Visitors to WGCMI's Website: 40 Months
June 2001 - September 2004



Total number of hits from March, 2004: 1,028

Total number of hits from June, 2001*: 8,213

* Website was launched on June, 2001

Total number of hits including reloads: 10,809

> WGCMI Electronic Mailing List

Total # of subscribers: 528 (according to data of September 9, 2004)

Electronic Mailing List is also tied to and disseminated through Assistance Georgia (AG) List Serve. Advocacy List and Project Harmony's Alumni List Serve (more than 1500 subscribers).

Internet Links: Further, WGCMI has negotiated to have its logo and links of its website on some of the most popular non-profit web directories in Georgia: 1) assistancegeorgia.org, 2) advocacy.ge, and 3) transparencygeorgia.org - <http://www.gateway.ga>.

Press Releases

During the last six months WGCMI issued five Press Releases. Each Press Release was disseminated in electronic format through the WGCMI list serve (which includes Imcrest Regional Governor Office). Assistance Georgia and Advocacy Ge List serves during the last 2 years:

- Oct 10, 2003 WGCMI Community-based Voter Education (CBE)
- Feb 9, 2004 Agrarian Youth Clubs in Samegras Generate New Opportunities for Young People
- March 19, 2004 Feeding Program for Orphanages, Children's Institutions and Elderly Pensioners.
- April 6, 2004 Distribution of Donated Drugs to Communities.
- April 6, 2004 Distribution of Donated Drugs to Communities.
- June 25, 2004 Updated information on issuing grants
- July 15, 2004 Project "Chveni Sakhl'i"
- Aug 10, 2004 Economic Opportunities - Group Lending Initiative (GLI)

Television Program: GCM Documentaries (Mercy Corps and CARE)

In order to strengthen cross-program learning and maximize WGCMI's ability to promote its methodologies in communities, WGCMI made a training film which was aired by the First Channel of the

Georgian TV on March, 12, 2004 and after April, 2004 by the several local independent TV stations in the Western Georgia, such as: TV "Rioni 2" (Kutaisi), Cable TV "CaTV" (Kutaisi), TV "Imereti 2000" (Zestaphoni), TV "Odishi" (Zugdidi), TV "Guria" (Ozurgeti) and "Ajara TV" (Batumi).

The training film consisted of two separate parts. "Part One" explains to audiences the history, structure and methodology of GCMI USAID and how it is implemented, using examples from both Mercy Corps and CARE projects. "Part Two" of the film, which was aired by the local TV Stations specifically reflected on Care's activities independently (Mercy Corps had an entire episode dedicated to its program as well). "Part Two" provides more detailed information of the WGCMI, including how community representatives participate in the mobilization and grants process and the value of Accountability, Transparency, and Participation.

WGCMI film copies on the VHS videocassettes were presented to CBOs, local Government offices and local partner NGOs during the meetings and Stakeholder Conferences.

4. CARE OBSTACLES ENCOUNTERED AND LESSONS LEARNED

4.1 Community Mobilization Obstacles Encountered

The W-GCMI was able to mobilize 298 communities within its lifetime, which then allowed all CBO(s) to apply for a minimum of one project grant. Due to a slow project start up in year one and regional scope, time was an issues which forced mobilization to work faster and broader so as to allow newly formed CBO(s) the time to develop, present, implement and close projects, as well as apply for a second and third in some cases. Of the 298 CBO(s) mobilized W-GCMI was able to award 535 grants over the course of the project.

4.1.1 Community Mobilization

- In order for the W-GCMI to expand mobilization activities in Adjara and Svaneti it began developing a mobilization RFA process to allow local partners to assist implementation. Mobilization training was conducted for all partners along with monitoring systems with first RFA(s) beginning post October 2001. The W-GCMI also began assessing the feasibility of decentralization by opening three satellite offices and deploying its staff to the regions of Adjara, Samegrelo and Guria to support mobilization activities in those regions: these were done with one office in Batumi, Mestia and Zugdidi.
- Some individuals and local politicians created self-appointed CBO(s) to help them access W-GCMI grants to advance their own vested interest. This trend has been threatening the mobilization process in only a few communities and disrupting the active engagement of wider cross-section of community members. Therefore, a limited amount of Non W-GCMI mobilized CBO(s) were allowed funding as all also had to pass stringent project review approval and project implementation monitoring by W-GCMI staff.
- Lack of previous direct experience of LNGO partners in mobilization work, follow up workshops have taken place to support and build capacity to improve quality of mobilization activities. The Participatory Learning and Action (PLA) and Strategic Planning Workshop (SPW) approach has been reworked with partners with a focus on better problem analysis as well as civil society awareness training within the SPE module.
- Departure of the existing community mobilization manager occurred during this period with a gap of three months before the new manager arrived in January 2003.

4.1.2 Qualitative Analysis for CBO development

- The challenge of providing better qualitative measurement of mobilization activities was addressed this reporting period with the following management information systems developed:
 - Mobilization tracking system based on new formats
 - CBO monitoring and post assessment formats based on W-GCMI Log Frame Outputs with accompanying SPSS database
 - CBO Self Appraisal format to gauge trust, confidence, independence, etc with accompanying SPSS database
 - Organizational Capacity Assessment Tool (OCAT) developed to gauge the impact of the capacity enhancement workshops promoting better CBO organizational development by local partner CHCA – with accompanying database.

Grants Management Obstacles Encountered

4.2.1 Management

Staff Engagement in Communities - Project staff engagement at the community level is essential especially those that are located in mountainous areas. Communities in these areas are especially vulnerable as they have less contact with the larger society. A Grants Officer is almost like an emissary from another society to these villages. What the Grants Officer teaches is paid back 100% by these community members be it 1) training in bookkeeping, 2) grant management, 3) transparency with the bidding process, or 4) community mobilization. NOTE: A recommendation for future projects is to plan to have staff spend more time in these mountainous communities than in communities nearer to the main roads.

Increased Proposals & Grants = Increased Risk: W-GCMI has addressed this risk by executing a series of measures. This includes, but is not limited to: 1) Improving/updating grant documentation procedures, 2) Designing new site visit evaluation forms and translating them into Georgian so community members will be more aware of what they are being graded on, 3) Drafting and disseminating informational leaflets on the 'Micro and Small Grant Approval Process', 4) Providing a rough draft of official steps CARE-W-GCMI will take when accusations of corruption are made, 5) Continuing to be vigilant in the financial reconciliation process, 6) Making sure that the Community Mobilization process transparent and involves all community members, 7) Reperformance site visits to document the successes and weaknesses of sub grantees in the implementation of their sub grants, and 8) Making sure that communities are advertising in a public location the W-GCMI line item budgets, activity plan, and success indicators.

4.2.2 CBO Management

Throughout the life of the W-GCMI, the immediate obstacle in CBO management has been the need to start from scratch in rural communities and build the capacity from almost a zero level. CARE created a non-governmental sector CBO as a legal entity at the community level, which didn't exist there before. This was done in environments that thrived on apathy and mistrust, where local government was considered naturally corrupt, and an informational vacuum existed. The creation of a non-governmental sector was a way to ensure that resources reached the grassroots level.

Self Procurement Cost Savings: Based on a comparison of costs for materials services for projects undergoing CARE Central Procurement versus projects with CBO self-procurement for projects approved during grant cycles 1 and 2, W-GCMI experienced significant cost-savings from CBO self-procurement activities throughout the life of W-GCMI project

Consistent weakness of reporting for first time sub grantees: W-GCMI addressed this weakness by 1) Having Grants Officer provide a second financial training, 2) Requiring Community Mobilization RFA NGO winners to review and help CBOs with financial reports during their schedule site visits, and 3) Simplifying financial forms, which was done in the Oct. '02 - March '03 reporting period.

Taxation laws of Georgia: CBOs understanding of their taxation obligations and inexperience of paying taxes is weak, but stronger than before Grants Officers started their financial training. This obstacle has been addressed by W-GCMI through the initial financial training given to CBOs. In this training, CBOs were informed of what taxes they are obligated to pay and not pay. In order for the Grants Officers to do a better training, they underwent another taxation training seminar in 2004 to update them on any new taxation legislation as it applies to CBOs and NGOs.

Erratic electricity supply in rural areas, adverse weather conditions and harvest and planting seasons, continued to delay projects. W-GCMI attempted to better negotiate these delays by requesting CBOs to only submit proposals that are seasonally appropriate. The Proposal Review Committee also took into account how weather, harvest planting and seasonal conditions when approving projects.

Issues with Specific CBOs: W-GCMI had mobilization, financial transparency and misallocation issues with eleven CBOs during the project implementation period. Each of the issues was investigated and, if warranted, documentation was included in each of the projects files. The following is a list of some of the

CBOs: Alerti CBO Kitsia, Martvili, Samegrelo; Dagva CBO, Kobuleti, Ajara; Gorisa CBO, Gorisa, Sachkere, Imereti; Khutsubani CBO, Kobuleti, Ajara; Kvatakhti Development Union CBO, Chakhvingi, Zugdidi, Samegrelo; Marani CBO, Abasha, Samegrelo; Nagomari CBO, Guria; Nis CBO, Chitatskari, Zugdidi, Samegrelo; Sakhalkho Patriotuli Dzala CBO, Kobuleti, Ajara; and Zvari CBO, Bakhvi Community, Guria.

Governmental Relations: In August 2004, CARE received a request from David Todua, Investigator, Abasha District Procurator Office, on two school rehabilitation projects funded by CARE in Abasha (Sephieti and Norio communities). CARE provided Mr. Todua with pictures taken of the school before the projects implementation.

4.2.3 CBO Implementation Delays and The Unsolicited Grant Process

Awarding Micro/Small Grants: W-GCMI was unable to award all of the planned 550 Grants (it only awarded 535). This occurred because of: Delays related to startup of W-GCMI resulted in fewer than anticipated projects at the end of the first year. Other reasons were: 1) Rose Revolution, 2) Uncertain security situation in Western Georgia before/during/after elections, 3) Blockade in Ajara, and 4) Delays in the first year and a half of the project.

Ajara - On March 13th 2004, the Cholokhi border was closed to the President of Georgia for several days. After this, it was impossible to transfer funds through banks in Georgia for several weeks to the bank accounts of NGOs and CBOs in Ajara. This temporarily delayed W-GCMI activities in the region.

Mountainous Areas - Every winter's heavy snows consistently delayed CBO projects being implemented. The longest delays occurred in Upper Svaneti, Racha-Lechkhumi & Lower, and Ajara. W-GCMI attempted to address this issue by focusing on having a special Grant Cycle (M) for mountainous regions.

4.2.4 Local NGO Management

W-GCMI addressed each of the obstacles that came up affecting RFA Management. We have managed to address the concerns of NGOs by making the RFA process more transparent. For example, between one and five RFA informational meetings were conducted for each of our RFAs (the number of information meetings depend upon the type of grant being offered). A FAQ (list of Frequently Asked Questions) was composed and given out in other RFA meetings, sent by e-mail to interested RFA applicants. This has enabled W-GCMI to improve competition for RFAs by providing an accessible and transparent questions and answers forum.

Grants Officers who supervised NGO RFA grants had quite a work load and sacrificed the quality of their work when sitting with NGO RFA winners and going over simple mistakes. CARE attempted to rectify this issue by having the Kutaisi Assistant Accountant fully involved in the NGO RFA reconciliation process. This gave Grants Officers supervising NGO RFA projects more time to do site visits and monitor and evaluate projects.

The majority of RFAs were awarded in 2003. This created an increase in the workload of Grants Officers. In order to alleviate the workload, two Grants Officers were hired to work specifically on RFA Grants to NGOs and a NGO Grants Coordinator was hired.

4.3 Lessons Learned

The Lessons Learned outlined below focus on four sectors directly related to the W-GCMI and were developed in preparation of the Lessons Learned Workshop held on July 31st in Adjara.

4.3.1 SUSTAINABILITY

Program/Benefit Sustainability

Achievements

- Developed sense of ownership in beneficiaries of 363 communities Trust has been built;
- Sustainability maintenance funds (~ 57 984 GEL) in place in approx. 300 communities;
- Implementation of complementary projects by other local and international NGOs in 35 communities (SBS projects, provision of medical and school equipment by Counterpart International, issuing loans by Constanta);
- Community initiatives increased (for maintaining and developing results) Self-help projects implemented in approx. 250 communities;
- Other alternative donors have been identified (Projects implemented by other donors, LG and parliamentarian as well as the private sector support, proposals submitted to BPRM program)
- W-GCMI covered all West Georgia regions

Challenges

- Poverty existed in the communities (lack of resources);
- Private sector involvement still remains problematic;
- Limited information about other Donors/ Fund raising is not fully applied;
- Program/Benefit long term vision is not clearly defined;
- Lack of CBO implemented income generating projects;
- Multi phase projects were submitted, but only 1st phase projects received funding and as a result program/benefit sustainability was not obtained;
- There are still communities that W-GCMI has not yet covered.

Organizational Sustainability

Achievements

- 363 CBOs have a well designed by-laws and flexible organizational structure procedures;
- CBO-NGO Coalition Networking in Imereti, Guria & Samegrelo (6 coalitions established);
- CBO image/Trust increased (Partner of choice, respect from LG, NGO);
- Approximately 300 CBOs capacity/ Leadership skills strengthened through the Organizational Development, Capacity Enhancement, CTC and Advocacy trainings;
- Strategy/ Clear vision Developed in at least 100 CBOs
- Local capacity of 33 LNGOs strengthened through 8 different RFAs

Challenges

- Coalition Networking is not still stable/widespread in all regions;
- Not implementing the last projects negatively affected CBOs image in the communities;
- CBOs cannot transfer skills efficiently (advocacy, accounting, etc);
- Limited information about other donors
- Recent mobilization process in Racha-Lechkhumi, Svaneti and Ajara (CBOs still didn't get trainings in organizational development, etc)

Financial Sustainability

Achievements

- All 300 internally mobilized CBOs have capacity to develop quality proposals and get funding;
- At least 100 CBOs are aware of and have capacity to apply fund raising principles;
- Diverse human/labor resources (contributions from LG, local skilled/unskilled labor, material, equipment);
- Financial Transparency (increased trust makes easier to collect fees)

Challenges

- Limited information about other donor;
- Absence of services with fees;
- Lack of donors' interest in funding income generating projects;
- Community poverty/ limited public and governmental funds;
- Non existence of small business;
- Poor legislation basis;

Resource Basis Sustainability

- 363 CBOs have clear vision of their community local resources;
- At least 100 CBO have plans to access additional resources for their community further growth;
- CBOs are not dependent on just CARE, but have successfully received funding from other sources (donors, LG, community, private sector);
- Approximately 300 CBOs capacity/ Leadership skills strengthened through the Organizational Development, Capacity Enhancement, CTC and Advocacy trainings;
- About 150 CBOs implemented Self-help projects;
- Community/region Poverty: After finishing W-GCMI some CBOs perhaps give up collecting fees on a regular manner;
- Rare cases of existence of services with fees;
- Limited access to information;
- Rare cases of charity cultural events.

4.3.2 TRANSPARENCY/PARTICIPATION

West GCMI serves as a catalyst to enhance the capacity of the communities to become proactive in addressing their needs and attaining self-reliance

Challenges

- Lack of Information on the Regional and District Level when W-GCMI started;
- Insufficient coordination cooperation with local government: misinterpretation of the functions of Government and Non-governmental Sectors by Government Representatives

Achievements

- Regional Stakeholders Conferences, Info-sharing meetings, Newsletters and Brochures, CBO Transparency Boards;
- We have increased coordination with Sacrebulos and District Government lately in order to attract their assistance for closing up problem communities.

Challenges

- No person responsible for technical progress of the project;
- Not realistic Community Contribution -necessary minimum 25% was increased up to 35-40%. That sometimes was unrealistic and later it became like requirement of W-GCMI to have 35% of community contribution, even for the 1st projects.

Achievements

- Temporary solution: GOs and CMOs asked for engineer's assistance in special cases;
- Additional efforts investing more time and recourses by GOs and CMOs to solve the problem.

Challenges

- Lack of flexible procedures and criteria for IDP projects (cost per beneficiary, project duration, etc – should have used individual approaches as much as possible;
- Overloaded tasks per staff.

Achievements

- Some IDP projects were funded;
- Minimum resources – maximum advantage.

Challenges

- Not so strong and adjusted financial reporting system for NGOs especially in bidding and financial accounting

Achievements

- Local NGOs/CBOs were introduced to CARE's financial procedures that NGO sector adopted very effectively and used even with the other donor (ex: Racha-Lechkhumi Lower Svaneti Sacrebulo Association used the system to report to Eurasia Foundation and was granted)

Efforts of W-GCMI Staff facilitated much in raising trust in the communities. W-GCMI objectives were to give CBO communities a sense of responsibility and power for their future and feeling of ownership by providing skills trainings; increased capacity through projects initiated by CBOs and increased CBO NGO organizational development to address Policy issues at the District level and beyond. The criteria for all projects therefore stemmed from those qualities needed for CBO formation, community involvement and sustainability.

These were: ACCOUNTABILITY, TRANSPARENCY, PARTICIPATION for each project proposed to W-GCMI.

4.3.3 PARTICIPATION**Community residents' participation during community meetings**Achievements

- 31805 community residents form 294 communities participated in community meetings that is consist 5.2 % of 601901 people living in these communities. They were actively involved in decision-making and prioritization process and showed the evidence that they CARE about their own village.

Challenges

- LG tried to influence population and manage community meetings.
- Not enough participation from women, youth, elderly and vulnerable groups in solving of community problems (Reasons: Lack of trust and initiative. Old communist mentality. Too much dependency on Government. complex to take more personal initiatives and responsibilities. Community residents often interrupted each other's speeches)

Community residents' participation during project implementation

Achievements

- 481 projects implemented by CBO.
- 53 projects under completion.

People contributed their labor, material resources, everybody wanted to contribute something to the joint project. Women prepared food for men who worked on the project.

Challenges

- Not very active participation of community residences during implementation of first MP project (Reasons: Old communist mentality. Lack of trust, and accountability. Delay with approval of MP projects. Seasonal agricultural activities. Disasters. Not enough experience of CBO board members in finance management and project implementation. Lack of PR experience)

Community, Local Government and Private Sector contributions.

Achievements

- Community contribution 41 % (instead of required 25%)
- LG and PS contribution 11 %

Challenges

- Nascent collaboration with Government and Business sector on regional and district level.
- Very little contribution from wealthy individuals in the communities.
- Weak PR strategy.

Capacity Enhancement Trainings

Achievements

- Approximately 650 people from 160 CBOs participated and boosted their skills in leadership and teamwork, problem solving and decision-making, organizational development, strategic planning and financial management.

Challenges

- Participation of CBO members was not satisfactory during first Capacity Enhancement Trainings, because of the remoteness of venue. This was considered during second stage of trainings: as a result, # of participants increased.

Capacity Enhancement of Local NGOs

Achievements

- CARE has worked with total # of 33 LNGOs. During 4 years of our relationships, we gave them possibility to strengthen their capacity and become stronger and much more sustainable in the future. As a result, in new GEII our strategy is based on partnership with LNGO.
- Some evident examples of this are that last Stakeholders Conferences were organized by LNGOs in some regions (CARE gave only funding); LNGOs are now independently performing mobilization process; one component of BPRM project 'Chveni Sakhli' is fully performed by our partner 'Erani' (CARE maintained only monitoring and training functions).
- Now they apply in practice policies and procedures that are common in CARE: financial procedures, bidding system, reporting.

Challenges

- LNGOs are not delighted with the stage of partnership with CARE (sub-contractor level of partnership, desired: full partnership on equal basis). Some did not perform as good, as it was initially expected by CARE (delays in reporting, not very strong financial management, organizational capacity).

Basic Advocacy Training

Achievements

- Approximately 600 people from 293 CBOs participated. As a result advocacy helped them to protect their rights (require free services they were supposed to get from the state) and collaborate with government and business structures.

Challenges

- Only three coalitions from 5 regions were created in Samegrelo, Imereti, and Guria that implemented advocacy initiative.
- Not strong enough qualitative tracking systems were in place to document what was learnt and no follow up to see if CBOs initiated their own advocacy campaigns.

CBOs participated in Stakeholder conference.

Achievements

- Approximately 270 CBOs from 5 regions of western Georgia participated in stakeholders conferences organized by W-GCMI regarding Future Sustainability and life after CARE.
- Experienced LNGOs were invited to share lessons learned and advice on some challenging issues.
- Conferences served as a great chance for cross learning and establishing partnering links between CBOs (Some of them created coalitions and jointly applied with projects to CARE and other donor organizations).
- W-GCMI issued the CBO phonebook including contacts for all W-GCMI mobilized CBOs.

Challenges

- It's a good opportunities for CBOs to share lessons learnt among themselves, but challenge is that how many CBOs will implement ideas expressed during Stakeholders Conferences and how findings will be reflected taken in consideration by donor in future programs.
- Stakeholder conferences were meant to allow for cross learning and to learn – did it happen.

4.3.4 ADVOCACY

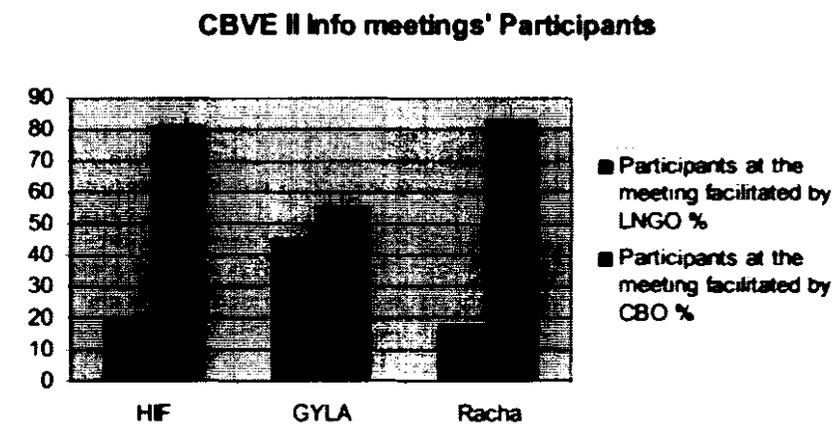
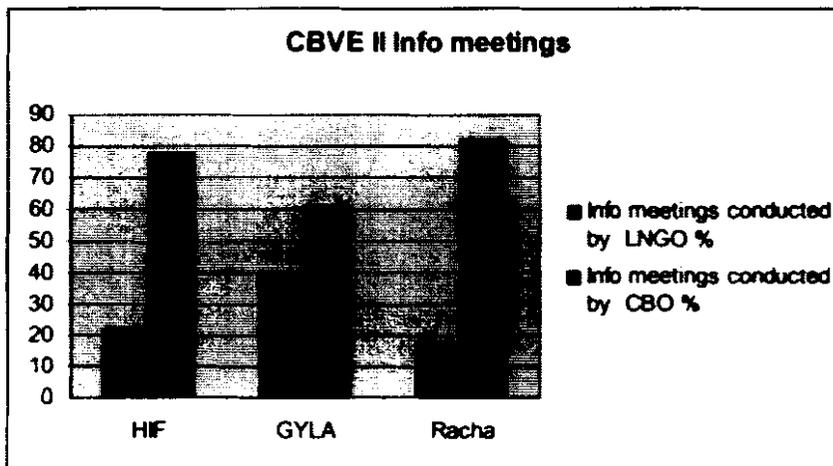
Achievements

- Basic Advocacy Training for approx. 293 CBOs (600+ people);
- Board of Trustees, West Georgia Secondary Schools – 5;
- Newsletter articles on Human rights & Distribution Social policy booklets;
- CBO members campaigned local government & business to receive funding for projects implementation;
- Local government and Problem Projects help W-GCMI close out problem projects (in hope of receiving future projects);
- 6 Social Policy Working Groups grants funded:
 - Imereti Advocate for the adequate financing of ambulatory healthcare services from the local budgets of Baghdati, Tskhaltubo and Terjola Districts;
 - Guria Advocate for the implementation of the public healthcare programs and allocation of the adequate funds from the local budget for the execution of social security programs;
 - Samegrelo Save the Children without care in 4 Rayons of Samegrelo Region – Zugdidi, Tsalenjikha, Khobi and Chkhorotsku;
 - Imereti Communities advocate for better quality of water;
 - Guria Every child has rights to live in a safe environment;
 - Samegrelo Maintain decentralization of education system in Samegrelo and Upper Svaneti regions
- Health and Social Welfare RFA projects:
 - Samegrelo, Zugdidi - “Day care center for the Children with Disabilities”
 - Community Integrated Management of Childhood Illnesses – “rights-based thinking” into all aspects of child and adolescent health and development
 - Samegrelo – Pre-school education project, LNGO “Aegis” – Regional Budget allocated the money for kindergarten schoolteachers.
- Voter Education through RFA in all regions of West Georgia:
The West Georgia Community Based Voter Education Initiative II has been designed to increase active participation of vulnerable groups in community based voter education initiatives in five regions (Guria, Imereti, Samegrelo, Racha-Lechkhumi & Lower Svaneti and in Adjara) of Western Georgia in order to raise community awareness about voting and election processes, voter rights and responsibilities and the responsibilities of the office of the Parliament; build capacity at a local level in the area of public information dissemination; and develop sustainable mechanisms at the local level.
- IFES LTD held trainings for LNGO staff and prepared 70 trainers total. Including:
 - 18 trainers from Euro-Caucasian Cooperation Association
 - 15 trainers from Racha-Lechkhumi & Lower Svaneti Sakrebulo Association
 - 12 trainers from Teachers Union Education and the World
 - 8 trainers from Young Lawyers Association
 - 17 trainers from Helpers International Foundation
- 4,324 Information Meetings were held in 307 rural communities and district centers of Samegrelo, Racha-Lechkhumi & Lower Svaneti, Imereti, Guria and Ajara AR
- 59 IDP collective centers of Samegrelo, Imereti and Ajara AR;
- High number of direct beneficiaries was achieved by efforts of Racha-Lechkhumi & Lower Svaneti Sakrebulo Association and Euro-Caucasian Cooperation Association through the improved planning, accounting and reporting at the community level.

Summary of Achievements

Activities	Planned	Actual	Difference
Community village	306	307	1
IDP Centers	35	35	0
Community Meetings/ CBO & LNGO		4324	4324
Leaflets	106600	124930	18330
Community Trainers	1470	1298	-172
Total Beneficiaries	96725	107178	10453

LNGOs	Info meeting conducted						# Info meetings' participants					
	Facilitated by CBO		Facilitated by LNGO		Total		Facilitated by CBO		Facilitated by LNGO		Total	
	Number	%	Number	%	Number	%	Number	%	Number	%	Number	%
HIF	935	78	263	22	1 198	100	26845	81	6150	19	32995	100
GYLA	59	61	37	39	96	100	1871	55	1502	45	3373	100
Rocha	1076	82	236	18	1 312	100	24819	83	4953	17	29772	100



> 1,290 community voter educators' knowledge increased in voter education and registration rules and capacity strengthened to facilitate community meetings.

- More active voter participation of West Georgian citizens who participated in 4,324 meetings in 307 communities:
- ECCA reported 80 percent and HIF reported 85 percent of CBO representatives carrying out voter education activities demonstrate improvements in voters understanding of their rights, responsibilities and voting procedures.
- As a result of the project, LNKO ECCA, "ERANI" Foundation and 50 CBOs of Siegel region formed the coalition movement for democracy.
- All NGOs reported that close partnerships were established between CBO representatives and Precincts Elections Committee members.

Challenges

- Basic Advocacy Trainings – Measuring Results, Apathy, Rose Revolution
 - a. Difficulty measuring what participants learned in Basic Advocacy Trainings and implemented
 - b. Getting villagers to dare to speak out in Sacrebulo
 - c. Rose Revolution – made it more difficult to do campaigns as old government left.
 - d. CBOs only recently woke up - People still don't know about rights
 - Informational Vacuum Still a long way to go in getting info on new laws to people
 - Government Based Approach vs. Community Based Approach
 - Local Government Responsibilities & Rights, role is still unclear for them
 - New government has very little info on CARE activities
 - Keeping local government from Hidden Manipulation in mobilization & prioritization process
 - Only first step taken to start Attitude Change in communities CBO-s
 - Right Based Approach
- Lack of knowledge of advocacy and rights based approach in LNKO;
- RFAs did not address require RBA and advocacy to be included as part of the proposed project activities.

5. HEALTH AND SOCIAL WELFARE INITIATIVE - IMPLEMENTED BY INTERNATIONAL MEDICAL CORPS

5.1 Management and Administration

The Health and Social Welfare Unit consisted of five staff from International Medical Corps; the HSW Advisor and four HSW officers. The HSW unit was integrated into the CARE W-GCMI team and functioned as part of the CARE implementation staff. The IMC country director was also involved in the W-GCMI program and provided management and administrative support to the HSW advisor and officers.

However, the HSW advisor and unit reported directly to the CARE W-GCMI management team and were fully accountable to the CARE staff for the implementation of the HSW activities. This allowed for more flexible management and greater efficiency. It also created a more symbiotic team environment within the W-GCMI team.

During the four years of implementation there were several key staff changes within the HSW unit that were approved by CARE and the USAID office in Tbilisi. The table below provides details about each key staff person, their role, and the duration of their involvement in the W-GCMI.

Table 2: HSW Unit Key Staff

Position	Staff person	Duration
Country Director	Naim Ismail, MD	1 year (Sept 2000-Jan 2002)
Country Director	Carol Jacobsen, MPH, RN	1 year (Jan. 2002-July 2003)
HSW Advisor	Friedl Van Den Bosch	1.5 years (Jan 2001-June 2002)
Country Director/HSW Advisor	Liviu Vedrasco, MD, MPH, RN	1.5 years (Sept 2002-June 2004)
Regional Director	Adam Sirois, MPH	2 years (June 2002-Sept 2004)
HSW Coordinator	Nana Pruidze, MD	2 years (June 2002-Sept 2004)

Starting in September 2002, IMC hired Dr. Liviu Vedrasco as the Country Director in Georgia. He served as the country director and HSW Advisor. IMC also hired Dr. Nana Pruidze to serve as the HSW coordinator. Dr. Pruidze served in a complimentary role to the country director/HSW Advisor. During her work with the HSW unit, Dr. Pruidze's management, planning and program implementation, and reporting skills developed and improved under close support from the IMC country director.

5.2 Scope of Work for the Health and Social Welfare Unit

The W-GCMI is a complex community and regional development program. In order to implement effective and sustainable community based investment projects, technical assistance, training, and capacity building in terms of health and social services need to be incorporated into infrastructure rehabilitation and construction projects. It was the role of IMC to manage the HSW unit and provide support to community based organizations, sakrebulo, local NGOs, and regional government authorities to create effective social service initiatives that could be sustained by local resources. These social services would compliment the activities of the CARE community mobilization unit and infrastructure development projects.

The following paragraph is taken from the CARE W-GCMI proposal designed in response to the USAID RFA:

IMC's contribution to this project will focus on the health sector and associated areas of sectoral expertise such as public health education, community-based health care financing through cost-recovery mechanisms, social services for the elderly and disabled, rational drug use, maternal-child health, primary health care, capacity building for local health oriented NGOs, and capacity development of the Ministry of Health (MoH) at the regional level. All

health components of Community Mobilization and Grants Management activities will be developed and implemented by IMC, whose sectoral expertise will also be fully utilized in the elaboration of the base-line survey and the subsequent design and development of RFAs under the Grants Management component. The monitoring of local NGOs, CBOs and others awarded a health-related grant will likewise be carried out by the IMC Health and Social Welfare Advisor to the West GCMI.

IMC, together with CARE and thirteen local NGOs, successfully worked in each of the sectors listed above and developed the internal capacity of a wide variety of community, district and regional government and civil society structures institutions.

As stated in the executive summary, the role of the HSW unit evolved over time in direct response to the types of activities that were needed by CARE and by the local communities and beneficiaries. During the W-GCMI, IMC and CARE elaborated a special list of accountabilities for the HSW unit. The HSW Accountabilities are provided in Annex 8 and provide a detailed Scope of Work for all key activities conducted by the HSW unit.

5.3 Accomplishments of the Health and Social Welfare Unit

The main accomplishments of the HSW unit cover five key areas:

1. Health and Social Welfare RFA Projects
2. Participation in the community mobilization process
3. Improvement of Primary Health Care Services in the W-GCMI Communities
4. Consultancy and Evaluation
5. Coordination

A table that provides information on the key program indicators related to the HSW unit is provided below and demonstrates the impact of the HSW activities.

Table 3: Accomplishments of the HSW Unit and LNGOs per indicator

Indicator	Achieved by HSW Unit	Achieved by LNGOs (RFA)	Achieved Life of Project
Outcome/ Effect # 2: Improved basic services to vulnerable communities			
<i>Number of Vulnerable House Holds/ Beneficiaries with improved access to basic services</i>	HH: 321,443 Men: 138,848 Women: 147,974 Children: 92,688 IDP: 21,213 <i>*This numbers represent from all health related projects covering whole W-GCMI since 2000.</i>	HH: Men: Women: Children: IDP:	HH: 321,443 Men: 138,848 Women: 147,974 Children: 92,688 IDP: 21,213
<i>% change of utilization rates</i>	HH: 15%-20%	HH:	HH: 15%-20%

<i>for Primary Health Facilities</i>	Men: 10% Women: 15% Children: 20% IDP: 10%	Men: Women: Children: IDP:	Men: 10% Women: 15% Children: 20% IDP: 10%
Outcome/Effect # 3: Civil Society Integration of Services			
<i>Number average amount of community funds established with local resources</i>	<i>Not Applicable</i>	No: 13 CBHF Amount raised: \$ 3 643.00	No: 13 CBHF Amount raised: \$ 3 643.00
<i>Average amount of community, local government and private contributions per LNGO project</i>	<i>Not Applicable</i>	No: 5 HSW RFAs (13 LNGOs) Grant Awards Ave. contribution: \$17820.57 % of total grant fund: 39.55%	No: 5 HSW RFAs (13 LNGOs) Grant Awards Ave. contribution: \$17820.57 % of total grant fund: 39.55%
Outcome/Effect # 4: Economic Activity			
<i># of jobs created</i>	<i>Not Applicable</i>	Men: 60 Women: 60 Youth: 53 IDP: 67 Total: 230 (VTJC - CIF)	Men: 60 Women: 60 Youth: 53 IDP: 67 Total: 230 (VTJC - CIF)

5.4 Health and Social Welfare RFA Projects

The design and solicitation of special Request for Applications (RFA) to provide targeted social services to vulnerable groups was a critical component of the W-GCMI. Planning for the RFAs started in September 2002. During the period from September 2002 until June 2003, IMC worked together with CARE, USAID, UNICEF, Open Society Institute (Step by Step program), government agencies, and local NGOs to develop sectoral RFAs to meet some of the most urgent welfare needs of program beneficiaries in west Georgia. Many of the LNGO programs introduced innovative and unique interventions to introduce and promote community based social services.

IMC developed four separate RFAs for health and social programs:

- (1) Community Based Health Finance
- (2) Community Based Health Education
- (3) Community Based Social Services
- (4) Community Integrated Management of Childhood illnesses
- (5) Step-by-Step*

* The Step-by-Step program was not solicited, as the only possible implementing agency that could carry out the project was the Center for Educational Initiatives, a LNGO that works with OSI to conduct SbS programs in the Tbilisi area.

The goal of the RFAs was to produce multi-dimensional projects that could be integrated into the on-going W-GCMI activities. The RFA projects produced added value through the capacity building of LNGOs, communities, and local government institutions in democracy, good governance, anti-corruption, institution building, fundraising, and economic development. These were benefits that complimented the stated goal of the RFAs to promote better health and social services, including better education for young children.

A total of 13 grant awards were provided to 11 LNGOs under the W-GCMI HSW unit. This included two consortium grants; one for health education and one for the Social House in Ozurgeti, a mental health project. A total of \$450,597 USD was awarded to LNGOs under the RFA solicitation. Of this amount, LNGO contributed \$164,906 USD (or 39%) in cash, labor, materials, logistical support, transport, and other in-kind. In addition to improving health and social services and conditions for people in west Georgia, the RFA projects also improved economic opportunities by producing jobs. A total of 230 jobs were created for beneficiaries through two LNGO projects; The Vocational Training and Job Center project and the Community based health finance project implemented by Curatio International Foundation. Sixty men, sixty women, 53 youth, and 67 IDPs gained valuable skills and found employment through the RFA projects. Jobs ranged from accountants to car mechanics and included positions in local companies and community based, non-profit organizations.

Table 4, below provides a detailed breakdown of the RFA projects in terms of type, grant amount, LNGO contribution, and geographic area.

Table 4: Summary of HSW RFA Projects

Project Type	ENGO and/or Organization	Project Title	Regions	Beneficiaries		Program Funding		Project Goal
				Direct	Indirect	W.C.C.M.I.	ENGO Contribution	
Community Based Health Finance	Curatio International Foundation	Community Based Health Financing	Imereti; Samegrelo; Guria	6 033	32 500	\$ 74 395	\$ 10 571	To decrease financial access barriers trough establishing Community managed and operated schemes that mobilize community financial resources on a pre-paid basis.
Integrated Management of Childhood Illnesses	Clartias XXI	Community integrated management of childhood illnesses	Imereti; Samegrelo; Guria	40406	100 402	\$ 49 739	\$ 5 648	Decreasing level of mortality and morbidity caused by childhood illnesses.
Step-by-Step Primary Education Development Project	Center for Educational Initiative	Step by step project in west Georgia	Imereti	960	4 674	\$ 40 000	\$ 30 000	To prepare children to live and be successful in the rapidly changing world, develop and maintain the desire for lifelong learning.
Community Based Health Education	Grassroots Support Center, Patient plus, Intersectoral research center	Community health education project	Samegrelo, Upper Svaneti, Imereti, Guria Adjara, Racha-Lechkhumi	18 000		\$ 121 317	\$ 35 446	To improve community members knowledge on key health issues
Community Based Social Services	Association Child and Environment	Operation of Chiatura Youth Center "Jejili"	Imereti	150	280	\$ 21 489	\$ 6 456	Psychical and social rehabilitation of the children living in the poorest families.
	Georgian Association of Mental Health Social House, First Step, Patient +	Social House-"First Step"	Guria	86	130	\$ 32 858	\$ 8 630	To improve of life of mentally disabled people in Guria region

Project Type	INGO and/or Contractor	Project Description	Region	Beneficiaries		Program Funding		Project Goal
				Direct	Indirect	W. GA. MI	INGO Contract	
First Step		Pilot project for integrated teaching of mentally disabled children in Zugdidi	Samegrelo	64	60	\$ 24 486	\$ 26 600	Full integration of disable children into the society.
Aegis		Social protection of children in Samegrelo	Samegrelo	260	360	\$ 20 740	\$ 9 490	Childcare trough sustainable support of pre-school education in 3 communities of Samegrelo.
Vocational Training & Job Center		Improving economical situation of socially vulnerable population	Imereti	300	480	\$ 25 648	\$ 11 080	To improve the economical situation of the vulnerable people by the professional training
Psychometric & Consulting association		Education and mobilization of patients with epilepsy in West Georgia	Imereti	1,200	540	\$ 25 956	\$ 7 964	Development of medical and psychosocial support system for persons with epilepsy.
Association "Tamari"		Community Based Social Services in Samegrelo and Upper Svaneti	Samegrelo	600	860	\$ 18 876	\$ 13 020	To relieve the most pressing problems of 500 vulnerable youth, to provide daily in-home services for vulnerable elderly in 15 villages of Samegrelo and Upper Svaneti.
TOTALS:				1,224	1,306	130,906	40,154	

CARE International in Georgia West Georgia Community Mobilization Initiative

Each LNGO project is described individually in *Annex 7: LNGO project overviews*. The project overviews provide a snapshot of the project and focus on the key information including:

- (1) The health and/or social need
- (2) Impact outcomes
- (3) Role of the community and other local stakeholders
- (4) Grant funding from W-GCMI
- (5) LNGO contribution
- (6) Sustainability plan and independent fundraising by the LNGO to compliment and expand the project

In addition to the project overviews, each LNGO submitted a final report of their project to the HSW unit. The final reports were all completed on time and provide more detailed information about the project. The quality of the reports was enhanced through training from HSW unit staff. These final LNGO reports as well as the RFAs, application guidelines, and LNGO proposals can be provided upon request.

RFA Coordination Meetings

Coordination Meeting of Local NGOs and Local NGO consortia Implementing Community Health Education Project

Several coordination meetings with NGOs implementing the Community Health Education RFA projects were organized by W-GCMI in Kutaisi. The coordination meetings were attended by representatives of Claritas XXI, Patient Plus, Grassroots Support Center, Intersectoral Research Group, IMC and CARE. The purpose of the meeting was to discuss project implementation status, constraints in project implementation and ways to improve the coordination among the NGOs implementing HE projects, W-GCMI and the implementing partners.

Representatives from the LNGOs made presentations about their accomplishments within the first months of the project and their future plans.

Coordination meeting of CBSS NGOs

Several coordination meetings of Local NGOs implementing Community Based Social Services (CBSS) RFA projects were organized by W-GCMI in Kutaisi.

The following CBSS projects took part in the meeting:

- Association Child and Environment - "Chiatura Youth Centre" project.
- Psychometric and Consulting Association - "Mobilization of People with Epilepsy and their Health Education" Project
- Vocational Training and Job Centre (VTJC) Imereti - "Improving economical situation of the Socially Vulnerable People".
- Children and Mothers Support Organization "Tamari" - "Community Based Social Services in Samegrelo and Upper Svaneti"
- Association "Aegis" - "Social Protection of Children in Samegrelo and Upper Svaneti".
- Georgian Association for Mental Health - "Social House- First Step"
- The First Step Foundation (TFS) - "Pilot Integrated Studies for Children with Disabilities in Zugdidi".

The coordination meetings were attended by many different stakeholders. Among them were representatives of the LNGOs, local health authorities, representatives from Imereti Regional Department of Social Welfare, CARE, IMC and Horizonti Foundation staff members, TV and newspaper representatives.

The purpose of the meetings was to discuss projects' implementation status, constraints in project implementation and the ways to improve the coordination between the LNGOs implementing CBSS projects as well as between W-GCMI and CBSS implementing partners.

The meeting provided an important forum for information exchange, sharing of lessons learned and best practices, networking and public relations.

5.5 Participation in the community mobilization process

The IMC Health and social welfare unit actively participated in the mobilization process of W-GCMI targeted communities. In the initial phase of the W-GCMI process the Health and Social Welfare Officers (HSWOs) directly predicated in the community mobilization process using the pre-defined strategies and mobilization tools. At the follow-up phase, the mobilization was conducted by the Local NGOs that were trained by IMC HSW unit on mobilization for health methodology.

Health and Social Welfare Guidelines and Assessment Tools for LNGOs

The HSW sector developed a set of guidelines and assessment tools for LNGOs. It is designed to facilitate NGO CBO/community groups to make a comprehensive assessment of health and social welfare issues and to incorporate them into community development planning. The guidelines and tools helped the LNGO community mobilizers in the project identification and design processes.

The key areas included in the guideline helped identify, describe and evaluate priority health and social concerns. The indicators described were used to write a narrative description of the particular situation. The guidelines helped to identify and develop the potential project and assist in the design of the project.

The guidelines and assessment tools include the following:

1. Health and social welfare guideline (why is HSW important?)
2. Community Social Assessment form
3. Ambulatory checklist form
4. Ambulatory building codes and standards
5. Health focus group discussion tool
6. School checklist form
7. School building codes and standards
8. Water supply system form

** All forms and tools can be provided upon request.*

Induction trainings for LNGOs on HSW issues and guideline application

HSW officers conducted induction sessions for community mobilization local NGO (LNGO) RFA winners on the following topics: ambulatory, school and social assessment and organization of the health focus group discussions. The following issues were discussed during the workshop:

- Introduction of the HSWU's role and objectives
- Introduction and instruction of the School, Ambulatory and Social Assessment Forms
- Introduction of recommendations for Ambulatory, Water System, School, and Kindergarten rehabilitation projects and training of their use in proposal development

- Introduction of the Essential Equipment list for Ambulatory projects
- Introduction of the Asbestos and Asbestosis educational materials
- Monitoring and Evaluation (success indicators for HSW related MPs)

HSW officers disseminated the guidelines to all three community mobilization LNGOs in Imereti, Guria and Samegrelo.

HSW officers conducted follow up visits to these LNGOs. Special sessions were arranged with LNGO staff to discuss their experiences with the HSW tools and separate field visits were done to crosscheck their performance. After training and monitoring, LNGOs were able to perform the HSW assessments with a high degree of effectiveness.

Short-Listing of LNGO proposals

The HSW Officers actively participated in the short-listing unsolicited proposals submitted from all five regions of western Georgia. The team composed of Community Mobilizers, Grants Officers and HSW Officers short-listed the proposals using the pre-established criteria for the evaluation of unsolicited proposals.

Pre-evaluation site visits

Health and Social Welfare officers participated in the appraisal of unsolicited proposals submitted by CBOs. They visited the project sites, together with the team of community mobilizers and Grants officers. They reviewed proposal documents and assessed the organizational capacity of the CBOs, gave recommendations to CBOs on the application of the hygiene and sanitation norms for the health and social welfare related micro-projects. A summary of site visits to LNGO-mobilized and W-GCMI-mobilized communities and communities that presented unsolicited proposals is presented in the table below:

Table 5: Pre-evaluation site visits

Region	School rehabilitation	Ambulatory rehabilitation	Kindergarten rehabilitation	Water supply system rehabilitation	Cultural House/multi purpose rehabilitation
Imereti	48	18	2	13	37
Guria	21	14	-	12	11
Samegrelo	53	25	4	15	12
Lower Svaneti	18	-	-	1	4
Adjara	41	8	-	4	5
Racha-Lechkhumi	9	3	-	15	2
Total	190	68	6	60	71

During the pre-evaluation site visits, HSW Officers conducted school, ambulatory and social assessments in all of the communities using the pre-developed schools, social and ambulatory assessment forms.

The HSW Advisor, Coordinator and Officers participated in all cycles of Proposal Review Committee (PRC) meetings and the PRC meeting for Social Protection RFA micro projects. HSW Officers gave presentations on their field findings. During the meetings, recommendations for the implementation of health and social welfare requirements of the projects were made about basic health, hygiene and sanitation aspects of 27 project proposals. The recommendations included securing the availability of potable water for the school and providing an adequate number of toilets. HSW Unit staff also recommended implementing the basic standards for the rehabilitation of the PHC clinics. This included the availability of water in each examination room for the hand washing of the health providers and presence of at least one toilet in the facility. All the recommendations had to be addressed by the CBOs prior to formal approval of funding.

5.6 Improvement of Primary Health Care Services in the W-GCMI Communities

Primary Health Care Assessment

Forty primary care centers in West GCMI mobilized communities were surveyed during April 1-12, 2002. The purpose of the assessment was to further analyse the state of the primary health care in West Georgia. The findings and subsequent recommendations of the assessment were key to defining primary health care strategies for the West GCMI and can be summarized as follows:

- Most of ambulatories need to improve water supply and sanitation.
- Health information systems are archaic and need urgent improvement (record keeping skills, registration of patients, etc...)
- Management trainings of supervisors from polyclinics can improve performance of PHC staff
- State standards or adapted WHO treatment guidelines are needed to improve the quality of care at this level
- PHC providers need training to improve their knowledge and skills in Integrated Management of Childhood Illnesses (IMCI)

**A copy of the assessment report can be provided upon request.*

Essential Equipment for PHC clinics

In order to improve primary health care services of the community, the HSW unit requested W-GCMI to fund essential medical equipment within the community proposed Health Rehabilitation micro-projects.

The following set of equipment was designed to meet the minimum needs of PHC clinics to deliver essential services to the population at a good level of quality:

Table 6: Essential medical equipment for PHC clinics

N.	Essential Equipment
1	Sphygmomanometer
2	Stethoscope - Double Cup
3	Thermometer
4	Kidney Dish
5	Tray, Dressing
6	Dressing Suturing Kit
7	Scale, 0-100 KG
8	Scale, Salter Type (0-50 KG)
9	Height Chart
10	Tape Measure
11	Standing Screen for privacy
12	Physician's Desk
13	Examination Table – Adult
14	Medical Cabinet (Shelves for drugs and registration cards)

The HSW unit, together with other W-GCMI units, developed the strategy of funding and procurement of the essential equipment for PHC clinics. W-GCMI Senior Management team approved the strategy. According to the strategy the CBOs were able to include the essential equipments required for their PHC clinics in the micro-project budget. The community purchased the equipment by themselves. The HSW unit staff provided technical assistance on the specifications of the equipments.

PHC needs assessments for Counterpart CHAP program

In order to achieve adequate primary health services, W-GCMI funded rehabilitation of primary healthcare facilities. However, it was difficult to deliver good quality care without essential medical equipment. Local medical facilities did not receive any medical equipment during last 10 years. IMC completed a needs assessment of the primary healthcare facilities in Western Georgia and prepared the needs lists for the rehabilitated clinics. IMC worked in close collaboration with Counterpart International's CHAP program to provide the clinics with the necessary supplies and equipment.

IMC provided the list of clinics rehabilitated by W-GCMI with a needs assessment to Counterpart. IMC also arranged the submission of the questionnaires and all necessary documents by the clinics. Based on the information provided by the HSWU, Counterpart prepared a distribution plan for eight W-GCMI rehabilitated clinics leading to the distribution of goods in November 2002, Table 7 below.

Table 7: Distribution of Equipment to rehabilitated clinics in Guria and Imereti regions

Region	Community	Items			
		Couch	Desk	Microscope	Refrigerator
Guria	Bakvi	1	1	1	1
	Tkinvali	1	1	1	1
	Vakijvari	1	1	1	1
	Tskhemliskhidi	1	1	1	1
	Konchkhati	1	1	1	1
Imereti	Ivandidi	1	1	1	1
	Sakulia	1	1	1	1
	Zeindari	1	1	1	1

Five additional W-GCMI mobilized communities received supplies and equipment from the Counterpart CHAP program in January 2003, Table 8 below.

Table 8: Distribution of supplies and equipment to W-GCMI mobilized communities

Region	Community	Items			
		Couch	Surgical instruments	Instrument/supply set	Refrigerator
Guria	Chanieti, Ozurgeti	1	1	4	1
Adjara	Zamleti, Shuakhevi	1	1	4	1
Racha	Likheti, Ambrolauri	1	1	3	1
Samegrelo	Jgali, Tsalenjikha	1	1	6	1
	Najakhao, Martvili	1	1	5	1

Vision Charts for the West Georgia PHC Clinics

In order to contribute to the diversification of PHC services, the HSW Unit developed vision charts and instructions of its use. Vision Charts were printed and distributed to over 500 PHC facilities in West Georgia. The distribution was facilitated by the regional health authorities.

Eye tests helped PHC clinic staff detect imperfect vision and refer the patients when needed to the ophthalmologist in the district center for further examination and vision correction. This saved patients time and money for transportation as well as improved the detection time for vision problems.

Disease Information and Health Education Posters for PHC Facilities

The HSW Unit prepared disease information and health education materials for the posters to be displayed in all PHC clinics, located in west Georgia. The following topics were selected for the posters: Sexually transmitted diseases, influenza, hypertension, oral hygiene, iron-deficient anemia, asbestos and asbestoses, rheumatic fever, family planning, tuberculosis, diarrhea and breast self-examination. The posters were printed and distributed to PHC clinics through the regional health authorities.

Drug Donation

IMC received a donation of high quality, long-dated medicines with a value of over \$ 235,000. The donated drugs were distributed to 13 community primary health care clinics that were selected for participation in the CBHF project. The drug donation supported the CBHF project and significantly improved access to much needed medicines for vulnerable populations in these selected communities. The following communities were received the donated drugs: Sakulia, Dilikauri, Rodinouli, Zeindari, Gora, Jgali, Sachino, Bandza, Khabume, Mukuri, Bakvi, Likhauri, Tskhemliskhidi. In order to track the drug distribution IMC developed a series of logistics forms and provided it to PHC clinic health professionals with clear instructions of usage.

In order to track whether the ambulatory staff followed the instructions given by IMC and conduct the distribution properly, IMC staff paid regular monitoring visits to all PHC clinics that received medicines. The monitoring showed that the drug stock cards were maintained properly and drugs were distributed based on the prescription of the doctors according to their need. The IMC staff conducted the evaluation of PHC service improvement Micro Projects in sample sites. The analyses of success indicators data showed that the clinics where the drugs were distributed had higher utilization rate than the clinics not included in the list of 13 targeted clinics. According to Curatio CBHF implementation staff, the drug distribution made the health fund scheme sensitisation phase more effective and quick, and encouraged more people to participate in the funds.

HSWU database

The HSW database was developed and installed in December 2002. The HSWOs were oriented and trained on how to utilize and input data. The database gave the possibility to process and use the school, ambulatory and social assessment information for the communities mobilized by W-GCMI and local partner NGOs. HSW staff has completed inputting of available information. Database was up-dated periodically during the project lifetime. It was used to target various add-on activities and for community targeting under the LINGO RFA projects as well as helped other donors and organizations that were planning to implement projects in West Georgia.

The database can be provided upon request.

5.7 Consultancy and Evaluation

Social Welfare Consultant

In August 2002, IMC selected a Social Welfare consultant, Dr. David Gzirishvili, to provide technical assistance to support the social welfare component of the W-GCMI over a period of three months. The consultant provided a situation analysis of the social protection policy, existing social services and status of formal safety nets. He also provided assistance in the direction of the social welfare activities undertaken by the W-GCMI and other stakeholders as part of a wider social welfare strategy. The consultant identified the linkages between the W-GCMI and EGCM strategies and activities in social welfare and protection to promote broader programs and deepen their impact.

The consultant provided training to the Social Welfare Officers, liaised with the Social Policy Initiative Group, advised the HSWC, HSWA and COP on potential risks and opportunities regarding the W-GCMI HSW component. The consultant also assessed and provided recommendations on proposed social welfare themes and activities in the strategy that are commensurate with W-GCMI resources.

The consultant submitted a report on the assessment of social services in West Georgia. The purpose of the assessment was to explore existing threats and opportunities to the introduction of social welfare component into W-GCMI.

The Social Welfare consultant also worked with the HSWA and developed an analysis of the social themes for the health and social welfare related RFAs. The analysis was based mainly on the findings of the assessment of social services in West Georgia. The Social Welfare Consultant met community mobilizers, grants sector staff and HSW staff to discuss the analyses.

The social welfare consultant held a series of follow up meetings with the HSW staff. The purpose of these meetings was to develop a monitoring and evaluation framework and guidelines that would enable the HSWU to develop its own project specific monitoring and evaluation plans for each LINGO program. An initial working session (brainstorming) was held with the HSW team to define: a) what kind of assistance they need to more

effectively monitor and evaluate the NGOs; b) what technical aspects/issues of monitoring and evaluation have to be emphasized in the framework; and c) key concepts of monitoring and evaluation that need explanation by the consultant. The output was a special Framework for Monitoring and Evaluation of Social Welfare Activities under W-GCMI.

**The HSW consultant assessment report and the framework for M&E of social welfare activities can be provided upon request.*

External Mid-term Evaluation of the W-GCMI HSW component

IMC commissioned an external consultant to conduct a mid-term evaluation of the HSW unit. The purpose of this consultancy was to provide an opportunity to the IMC HSWU to review progress and efficiency to date under the currently implemented program strategies and to define recommended programmatic strategies that will enhance the efficiency in achieving the modified goals and objectives as well as impact.

The consultant Scope of Work included: (1) review the process - the degree to which the HSW unit is managing the activities implemented in ways to enhance its impact, (2) identify lessons learned and successes and the factors for success and (3) identify the elements, indicators, outputs, strategies and interventions that can be enhanced or changed, consider how impact can be maximized.

The consultant visited four micro-project sites that were selected randomly by the consultant. The consultant conducted a meeting with HSW team to overview the project objectives, discuss the role of the HSWU in order to achieve these objectives and identify lessons learned over the past 2 years. The consultant reviewed activity and assessment reports conducted during the W-GCMI lifetime and met with all W-GCMI sector managers and the Chief of Party.

The consultant made a presentation with preliminary findings to the W-GCMI senior management staff. A copy of the final evaluation report is available and can be provided upon request. All recommendations were reviewed by the HSW Advisor and staff and an action plan to address these recommendations was designed and implemented.

5.8 Coordination

The IMC HSW Advisor held semi-annual meetings with the Deputy Minister of Health, Labour and Social Welfare of Georgia and Adjara. The purpose of the meetings was to give an introduction to Georgia Health Authorities of IMC HSWU goals and objectives, on-going operations, and future plans within the W-GCMI project.

The IMC HSW Advisor and Coordinator had periodic meetings with the heads of the Department of Health, Labor and Social Welfare for Samegrelo, Imereti, Guria, and Racha-Lechkhumi regions. The purpose of these meetings was to share information about the IMC HSW Unit's on-going activities and future plans and to get information about reforms, changes and problems encountered by the health departments. One of the major goals of the meeting was to avoid overlap of the activities and beneficiaries. The two parties discussed the priority health and social welfare issues of relevant regions and possible ways to address them.

The IMC HSW sector worked in tight collaboration with USAID. The IMC HSW advisor paid periodic working visits with USAID Regional Health Specialist. The purpose of the meetings was to introduce the revised IMC strategy within W-GCMI and the upcoming RFAs. USAID also conducted periodic monitoring visits to health and social welfare RFA project sites: CBHF, HE, PHC clinic projects, etc.

IMC HSW staff attended the UNOMIC coordination meetings in Samegrelo, International NGOs coordination meetings in West Georgia and Tbilisi, to share up-dated information on health and social projects implemented in Georgia.

IMC HSW unit staff paid periodic cross visits to Mercy Corps sites. The purpose of these cross visits were to share information on lessons learned during project lifetime.

The IMC HSW unit also closely collaborated with the Georgia Social Investment Fund, especially in the implementation of school projects that included Step-by-Step initiatives.

HSW officers regularly participated in Social Policy Working Group (SPWG) meetings arranged in three regions of Imereti, Samegrelo and Guria, as well as Tbilisi. It was important to inform the SPWG about the plans and progress of the health and social welfare activities in the W-GCMI so that all relevant stakeholders could be informed.

6. Obstacles and Adaptations

6.1 General Issues:

- The departure of IMC International HSW Advisor in mid June, 2002 affected the implementation of planned activities. To address this, a new HSWA was hired in September, 2002.
- In initial phase of project implementation the HSW unit coordination with SPIG was insufficient. The synergy of these units was critical to accomplish mobilization activities and achieve GCMI mission. There was also gap in day-to-day coordination between CM officers, grants managers and HSW officers that caused problems in regional teams performance. To address these problems there was drawn the special memorandum between these sectors that clearly stated the roles and responsibilities of each sector staff in each project activities (site-visits, short-listing, cover sheet preparation, etc).
- Although HSW unit has designed the necessary tools to promote its portfolio in mobilization process, the checklists did not give possibility to assess changes occurred after the intervention. In order to address it the IMC HSW sector has revised and improved these tools as well as developed HSW sector success indicators.

6.2 RFA Specific Issues:

6.2.1 *Community Based Health Finance*

One of the challenges in the Community-based Health Financing (CBHF) project was a delay in the process of community selection for participation in the project. The community selection process for the CBHF project was planned to begin in August and end by mid September. Due to the parliamentary elections scheduled for November 2, 2003, many people in leadership positions from targeted villages were not able to be involved in the activities as they comprised election commissions and participated in other election related work. As a result of this, four leaders from Sakrebulo and one village team from Sachino were not able to attend the workshop in Kutaisi. Most of the workshop participants raised the issue that the election process would limit their ability to participate in any future meetings if they were scheduled prior to November 2, 2003. The Curatio International Foundation (CIF) team raised this issue with both CARE and IMC. This precluded CIF from participating in the design of the health financing schemes during October-November 2003. These activities were delayed until December-January. In the interim, the CIF team conducted in-depth assessments in newly identified communities in order to increase the number of villages where CBHF schemes was planned to be initiated.

Due to the complicated political situation in Adjara, CIF staff could not initiate the training of the five selected community representatives in that region. Consequently instead initially targeted 18 CBHF there were formed only 13 CBHFs – project could not meet the target.

6.2.2 *Community Based Health Education*

One obstacle in the implementation of the health education project was the delay in printing of materials. As it was agreed and reflected in Memorandum of Understanding between the participating NGOs, Intersectoral Research Group (IsRG) was responsible for preparing and printing informational materials once approved by W-GCMI. IsRG was also responsible for transportation of the educational materials from Tbilisi to Kutaisi. The preparation of the materials was delayed due to the summer vacation period. The IsRG consortium officially requested W-GCMI to postpone the project start date until September 1, 2003.

A delay in the development of a manual for community health trainers caused a delay in the implementation of the Health Education RFA projects (all three). In addition, due to adverse weather conditions, the LINGO Grassroots Support Center could not conduct the training sessions for the community health educators in Upper Svaneti Region. The training sessions in Mestia was initiated in April. That is why the number of people trained was low then initially planned for Mestia.

6.2.3 Step-by-Step Education Project

There was delay in implementation of Step-by-Step project. The delay was caused by change in school equipment purchase procedures that was initially planned by the L.N.G.O. "Center of Educational Initiative". Instead of doing central procurement of the classroom equipment West GCMH requested to do procurement locally by CBOs using the local resources - physical as well as human, in order to increase the capacity of the CBOs in procurement as well as establish local expertise in this field. All this changes required time for development of policies, for identifying the workshops and suppliers of the material for each of the CBOs communities, etc. As a result the classroom equipment was successfully completed, by the NGO CEI could not accomplish the planned activities - they have finished all planned training sessions but could not accomplish the post training monitoring observation sessions as it was initially planned. To address this problem the L.N.G.O has developed the activity plan - according to which they independently using their resources will continue the started process and conduct monitoring as well as evaluation of the project.

6.2.4 Social House-first Step

There was an obstacle in the implementation of Social House - First step projects. At initial phase of the project implementation the community of Ozurget was against the establishing of the social house for as they would say: "mad people" in their community and were trying to hamper the implementation of rehabilitation activities. The L.N.G.O Parent Plus made all possible effort to break existing in Ozurget community stigma related to mentally disabled people. The result of the project was very good and the community behavior towards the issue changes significantly positively.

6.2.5 Zugdidi-Pilot Integrated Study for Disabled Children

First Step has faced problems from the school authorities and Gali Institute located at the selected school in its effort to open integrated classes for disabled children. The reasons varied from resistance and stigma of people towards disabilities to personal dislike of parties involved. It has been suggested by the authorities of Zugdidi to start operations of the integrated classes at another school. The Director of School No1 has offered his assistance by allocating the space for classes for disabled children. The cost of renovation of this space was higher than envisioned; however First Step raised funds for increasing the envisioned budget. The building at the school No1 was easily adaptable to the needs of children with disabilities. For the integration of the children the dining room will be renovated and will provide services for both day centre and school. In addition it creates an option for the further development of services for disabled children of Zugdidi. This problem caused the delay in implementation of project initial plan, as the disabled children could not use the new school building throughout project lifetime as it was planned.

7. Lessons Learned

As part of the mid-term evaluation process a workshop was conducted with the HSW unit staff to discuss the lessons learned during the project lifetime to date. The main lessons learned that highlight several areas include:

- The sector is promoting general projects that are not specific to most vulnerable groups. To have a better result regarding the most vulnerable groups, there is a need to have better targeted projects.
- Some of the resources should be focused on the needs of the most vulnerable groups. The selection criteria for micro-projects could be changed to focus on aspects that would protect the vulnerable or focus money on their needs.
- The first community project is used to gain trust. The follow-up projects should have more complexity than single dimension projects. After first project, multiphase projects should be considered.
- It would be useful to work through the definition of indicators: input, process, output, impact with the community and CBO. This would allow them to better understand how the investment will produce an impact.
- Monitoring process of micro-projects should be evaluated in detail to determine how HSW officers can add more value to the project. Training of L.N.G.Os should be improved so that they can better identify needs.

It is more efficient to mobilize the communities for the specific issues, like health or social sphere then to do the general mobilization. By mobilizing the communities only for health give better impact. It gives possibility to build the capacity of the community in the specific sphere, you provide more and specific tools how to identify health problems, prioritise the problem, mobilize the resourced around this problem, form the community groups who will be involved only in health issues (health decision making, in PHC clinic management etc).

W-GCMI could not give possibility to plan different Health and social project activities in the same communities (planning was poor). If we could implement the HE, IMCI, CBHF, social projects in the same communities the impact would be rather better.

Due to the short time of W-GCMI project IMC could not conduct the evaluation of impact of health and social projects – IMCI, HE, CBHF. Because we were limited in time we only could evaluate the outputs –short-term results (e.g., number of community trainers trained, number of health groups established, number of community members attended the training sessions, number of community trainers trained in IMCI, etc). We could not measure the behaviour change or change in health indicators we are expecting as a result of our health RFA projects.

8. Success and Human Interest Stories

8.1 Right Based Approach in Health and Social Welfare Activities of W-GCMI

"It is my aspiration that health will finally be seen not as a blessing to be wished for, but as a human right to be fought for."

- Kofi Annan, UN Secretary General

Human rights are the protection of human dignity. The right to the "highest attainable standard of health" has been firmly endorsed as the accepted definition of health and human rights. It does mean that people should have health care that is accessible, acceptable and of a good quality. Access to health services is not just a basic need but also a fundamental human right. This right is also closely related to the realization of other human rights, such as the right to portable water, adequate supply of food and shelter.

The problem of economic or other disparities in health is one of the most serious health and human rights issues facing Georgia today. Substantial attention has been given to disparities in health access and status, yet significant disparities still exist.

In support of this global movement to advance understandings and actions in the field of health and human rights, particularly children rights, W-GCMI HSW Unit is increasing understanding of the linkages between health and human rights and is committed to strengthening its role in providing technical assistance to the partner organizations and community members in this field.

The access to health services is conceived as both a need and a right that people have. Since 2001 IMC HSW Unit worked to improve health and sanitary conditions in Primary Health Care clinics, secondary schools and kindergartens and IDP centers:

W-GCMI HSW sector and its partners educate health professionals and community members and organize them to become active in supporting a movement for human rights and creating a culture of human rights.

IMC works in collaboration with Mother and Children Rights Defence Association "Claritas XXI" in the implementation of the objectives set at UN Special Session "World Summit for Children" held in 2002. The project provides training for health professionals on Integrated Management of Childhood Illness in the communities mobilized by W-GCMI. This NGO also provides training to the community members on different health topics, like healthy motherhood, breastfeeding, immunization, diarrhoea, etc. To facilitate the integration of "rights-based thinking" into all aspects of child and adolescent health and development, Claritas XXI in collaboration with IMC has developed a training course in Patients Rights, that is based on the laws acting in Georgia related to patient's Rights. All the activities undertaken throughout the project implementation are in support of Article 24 (Health and Health Services) of the Convention on Rights of the Child (CRC), which was adopted by the United Nations and reflects an international consensus on standards for ensuring the overall well being of all children. The training aims

at strengthening the understanding of children rights in the Patient's Rights framework, and how this framework may be used in planning, programming and management of child and adolescent health interventions. The relationship between needs, obligations and rights and the way these are brought together in the context of the Patient's Rights forms the main premise of this course.

8.2 "Day care center for the Children with Disabilities" in Zugdidi

The NGO First Step Foundation and parents' organization "Nergebi" are implementing the project "Integrated Learning for Children with Disabilities" in Zugdidi. The purpose of the project is to support the education of mentally and physically disabled children. The project addresses the article 24 of CRC that states that "Parties recognize that a mentally or physically disabled child should enjoy a full and decent life, in conditions which ensure dignity, promote self-reliance and facilitate the child's active participation in the community".

The first step that LNGO staff undertook was the selection of disabled children for the participation in the project. They have done a comprehensive research of the families with disabled children. These families are isolated from the society, depressed and hopeless. NGO Nergebi tries to help them overcome the existing stigma related to disabled children and inspire the hope in their heart that their children will be accepted by the society.

The First Step Foundation (TFS) have selected eight teachers and two psychologists from Zugdidi for training. The training sessions were conducted by TFS specialists. The training was tailored to the needs of disabled children and was based on the behavioural analyses. Training included the assessment of children, analyses of children academic and functional skills, creation of individual education plans (IEP) and creation of curriculum. Zugdidi N1 secondary school administration allocated four classrooms for the children with disabilities, one classroom for the joint lessons with the students of the state school and a dining room. A playground is used by all children together. The classrooms were equipped with all school equipment and educational materials necessary for the disabled children.

The integrated learning process started on February 23, 2003. "The first day was especially difficult for LNGO staff, the parents and the teachers" - said Ira Djikia, social worker of organization "Nergebi" - "But this day made all our doubts disappear. The state school children accepted the disabled children with warmth and caring, they played together. This was the best example of integration of disabled children."

8.3 Chiatura Youth Center "Jejili"

The children of socially unprotected families and street children throughout the world are subjected to physical abuse by police, as governments treat them as a blight to be eradicated rather than as children to be nurtured and protected. They are frequently detained arbitrarily by police simply because they are homeless, or criminally charged with minor offences. These children also make up a large proportion of the children who enter the criminal justice system and are committed finally to correction institutions that are euphemistically called schools, often without due process.

In order to protect the basic children rights and address their social, economic and health problems the organization "Child and Environment", with the financial support of UNICEF, established the "JEJILI" Youth Center in Chiatura in 2001. Since 2003, the Center has been operating with the financial support of W-GCMI. There are 150 children from poor families attending the center. One social worker, a teacher by profession, is assigned to each age-group, who ensures that discipline is maintained in the group, helps children with homework, gives additional lessons in curricular and extracurricular disciplines, organizes discussions on healthy lifestyle and makes the children aware of their rights; they also work actively with family members.

The children come to the Center after school lessons and they spend the second half of a day at the Center. Their activities at the Center are strictly scheduled. They have a meal there once a day.

There are computer, drama, sport, handicraft classes, as well as drawing, traditional dancing and singing sections, English and Russian classes set up and functioning in the Center. All children of the Center, without any exception, are participating in these activities. They have access to the books in the Center's library.

In evaluating the results, one can easily notice the positive changes that have been made in the lives of the children since the establishment of the Center. Psychological status of the children improved and positive perception of the future found its foothold in their minds. The levels of school attendance have increased. Group studies at the classes and sections of the Centre, as well as the additional lessons, significantly increased general educational and cultural

level of the children. It should be also noted that physical condition of the children has improved – at least once a day, they have a meal, while before the commencement of the project, the signs of dystrophy had been apparent in many of them. The specialists invited by “Child and Environment” conducted comprehensive medical examination of 100 children and, in a number of urgent cases, rendered relevant medical aid.

The children are engaged in preparation of radio programs that are broadcasted by town radio in Chantura. They prepared and broadcasted four programs and provided the audience with the information on the rights of children.

At the beginning of October 2003, three children of the Centre “JEJILI” participated in the competition for the election of representatives of Youth Parliament of Imereti Region. The topic of the competition included the rights of children, history and literature. One student won the competition. It was Ana Labadze from the Centre “JEJILI” who became the winner of this competition, and another one – Lana Labadze – became a member of the Regional Youth Parliament.

All parents think that the Centre greatly assists them in bringing-up and education of their children and express their sincere support to this project. The Council of Parents was set up, which organizes meetings of parents on a monthly basis. They have detailed information on the current processes in the Centre.

“We strongly believe”, said Ms. Nana Iashvili, the director of Association “Nergebi”, - “that it would be particularly useful and beneficial today for the children from extremely poor and vulnerable families throughout Georgia to create a network of such centres, in order provide them with proper conditions necessary for their education and development – whereas the creation of equal opportunities for all serves as one of the basic principles for existence of civil society”.

8.4 Reverse stigma: Reflect before you label people

People currently going through an episode of a mental illness and those who have used mental health services in the past are facing daily discrimination. This discrimination coupled with unfavourable economic and living conditions and careless attitudes promotes isolation of these members of our society. The family members of the users of mental health services are facing serious problems as well. In addition to the difficulties of overcoming living, social and psychological problems, they also feel ashamed for having a family member with a mental illness.

Stigma is not just a matter of using the wrong word or action. Stigma is about disrespect. It is the use of negative labels to identify a person living with a mental illness. Fear of stigma discourages individuals and their families from getting the help they need. When mental illnesses are used as labels – depressed, schizophrenic or manic, these labels hurt. Everyone knows why it is wrong to discriminate against people because of their race, religion, culture, or appearance. They are less aware of how people with mental illnesses are discriminated against. Although such discrimination may not always be obvious, it exists. The stigma of mental illness is real, painful, and damaging to the lives of people with mental illnesses. Stigma prevents them from getting the treatment and support they need to lead quality lives.

In order to reverse stigma and reduce stigmatising attitudes towards people with mental illnesses a consortium of two NGOs “Georgian Association for Mental Health” and “Patient Plus” under the W-GCMI Community Based Social Services Grants Program started in August the implementation of the project “Social House - First Step” in Guria Region. The objective of the project is to establish a house for the users of mental health services. The project supports meaningful participation of mental health consumers and community members in all aspects of the project including the planning, design, implementation, and evaluation. It was not easy to initiate this project. The community of Ozurgeti met this initiative with negative attitudes. The Local Authority did not want to give permission to rehabilitate the building that was given by Ozurgeti Church for use for Social House. The community members declared that they do not want to have “HOUSE OF MAD PEOPLE IN CENTRAL PART OF THE CITY”.

It was a real challenge for this consortium to start changing the attitudes towards people with mental diseases. Among the main activities of the project are:

- Developed, printed and distributed informational leaflets to community members
- Translated the book by Rosalynn Carter “Help to Mentally Ill People” and distributed it to psychiatrists and neurologists. The book encourages the use of positive images in relation to people with mental illnesses and underscores that mental illnesses can be successfully managed.

- The users of the Social House participated in the World Mental Health Day Exhibition held in Tbilisi.
- Anti stigma campaign in Tbilisi and Ozurgeti
- Project manager Ms. Gogvadze and two painters (users of the Social House) took part in a Tbilisi TV station "IMEDI" talk show. They also gave interviews to journalists on the goals, objectives and importance of the Social House project.

All these efforts did not pass without the result. The participation of the society in the implementation of the project rose significantly. Local Authorities raised their contribution to the rehabilitation of the Social House. People from the community are coming and offering their help as well.



World Mental Health Day Exhibition



Rehabilitation of Social House in Progress

8.5 Health is the top priority for the community - a success story of Jgali community

Travelling along the ragged road of Tsalenjikha district, one reaches village Jgali. It is an old mountainous village of Samegrelo Region, the age of which counts more than century. The village is located 5 km from the central road. Over 2542 persons are estimated to live in this community. There are also socially unprotected groups of people in the community – IDPs, pensioners, lonely mothers, and disabled people. The population is involved in cattle breeding and agricultural activities. Nearly all the buildings located in the village including the Ambulatory were destroyed during the civil war in 1990. The ambulatory was shifted in the private house and occupied two small rooms only, which was not adequate for the provision of health care services - medical staff was to work in inappropriate conditions where privacy was not secured, there were no medical equipment there except of sphygmomanometer and stethoscope. The hygiene –sanitation conditions were poor there, which caused several cases of infections. All these drove the community members to seek services in the district hospital with any additional expanses of time, travel and medical cost. Ambulatory personnel consist of three doctors – general practitioner, paediatrician and dentist and two nurses. The members of the community have several times applied to the local authorities and relevant entities at different level, but the problem was still not resolved.

Before May 2001 Jgali Community had no experience working with international or national NGO when West GCMI team of mobilizer and IMC HSW officer visited the village to conduct a participatory appraisal of the village. It was very hard for the staff to organize the community meeting to conduct the orientation. One could see the faces of people without any interest, trust and hope, which was lost after the long years of passive life. It was difficult to believe that somebody would support the people that will make their life easier.

W-GCMI staff made great efforts to organize the community. CBO was formed with wide representation of different social groups of the village. On it's part, CBO worked hard with the community members to prioritize the numerous problems the community experienced. IMC HSW officers tried it's best to promote the identification of health and social welfare problems in the community and support the community in finding the ways to resolve it. The first choice for the community was the construction of the new ambulatory building, unanimously accepted by entire community. But again it was difficult to believe, that help could come from somebody strange and with community input.

The active participation was observed during the project implementation from community side. Community has contributed about 31 % of their resources. The IMC HSW officers have given the recommendations on minimum sanitary-hygienic standards of PHC clinic and also conducted several field visits to observe the implementation of the recommendations. The project was completed successfully and now Jgali community has attractive clinic, which is always full of patients seeking help, treatment, and warmth from medical staff.

As per approved project proposal budget it was planned to construct four rooms for the ambulatory. Community became so active that Local authority contributed about 20 % of total budget and two additional rooms were constructed for the dentist office and laboratory. After the completion of the activities under the recommendation of IMC HSW officers, the community initiated the self-help project there - fencing of the ambulatory territory to avoid the livestock to enter there, which causes zoonotic diseases and environmental hazards to the water supply.

This is only the beginning - IMC will continue its activities in order to improve health service of the community. It is planned to provide the training of health providers and also community health education, the topics of which will be selected through community participations process according to the community priority needs.



Jgali Primary Health Care Clinic Before and After



Opening Ceremony of the PHC Service Improvement Project

8.6 Miqava Ambulatory

Miqava community is situated in Tsalenjikha District. It is a very old village that is famous with its national heroes. The population of the community is 2542 persons. The population of Miqava community as other communities of Georgia was effected by the severe socio-political situation of Georgia. Due to the lack of the maintenance activities nearly all the buildings of the village, ambulatory among them, were damaged. The situation has worsened by the earthquake that took place in 1989. The ambulatory could not function in the old destroyed building and moved to the Local authority building in one room, which was not adequate for the provision of health care services - two doctors, general practitioner and paediatrician conducted the examination of the patients, there were no conditions to conduct immunization there, privacy of patients was not secured, there were no medical equipment and very old and

damaged physician's desk and examination table. Ambulatory personnel consist of two doctors – general practitioner and paediatrician and two nurses. The members of the community have several times applied to the local authorities and relevant entities at different level, but the problem was still not resolved. Because of lack of experience in resource mobilization community could not repair the ambulatory by themselves alone.

Miqava community was identified by W-GCMI project as one of the needy communities in May 2001. Before that community never had an opportunity of working with international or national NGOs. Because of this reason at the first community meeting one of the community members said: "We cannot rehabilitate the ambulatory in the way you are talking about. Just give us the money and we will hire workers and will rehabilitate the ambulatory."

W-GCMI staff including community mobilizers and health and social welfare officers made great efforts to organize the community. There was formed CBO with wide representation of different social groups of the village. IMC staff tried it's best to promote the identification of health and social welfare problems in the community and support the community in finding the ways to resolve it. The community has identified the ambulatory project as a top priority and presented the well-designed project proposal to W-GCMI for funding.

Five months later one could not recognize the ambulatory building. Now it has a new roof, all existing rooms were repaired; water supply, sewerage and electric systems were repaired. The community provided almost all the labour. The community has contributed over 34 % of the total project cost. The Local Authority was also very active. They have allocated the wooden materials for the Physician's desks and shelves that were prepared by community members collected money.

The IMC HSW officers have given the recommendations on minimum sanitary-hygienic standards of PHC clinic and also conducted several field visits to observe the implementation of the recommendations. IMC has delivered the essential equipment to the clinic that was donated by DOD worth of \$ 450.

Now the clinic has enough space to provide quality services, secure patient privacy. The laboratory is functioning in full capacity, vaccination is taking place regularly and in specially allocated for vaccination room. General practitioner and paediatrician conduct examination of patients every day. The brigade of the obstetrician and cardiologist that is functioning in Tsalenjikha District polyclinic department conduct preventive examination of the population of the community two times in every week in the rehabilitated ambulatory.

At the ambulatory opening ceremony the ambulatory doctor said: "If you would have told me five months ago that this ambulatory would be rehabilitated I would have thought you were crazy. But this project changed our community; we did things that our community never done before. Thank you for showing us that we can do a lot for our own community."



Miqava Ambulatory before and after rehabilitation

6. SOCIAL POLICY INITIATIVE - IMPLEMENTED BY THE HORIZONTI FOUNDATION

Outcome/Effect Indicator: Civil Society Strengthened

5.1 Introduction

Horizonti Foundation, in partnership with Management Systems International (MSI), led the social policy component of the GCMi effort in close collaboration with Mercy Corps and CARE. The overall objective for the GCMi Social Policy Unit was to enable citizenry to take initiatives to promote social development with the government, NGOs and other civil society groups. More precisely, the SPU sought to

- Promote NGOs/CBO effective collaboration with civil society groups or other sectors (government business) to improve the lives of vulnerable groups;
- Increase understanding of government social reforms and community civil sector involvement in the CA # 114-A-00-00-00149-00 *Final Report* formulation of these reforms;
- Maintain development of sound social policy at national level;
- Enhance capacity of local advocacy alliances (SPWGs) and communities to carry out advocacy activities;
- Facilitate networking and cooperation between communities, NGOs, public and private sectors

Through the social policy activities GCMi made critical efforts to maintain further mobilization of communities in terms of enhancing local community initiatives aimed at securing better social services to vulnerable members of communities. Moreover, increasing advocacy skills of local communities had the effects of keeping up the benefits or improvements obtained through the GCMi community mobilization and NGO grants components. Further to respond to identified social needs of local communities the SPU has been engaged into the national policy development efforts and with its technical and intellectual input has participated in social policy formulation at the national level thus offering a channel to community leaders to participate in the national policy development.

5.2 Key Program Accomplishments

5.2.1 Creation of a Social Policy Analysis and Advocacy Unit

Horizonti Foundation, in partnership with Management Systems International (MSI), led the social policy component of the GCMi effort in close collaboration with Mercy Corps and CARE at both national and regional level. It was home to the Social Policy Unit (SPU), which had a staff of four, plus a Social Policy Advisor, provided by MSI. The SPU mission statement was:

inform citizens taking initiative to promote social development in a collaborative and strategic way with government, NGOs and other civil society groups

The social policy agenda for SPU have been determined largely by social sector issues relevant to communities, which are identified through the community mobilization process and by community-based organizations and local non-governmental organizations assisting communities through the grants program. The SPU advocated for greater community involvement in policy development and implementation, dissemination of information and community feedback on the impact of policy reforms, and promoting collaboration between CBOs/NGOs, community groups, private entrepreneurs and the government in addressing social policy issues. The SPU played an important clearinghouse role in identifying, analyzing and disseminating information on lessons learned and good practices related to community oriented social policy development and implementation. The SPU effectively mobilized its local staff to respond to the information and advocacy needs of local communities.

5.2.2 Provide Support to the Social Policy Unit

During the Program implementation, support to the Social Policy Unit has been provided by recourse to international or local expertise coming from US based universities or organizations, local NGOs, research institutions or universities. All external assistances and consultancies sought to increase the skills and capacities of both the SPU staff or MC/CARE staff and the GCMi target groups to cope with the complex tasks of contributing to the development of social policies relevant to the needs of local communities and activating the Program beneficiaries in terms of ensuring their involvement in the decision making processes both at local and national levels. Moreover, on a number of occasions the support to the GCMi social policy component has also resulted in practical assistance to the government run social projects or programs

The Johns Hopkins University (JHU) training team has been invited twice during the Program implementation for organizing trainings of trainers on advocacy and coaching relevant Horizontal, MC and CARE staff on mentoring and assisting the communities to design and execute advocacy campaigns and influencing the government for addressing the pressing social needs for their respective communities. The second phase advocacy training module has been developed with the technical input from JHU. It is noteworthy that the expertise and knowledge gained through the JHU assistance will stay in the country and Horizontal will likely continue to offer these training courses following the completion of the GCMI program.

The American Association of School Boards in collaboration with the SPU and the Ministry of Education developed official regulations regarding the school boards and joint boards of trustees' pilot program. Hilary la Monte also helped train SPU staff member and provide adequate materials through which series of training workshops and coaching were provided to the pilot board members.

In collaboration with the E-GCMI NGO Grants Program, SPU organized a consultancy by Child Welfare Consultant Pamela Awtrey who facilitated Child Welfare workshops in both in East and West Georgia for NGO sub-grantees, CIGs CBOs and SPWG members interested in child welfare issues as well as for the public social welfare officials and child institutions personnel. The objectives of the consultancy were to share the experience of child welfare programs in transition countries, particularly regarding alternatives to institutional care and social worker training and development. Most importantly, for the first time in Georgia a forum was provided for participants to discuss key issues regarding the role of communities, NGOs CBOs and government in promoting child welfare initiatives, and develop action plans to increase awareness of child welfare issues and to improve the welfare of vulnerable children. The knowledge obtained by the community and SPWG members was then conveyed to the SPWG members. One objective of the consultancy was to conduct an external evaluation of the Ministry of Education National Family Support and Foster Care Project, which was carried out in Eastern Georgia.

More assistance to SPU on social work has been provided by Dr. Hamid from Columbia University who suggested directions for future institutionalization of social work education.

The SPU has also actively used the local expertise from NGOs, scholars, and specialists. Georgian Bioethics Society assisted the SPU to inform the constituencies regarding the public healthcare reforms or programs and to develop advocacy toolkit for CIGs CBOs and SPWGs that were successfully used by the target groups in their advocacy campaigns.

A consultant from the local University helped the SPU to organize a survey on stakeholder inclusion in the education reform that enabled to identify the transparency and openness related weaknesses of the reform and present suggestions as to increasing the civic participation in the reform implementation. The SPU has been networking with many other NGOs and research institutions who were involved in various NGO round table initiatives and reviews of social policy reforms or initiatives as a result of which came various toolkits, policy papers or specific recommendations that have led to a better understanding by communities of social policy issues or advocacy techniques or possibilities for influencing the government to respond to the social needs of communities.

5.2.3 Workshop for Selected East and West Initiative Implementing Agencies and Local NGOs

To attain a greater integration of the various components of the GCMI and better understanding of the social policy issues by partner NGOs or other stakeholders SPU has organized or participated in organizing various workshops on the GCMI social policy initiatives and social sector reforms related issues.

In May 2002 in Kutaisi, Akhaltsikhe and Telavi the SPU organized three regional workshops for NGO sub-grantees, CIGs CBOs and SPWG members with facilitation of child welfare consultant Pamela Awtrey. Public officials working for local government's social welfare agencies and personnel from MC or CARE sub grantee child institutions were also invited to participate. Experiences of child welfare programs in transition countries, particularly regarding alternatives to institutional care and social worker training and development were presented at the workshops, where participants also discussed key issues regarding the role of communities, NGOs CBOs and government in promoting child welfare initiatives, and developed action plans to increase awareness of child welfare issues and to improve the welfare of vulnerable children.

In June 2002 the SPU organized a two-day Education Reform Workshop for approx. 35 participants from SPWGs, which planned to hold community education reform meetings at rayon or village level. The objective

of the seminar was to provide SPWGs with sufficient information concerning ongoing reforms and disseminate materials, which could assist them in efficiently organizing meetings and delivering relevant information to communities.

In March 2003 a two-day workshop was held for MC and CARE mobilizers and grants officers in order to further the integration of Social Policy with other aspects of GCMI. Twenty-five MC CARE staff participated as well as six Horizonti Social Policy collaborators (including trainers) and two community mobilization organizations in the fields of education (the Step by Step Program) and environmental advocacy for communities (Aarhus Convention office). This has led to a better understanding of the SPU's initiatives by the CARE MC staff and contributed to supporting the social policy initiatives by the SPWGs and CBOs.

In March 2003 SPU organized a working meeting with the NGOs involved in, or concerned with, the ongoing education reform. The event served as a forum for information exchange between civil society organizations and development of specific coordination mechanisms that would increase the efficiency of NGO monitoring of the reforms, and also lead to a greater transparency in the reform program implementation process. It is noteworthy that so far coordination of various players involved in certain areas of policy development still remains ineffective and there are possibilities to improve. Coordination between various players is even complicated when there are conceptual differences on ideas and approaches with regard to the certain policy aspects. In any case if not coordination information exchange that has occurred regularly within the SPU activities was very useful in terms of enhancing quality and effects of various SPU interventions. For instance the SPU has been updating the SPWGs, communities, or pilot BoTs with regard to the programs, initiatives, or advocacy efforts taken by the Soros, IFES, Every Child, Eurasia Foundation, etc.

To respond to the identified need of further informing the SPWGs on primary healthcare reform related issues or national or municipal healthcare programs under which certain benefits are provided to citizens or marginalized groups in July 2003 the SPU organized a healthcare workshop where local experts from the Georgian Bioethics Society presented the information as well as the advocacy toolkit based on which the for SPWG members could advocate for improved healthcare services for their respective communities and organize healthcare community information meetings at district or advocacy level. Subsequently the toolkit was effectively utilized by the SPWGs in their first and second phase advocacy projects or awareness rising initiatives. The toolkit has also been used by the CIGs, CBOs, NGOs and community members.

In October 2003 the SPU in partnership with the Ministry of Education and Policy Coordination Unit - WB funded agency responsible for the education reform implementation, organized a two-day education reform workshop to update the SPWG members on new initiatives within the reformation program taken in the light of recommendations or feedback presented by communities, teachers, NGOs or other stakeholders. Although the SPU made efforts to facilitate regular exchange of information between the Ministry PCU, and peripheries the GCMI experience showed that this task is difficult to achieve where the Government had not designed or set up effective communication mechanisms through which it would inform if not the wider public, then their regional agencies and schools. It has been extremely difficult for the SPU to meet with the information hunger in the local schools where in many occasions the SPWG members were the principal sources of information regarding the reform initiatives.

In May 2004 the SPU organized and facilitated a two-day conference of Social Policy Working Groups in the Tabakhmela Hotel and Training Center where CIG, CBO and NGO representatives associated within SPWGs of various regions met to discuss the successes, failures, best practices and lessons learned from social policy and advocacy activities implemented by SPWGs or community groups in their respective regions. More specifically, through participating in the Conference Social Policy Working Groups learned more about the advocacy experiences that the other SPWGs have in their regions; shared best practices and lessons learned with other groups and discuss the perspectives for further supporting community level advocacy; discussed and developed coordination and communication mechanisms among SPWGs; identified general principles and common ideas in terms of developing sustainability and institutionalization plans for the SPWGs and GCMI social policy activities. Each SPWG took a task to develop an institutionalization plan and present those to Horizonti. Subsequently on June 24th SPWG representatives met in Tbilisi to share the institutionalization plans and discuss further steps they will take to finalize the institutionalization process.

To meet with the goal of participatory development of social policies relevant to communities, in June 2004 the SPU organized a stakeholders' workshop with GCMI sub grantee NGOs, SPWGs, CIGs, CBOs, social child welfare nonprofit organization at which the draft amendment to the Education Law as developed under the SPU leadership by the Inclusive Education Workgroup was presented. Through the participants' feedback a number of

corrections were made in the draft that was subsequently included in the overall package of the Education Law amendments submitted to the Georgian Parliament.

In terms of responding to the intentions of the SPWGs to institutionalize themselves and to increase their capacities for securing sustainability of the Groups in July 2004 Horizonti staff organized several days intensive training sessions for SPWG members in organizational and financial management, fundraising, project proposal development and project cycle management.

5.2.4 Clearinghouse of Information

To provide a forum for community writers and activities in GCMI to write how social policy is being changed through initiatives at the local or central level eight issues of Social Policy in Georgia Journal have appeared in 3 languages: Georgian, Russian and English. They appear on the Internet under www.horizonti.org (Publications). Each of the eight issues had a main topic covering the principal trends of the social policy development in the country and highlighting the innovations in the policy reforms. An emphasis has been always made on the roles and functions communities can assume in formulating and implementing social policies at the local level.

Moreover, the SPG Journal was a good arena for the GCMI Program implementers and the target groups to share the best practices and success stories as well as the challenges experienced or encountered in the community based advocacy. Almost all SPWGs have published at least one article regarding their advocacy, monitoring or awareness raising initiatives. Since the SPG Journal could be accessed in Horizonti, MC, or CARE offices or sub-offices or through Internet it served as an effective tool to communicate information regarding the social policy initiatives and policy development trends to the remote or those communities who were not covered by the GCMI Program. Themes of the issues were as follows:

1. Social policy component to a wider public and highlighted principal activities accomplished so far
2. Development of Social Work education in Georgia and included descriptions of community-based programs.
3. Environmental Protection –highlighting innovations in teaching natural sciences.
4. Education reforms, social work, community-based advocacy development.
5. Child welfare issues and advocacy experiences and achievements of some of the Social Policy Working Groups
6. Success stories of local communities through their Social Policy Working Groups
7. Inter-sector partnerships developed within the framework of the GCMI program and emphasized the best practices and the lessons learned by partners NGOs, SPWGs and communities.
8. Reviews some of the important documentary outputs of the Georgia Community Mobilization Initiative

Looking back at the lessons learned and experiences gained during the GCMI program, the reviewed documents produced to target specific issues during the life of the program now remain as vivid illustrations of a historically significant period for Georgia.

The Social Policy Unit also acted as a clearinghouse on information for the development of Social Work Education. A coordinating committee met regularly and networked with national and international organizations and potential donors, shared information and possibilities for all persons interested in developing Social Work in Georgia. Reports were shared with government bodies and international agencies. The Swiss Department of Refugees agreed to make the English-language translation of the community health report and mobilization manual, which will then be shared with other donors and organizations.

The SPU participated actively in coordinating committees on the elderly and drew up a consultancy for the next time period, in collaboration with the MC team. Another coordinating committee where the SPU had been involved is that of de-institutionalization. These plans and strategic objectives culminated in Government policy after May 2004 and with a presentation of the program to the public during a conference carried out by all partners and sponsored by EveryChild. Donors such as the EU Food Security and the World Food Program will now hinge their programs on this policy, putting increased emphasis on children outside institutions to increase their chances for remaining in their families and communities.

5.2.5 Training and Technical Assistance

(a) Advocacy training workshops for communities

Advocacy is a key strategy for CIGs, CBOs and NGOs to utilize in influencing and promote social policy development and implementation. However, before the GCMI Program most members of CIGs and CBOs, and NGO staff had never received any training in advocacy. Thus, the SPU organized a series of four 2-day Basic Advocacy Training workshops in 2002-2004 in all GCMI regions. The participants were members of CBOs and NGOs that are partners with CARE and Horizonti Foundation. A total of 318 participants attended the Basic Advocacy Training workshops organized for W-GCMI communities. The basic objective was to develop relevant skills in advocacy, which would enable participants to actively address priority community social issues and promote social development activities and programs in their regions. Moreover one of the basic objectives was to provide civil society leaders with a framework and toolkit for developing more comprehensive advocacy strategies to compliment their other activities within and outside GCMI. A follow-up survey, carried out in September-October 2003, of previously trained civil society leaders revealed that most had used the training directly in carrying out small local-level advocacy initiatives. Increased number of successful advocacy initiatives undertaken by trained communities in terms of obtaining local government's contribution to their respective community projects indicates on the impact of the workshops.

(b) Second phase advocacy coaching

In March 2003, JHU staff delivered a second phase Advocacy Training for Horizonti, MC and CARE staff. This was a follow-on training to the first training delivered in February 2002. The training focused on practical tools for developing, coordinating and mentoring community-initiated advocacy efforts. As part of this training a follow-up survey of phase one participants and Isani-Samgori and Gori SPWGs was conducted to ascertain how they had used the training.

(c) Advanced level advocacy training workshops

The Phase Two Advocacy Training builds on the previous BAT and was held for all communities that already have gone through the BAT. Phase One addressed basic advocacy tools including an in depth overview of advocacy and strategies of its implementation, whereas the ALAT offers possibilities to the audience to learn and practice more complicated and advanced techniques for identifying and promoting community-oriented public policy, strategies for targeting, mobilizing, organizing and networking with key stakeholders, opting tactics for the most effective lobbying. During the project ALA training has been held for a total of 288 CBO members coming from W-GCMI targeted districts. With these inputs some of the W-GCMI community leaders are seeking legal remedies against the unlawful or negligent actions or decisions of local authorities.

(d) Regulatory Framework Training Workshops

Mobilization of GCMI communities and SPWGs to implement grassroots-based advocacy has shown that training in advocacy techniques would be insufficient if these are not supported by knowledge of the Georgian regulatory framework for both rights and initiative-based advocacy. In July 2003 the SPU gave Regulatory Framework Workshops with materials for all SPWGs to optimize their efforts to address the central and, mostly, local authorities (including regional and district healthcare, social welfare and education departments and agencies). The SPU began to focus on this issue within all training (including social work and community health). With these inputs, some of SPWGs and CBOs are considering recourse to legal remedies against central or regional local authorities for hiding public information or neglecting their responsibilities to provide social welfare services to the communities.

Since November 2003 the SPU gave Regulatory Framework Workshops for east and west community leaders, many of those were absolutely lacking the information on the issues. In particular, information and handouts were provided on laws and regulations addressing the issues related to local governance and self-governance, freedom of information, lobbying, constitutional rights and freedoms, etc. In total approx. 310 CIG CBO and NGO leaders attended 19 RFT workshops organized for W-GCMI communities.

(e) Social Work Education Workshop

Four-day training sessions for regional community social workers based in West Georgia were held in August 2003, which produced training guidelines to improve regional social services, in partnership with the Deputy Minister of Social Welfare. A trip to Armenia confirmed the social work initiatives underway in Georgia, supplying new insights to getting SW Education firmly in place in this country. A brochure with Ministry of Health and Social Welfare input on regulations and better client relations was issued through the SPU, with input from local consultants in social work education.

5.2.6 Community Mobilization Strategies that Link Community Needs with Social Policy Reform Efforts

Establishment of Social Policy Working Groups has been a strategy for the SPU to build the capacities of local communities to participate in the development and implementation of social policies at regional level through engaging in various policy-related activities. These activities include facilitating reform community meetings in the fields of education, primary health care and social welfare, developing and implementing advocacy initiatives to address community needs, monitoring implementation of various social policy reforms at local level, supporting activities aimed at improving the flow of community information, and documenting lessons learned.

Menu of SPGW activities include advocacy training workshops, education reform, child welfare, and primary healthcare community information meetings at the district or Sacrebulo level, documentation of best practices lessons learned of CBOs CIGs, organizational and financial management and proposal writing training workshops, education reform monitoring and evaluation initiatives, special briefings or seminars by experts, social marketing campaign (e.g. patients rights, rights of the disabled), obtaining specialized technical consultants to assist in some efforts under their projects (e.g. research, program design, etc.), introduction of SPWG to local government leaders, etc.

SPWG have implemented awareness raising, advocacy and monitoring initiatives or projects. Although, an emphasis has always been given on advocacy, even information campaigns incorporated elements of community-based advocacy for addressing social issues such as the improvement of the quality of drinking water, monitoring the new assessment system component under the education reform, and prevention of the juvenile crime. In other words although the SPWGs were conducting information campaigns they made efforts to mobilize their targeted communities and influence the authorities to address the issues identified as the most pressing ones for those communities.

The Second phase advocacy projects were implemented and completed in 2004. All of the W-SPWGs attained the primary goals specified in their projects thus causing a considerable improvement of local social services to beneficiary groups. Some of the SPWGs managed to achieve more than that previously envisaged by the projects. Although one lesson that SPWGs learned is that even less significant success in advocacy project implementation considerably stimulates community members who are more encouraged and confident each time they approach or meet the local authorities. At the outset of the first phase projects almost all SPWGs experienced serious problems of making contacts with the public authorities, because of the mistrust of public officials or agents in relation to some informal group of people who appeared with specific requests, recommendations or requirements and who were well informed on the legal framework upon which their requests or demands were based. The SPU and Horizonti local staff however have always encouraged the SPWGs to approach authorities in a positive manner and to refer to radical measures only where positive actions failed.

In spite of difficulties all SPWGs managed to "establish" themselves with district authorities who at the present are keen to invite the SPWG members for discussing issues and jointly seeking resolutions to problems faced by local communities. Moreover SPWGs are actively involved in the budget planning processes (Guria and Imereti SPWGs).

It is also to be noted that the SPWGs in their first phase projects dealt with a number of challenges that were directly related to the complicated political situation, elections, frequent removal of local government official from their offices, etc. Implementation of the Second phase projects were easier in this respect since the new government has been more collaborative with the NGOs CBOs or their alliances. For the present they are well known and acknowledged not only by the district, but municipal authorities and Ministry of Education (Samegrelo SPWG).

All SPWGs abstained to refer to "radical" advocacy measures, such as demonstrations or filing a lawsuit against the public authorities for hiding information or ignoring the timeframes established for providing requesting info. SPWGs preferred to mobilize their communities and send appeals or open letters to the decision-makers.

The SPWGs have also implemented initiatives aimed at monitoring the implementation of specific education reform activities. In May/June 2003 the SPU supported all SPWGs to monitor the state examinations held in the ninth grade of secondary schools, held through a new student assessment mechanism introduced by the education reform. The findings and respective conclusions/recommendations made by the SPWG and

community members involved in the initiative were collected and analyzed with the assistance of local statistical expertise. This was presented to National Assessment Center of the WB-funded Policy Coordination Unit in September 2003, which found it "very useful".

It is noteworthy that through many initiatives or interventions the SPWGs complement the work of either central or local authorities in charge of social sector reforms or programs. In many initiatives implemented by other groups the SPWGs have assumed similar functions that originally are placed with the public agencies whose failure to respond to the information hunger has been redressed to some extent by the SPWGs although it is evident that the government should itself establish effective channels of information exchange with their local stakeholders.

5.2.7 NGO-Private-Government Dialogue

SPU consistently made efforts to find the ways of including the NGOs, authorities, and private sector in the programmatic activities it carries out. During the GCMI Program the SPU initiated or participated in the NGO - Government dialogue on a variety of policy related issues that include education reform, child welfare policy, and poverty reduction strategy development.

In 2002 the SPU initiated the education reform review process by NGOs and independent experts as a result of which a package of recommendations were produced and communicated to the Policy Coordination Unit (PCU), a WB funded agency in charge of the education reform implementation. Moreover the recommendations submitted to the PCU Ministry contained specific suggestions aimed at increasing the possibilities for a wider public participation in the reform implementation processes. Although the PCU developed and launched new initiatives within several components of the reform in the light of the SPU-presented recommendations the actions taken by the authorities did not fully reflect the whole package of suggestions. After the change of the government however the PCU took more interest in the document and many of the recent initiatives are in line with the NGO workgroup recommendations.

In 2002 the SPU has facilitated another round table of social child welfare NGOs that had been initially invited by the Parliamentary Committee on Social Affairs to develop the strategy document for social protection of children. Once the document was developed the SPU facilitated active dialogue of NGOs CBOs with the decision makers to have the document approved by the executive authorities and enacted by the legislature.

The SPU has been involved in the NGO work on the poverty reduction and economic growth strategies and participated in the development of specific recommendations and suggestion at the phase of the PRSP elaboration. Subsequently the SPU was involved in the governmental commission set up for elaborating specific strategies to meet with the millennium goals set forth in the UN Millennium Declaration. Two of the SPU collaborators also regularly participated in the work of education and healthcare sub-commissions. The SPU also participated in the donor NGO coordination board set up with the Georgian Ministry of Labor, Healthcare and Social Affairs and exchange information regarding programs projects or initiatives with other key stakeholders in the area of healthcare and social welfare.

NGO-Government-Private sector dialogue has been solidly advanced at the community level where all SPWG projects unavoidably call for the involvement of stakeholders that mostly include private companies (media, service providers) in the advocacy efforts before the local authorities.

5.2.8 Inform Policymakers about Social Policy Concerns at the Community Level

Both central and local government policymakers have been consistently informed of the processes that the SPU has got underway to help change policies for our constituencies in communities. The Board of Trustees program has been designed to specifically target local and regional school communities. The Ministry and local education authorities have supported this. The World Bank program (PCU) representatives were involved with the development of Reform monitoring by the SPU as well as within the Board of Trustees program. Moreover, a stakeholders' meeting was organized where different public and private organizations or agencies were invited to share the experiences related to their BoT programs. The ten pilot BoTs have also presented their views and ideas regarding further development of education policy in this respect.

The SPU assisted by a consultant from the Tbilisi State University organized a survey on stakeholder inclusion in the education reform that enabled to identify the transparency and openness related weaknesses of the reform and present suggestions to the Ministry PCU as to increasing of civic participation in the reform implementation.

Policy makers in Parliament had been encouraged to discuss the problems of disabled children through the publication of a short document giving the main points of the policy paper developed over the previous year by an experts' group.

In the course of the Program implementation, the SPU's initiatives to inform policymakers on the concerns of local communities had been expanded by the SPWGs, which in the framework of their advocacy projects developed to meet the needs identified in the course of previous informational activities keep pressing the authorities to take decisions or actions for the resolution of the problems. Moreover, the SPWGs directly accessed the local government and in some occasions central government (MoE, MOHLSA). Findings, concerns and recommendations of SPWG members made during the exam monitoring initiative were also communicated to the National Assessment Center (PCU MoE).

5.2.9 Advocate and Lobby for Social Policy Development and Implementation

Sector priorities for communities as identified in the course of the community information workshops held in 2001 include Education, Healthcare and Social Welfare (Inclusive Education and De-institutionalization of Children). All these are currently undergoing, or will, a profound reform with input from UN agencies (the World Bank), US and British Governments, etc. The SPU actively sought to represent citizen's views in appropriate fora and positively contribute to policy formulation, implementation and review.

(a) Social Welfare

In 2002 through the initiative of the Social Affairs Committee of the Georgian Parliament and under the SPU leadership an expert group consisting of NGO leaders and specialists developed a draft of the National Strategy for the Social Protection of Children. The policy document that prioritizes the actions to be taken by public authorities in terms of ensuring adequate social protection for children from marginalized groups or vulnerable families, or those who suffer from various degrees of disabilities, emphasizes the importance of community (CBO, CIG) and civic sector involvement in the initiatives taken at local level. This document was presented by the SPU and discussed at 7 meetings countrywide, attended by 119 people including SPWG members, local authorities, and child institution representatives who provided their feedback that was more or less reflected in the final draft.

The Social Work Education Coordinating Group developed a first draft of a Social Work Code of Ethics, which is being considered within the committee. The SPU also had the document produced by the Intl Federation of Social Workers: Social Work and the Rights of the Child, translated into Georgian. This document is being presented to local and international donors for publication and dissemination, in partnership with UNICEF.

The SPU participates in Expert groups on social work, child welfare and the elderly. Horizonti has been asked by the Government to host the coordinating committee for the World Bank Reforms on Social Welfare, Child Welfare sector when the new government has named ministry personnel to enact these reforms.

(b) Education Policy Development

In 2002 the SPU facilitated education reform review process by NGOs and independent experts as a result of which a package of recommendations were produced and communicated to the WB-funded Policy Coordination Unit and Ministry of Education. Accordingly the PCU developed and launched new initiatives within several components of the reform in the light of the SPU-presented recommendations. Many of the most recent initiatives taken by the MoE PCU in the school system reformation program are in line with the NGO workgroup recommendations.

(c) Primary Healthcare Reform

Primary healthcare reform developed by the MoHLSA and WB team and presented to the Georgian Parliament for approval and ratification of the respective loan agreement has been another focus for the SPU in the reporting period. With input from SPWGs, SPU identified the reform-related issues of primary significance to GCMI-targeted communities. The SPU was also involved in the work of the PHC reform coordination board consisting of international donor organizations and leading healthcare NGOs, whose participation should secure transparent and smooth implementation of the reforms.

Regional PHC workshops organized with input from local consultants assisted SPU to obtain feedback of community leaders on concerns, ideas, suggestions and recommendations that were included and analyzed in the composite report, subsequently communicated to the authorities in charge.

Success and Human Interest Story

ADVOCATING FOR OUR RIGHTS

Nino Jugeli, Senior Liaison Officer
 Article from the West GCMI Newsletter #8 Spring 2004

Overcoming poverty isn't a job for just one person. It requires many of us working together. It takes movement of diverse and committed individuals and groups from Georgian government to community groups and entrepreneurs, from organizations like CARE to people like you.

Policymakers have a responsibility to create and implement policies that address disease, inequality and poverty. Human rights need to be respected to empower people to express their political views, make choices and pursue economic opportunity. Organizations like CARE engage with both decision-makers and communities with the goal to improve education and health care, and address conflicts before they escalate to violence. We believe this is the best way to empower communities to lift themselves out of poverty and fulfill their potential.

You can also make a huge difference in a variety of ways. By understanding the impact of government policies and using your voice with the media and elected officials, you can help raise awareness of important issues. Used well, advocacy is a strategy that can give households and communities improved access and control of local resources. Advocacy is not something to do because it's a good idea, but rather because it is a particularly effective method for addressing certain obstacles to achieving our objectives. In order for W-GCMI communities to get proper understanding of what advocacy can achieve and how to advocate for their rights without creating conflict within the community W-GCMI provided trainings on advocacy to all communities that were mobilized by the project.

Within the frameworks of W-GCMI Horizonti Foundation provided advocacy trainings to CBO representatives. "We had no idea regarding what advocacy meant before West GCMI came to our community, says Mikheil Ushveridze, CBO "Opurchkhети 21st" Chairperson. We could hardly imagine that we could influence policy makers to change their decisions." After the advocacy trainings CBO decided to take direction towards advocacy related activities.

Imereti Social Policy Working Group (SPWG) in partnership with coalition of CBOs has implemented advocacy project in Bagdati, Tskhaltubo and Terjola Districts. We've visited one of the CBOs "Opurchkhети 21st" in the village of Opurchkhети. The CBO was registered in November 2001, since then it has implemented 3 micro-projects with W-GCMI assistance.

How did they start? During community meetings in Bagdati, Tskhaltubo and Terjola Districts public health program financing and failure of local government to comply with the law on some of health care related issues were identified as priority problems. Imereti SPWG and coalition of CBOs got acquainted with local and self-government structures and their responsibilities and also assessed and clarified legislative information in regard to consolidated state insurance fund health care programs that should be funded from local budget. It appeared that local government failed to transfer obligated amount for funding health care programs. The main objective of the project therefore was to protect social rights of people through increased funding of health care programs for urgent in-patient and ambulatory assistance from local budget.

SPWG and coalition of CBOs prepared a letter to District Gangebelis explaining the purpose of the project, its aim and objective. In their letter they also requested that administration of the District makes everything possible to find resources necessary for the fund for their activities. It was considered important to use the media to deliver the message to multiple audiences. Project staff prepared newspaper articles and also provided information through local TV. These activities were followed by community meetings in all Districts with participation of coalition members as well as District Gangebelis. During these meetings participants were provided with the opportunity to discuss the issue directly with District Gangebeli.

Gangebelis have expressed their understanding of the problem and explained that there were different objective reasons to the existing problem, mostly due to the complications with tax collection. At the same time Gangebelis promised to start transferring part of the debt to local consolidated state insurance fund and to also increase the amount of the fund starting from the new FY. It should also be mentioned that after "Rose revolution" situation has changed in regard that local government officials became more open to collaboration and tried their best to support people in this initiative as they thought they would gain people's support in return.

"This project has proved that by coming together we can advocate for our rights and bring useful changes", says CBO chairperson. At the end of our discussion I have asked Mikheil how many people have benefited as a result of this project. "Potentially everybody benefited from this project, as each of us may get in need of emergency health care."

5.2.10 Public Education Campaigns to Inform the Public about Social Policy Reforms

The SPU organized major social policy- and awareness rising-related events such as the education reform, primary healthcare and PREG-P community information meetings to construct a social policy infrastructure with which to reach a large part of the country with grassroots efforts and provide ongoing and vital linkages between national and local policy organs and among communities. In addition, SPU believes that the community reform meeting format developed for the education reform and PREG-P community meetings has been a very effective method to brief a significant number of community leaders on selected, key reform issues

and obtain their feedback, suggestions and recommendations. In total 121 community members attended three workshops held in Ozurgeti, Kutaisi and Zugdidi.

Eight Education Reform Community Meetings organized by the SPU in 2002 both in East and West Georgia were aimed at informing citizens on the details of the Education Reform and the MOE WB Education System Realignment and Strengthening Program (ESRSP), and gathering input from participants at the meeting on their ideas, feelings, perceptions, and recommendations regarding the Education Reform and the ESRSP. As a result of these meetings a Composite Report was drafted and communicated in July to the MoE, who pledged to take on board those ideas and suggestions, which would contribute, to the establishment of community oriented education policy in the country.

In July-November 2002 the SPU provided technical and financial support to SPWGs to organize and facilitate community education reform and healthcare meetings in Samegrelo, Guria and Imereti districts in September-December 2002. The meetings sought to inform community leaders, local NGOs, media, and other interested stakeholders about the ongoing education reform activities and national regional healthcare programs, and to identify the specific interests, needs, or concerns of communities with regard to these programs. Local authorities were also invited to take part. Handouts, leaflets and information papers were prepared and distributed free of charge at the meetings. In total approx. 800 persons attended 23 community meetings held in west Georgia. The identified community concerns were communicated to the regional and district education or healthcare authorities.

In July 2003 SPU in collaboration with local consultants invited from Georgian NGO - Bioethics Society organized Regional Primary Healthcare Community Workshops that sought to deepen the understanding of legal and institutional issues related to the PHC reform by community members, and activate these communities in order to secure their involvement in the reform implementation and respective policy formulation. Another assignment for the experts also included assistance to SPWGs through developing and providing with relevant toolkits and guidance to enable them work with their respective communities for addressing the most acute issues related to the exercise of healthcare rights secured by law in the PHC area. In total 121 persons attended four regional community meetings organized in Zugdidi, Ozurgeti, and Kutaisi, where the communities on their part helped to identify problems of accessibility and quality of healthcare services. The composite report developed following the workshop was communicated to the MoHLSA and the WB-funded reform-implementing agency. The Horizonti regional staff reports clearly indicate on the occasions of successful utilization of information obtained at the regional workshops.

In December 2003 and January 2004 the SPWGs with technical and financial input from Horizonti and SPU organized district or Sacrebulo level primary healthcare and education reform community information workshops that sought to update the participants on the changes in the reform implementation process and deepen their understanding of legal and institutional issues related to the reforms. The feedback of community leaders on their concerns, suggestions and recommendations were included and analyzed in the composite reports that were subsequently communicated to the district, regional or central authorities. In total approx. 1200 persons attended 27 community meetings organized in Guria, Samegrelo and Imereti.

5.2.11 *Coordinating with USAID's SO Teams and Other Donors*

While implementing GCMI program the SPU has been permanently taking efforts to coordinate with other key players involved in the area of social policy or citizen advocacy development. Meetings have been held in Horizonti with World Learning (START), IFES (concerning educational issues) and in the World Bank offices on several occasions where the WB reforms are being implemented in GCMI communities. Meetings have been held on regular bases with the USAID sponsored Save the Children Citizens implemented Advocate Program to exchange information and ideas regarding the challenges and successes of advocacy campaigns implemented by community organizations or NGOs.

The SPU had been also trying to network with local foundations including the OSGF (Soros) concerning boards of trustees program, women's rights, and educational innovations in the Tbilisi municipality. SPU and Horizonti staff had meetings with the World Bank on several occasions where it was agreed that SPU would play a coordinating role in the upcoming Social Welfare reform development process.

5.3 Challenges Encountered during the Program

Problems as opportunities

Social policy challenges were largely seen, in the first report, as the "stuff" of the next years to come in re-creating policies "for the people". In other words, the lack of transparency, the issues of apathy and cynicism by locals concerning any possible changes, although they were seen as challenges for the community mobilizers from CARE, were issues the new social policy unit looked forward to sinking their teeth in. If community mobilization felt "It is unrealistic to think that NGOs will quickly understand the value and importance of community participation in their work and fully integrate it," the social policy unit looked at this as an opportunity. In general, at this point in the GCMI, such challenges at the local level, mirrored by apathy and corruption at governmental levels were-- for the social policy unit-- opportunities.

Community choices challenged or dropped

The fact that environmental waste management, water management and "other health-related environmental issues" were soon dropped from the Social Policy agenda can be seen as a challenge in retrospect. At this point the local communities had clearly requested it. In later years the social policy unit had to--albeit less systematically than the other sectors chosen by communities at this point--find ways to address these important issues.

The main challenge: Weakened structures

a) At the beginning of GCMI the future activity orientation of the social policy unit was already taking form. "Facilitating processes and developing mechanisms whereby government officials are aware of key policy issues identified by communities and communities are aware of social sector policies and reforms" remained a fundamental activity of the SP Unit. However, "Providing sub-grants to CBOs/NGOs regarding specified aspects of social policy development and implementation, and working with communities to address specific local policy reform issues" did not become a tool that the Social Policy Unit could later utilise in their advocacy campaigns, and the SPU was weakened quite early on by the non-fulfilment of this original function:

b) The SPIG will establish an Advisory Council, which will:

Provide technical guidance to the SPIG;

Provide access to societal input;

Review and approve policy grants;

Meet quarterly to discuss strategy, projects, tasks, etc.

Again, this Council never saw the light of day.

c) Clearinghouse of Information: Documenting and disseminating information on good practices and lessons learned on community mobilization strategies, community involvement in social policy development and collaboration between local government and community groups, CBOs/NGOs--this was an ambition that also seemed to never take form completely. In the second half of GCMI a similar function was found in the publication of 8 issues of Social Policy in Georgia, the journal of communities implementing social policy locally. Hind sight is 20/20, but it was clear at the end of GCMI that the original design that envisaged a clearinghouse would have facilitated work with Social Policy Working Groups and the many other partner NGOs and governmental bodies that the SPU had to deal with. The reasons for abandoning it are not clear, and it would seem that the original project design was superior in its scope than the adjustments ultimately made

These three structural "intentions" in the beginning were not approached assertively or for other reasons did not take form. These facts may have impacted the organizational development of the Social Policy Unit over the years to come. It is possible that the main basic challenge for the Social Policy Unit at this point concerned finding human resources that could match the high ambitions that the project originally sought to fulfil. This has been confirmed by consulting some of the correspondence between Mercy Corps, MSI and Horizonti during that time.

The Government was felt to be the biggest challenge, so much so that the SPU changed its Terms of Reference and Goals. The previous version included reference to "promote... accountable and transparent government" which was omitted in the new version: "Informed citizenry taking initiative to promote social development in a collaborative and strategic way with government, NGOs and other civil society groups"

The choice of community-led advocacy issues and the need to reinforce the issues with grants.

The villagers continued to request assistance with:

- Education: rehabilitation of education facilities
- Culture and sport: re-establishing cultural centers and youth clubs
- Environmental health: waste management, safe drinking water
- Public services and infrastructure development: improving living conditions of IDPs, rehabilitation of electricity systems, repairing roads and bridges
- Civil society development: NGO coordination centers, collaboration with local government and NGOs

However, the Mercy Corps Grants sector increasingly assisted organizations that wished to work on Inclusive Education and other social issues, perhaps with the facilitation of the Social Policy Advisor. A total of seven grants were awarded for this, equal to 15 % of the total number of grants for this program area during this period. Since this subject is not one of the advocacy issues, increasingly the SPU became "divided among itself" and took on subjects which villagers had not yet become acquainted.

The enormous information vacuum in communities.

The need for information was unending. "Some of the constraints in receiving information as identified by the participants included: incompetence of public servants, bureaucracy, lack of professionalism, indifference and blocking information by state officials and deliberate withholding of information by government officials, having no information on citizens' rights, to whom people can apply to, disruption of direct communication due to lack of electricity, corruption, non-existence of TV broadcast in some districts, scanty information in the mass media, language barriers, non-existent independent local press, inactivity of communities and weak collaboration with NGOs, low level of social-economic wealth of population (cannot buy a newspaper), poor level of performance by mass media and incompetence of relevant cadres responsible for information dissemination, and lack of social sector database." In later months during GCMI the challenge was somewhat diminished; however USAID began to question the number of meetings necessary for the SPU to address this important information issue. The SPU tried to develop other means to make a wider impact.

Continuing need for information in communities after two years i.e., rural-level community information workshops, surveys, focus group discussions. The SPU had not yet developed a wide-ranging grass-roots strategy to increase the level of information and monitor it. This was likely due to the limited means at their disposal (transportation, communications, printing costs, etc).

Change in Government in 2004. This often meant that—even though democracy made a big step in some ways—many efforts to get local authorities on board went for naught. New persons replaced them and the communities had to begin all over to 'make friends' with local authorities. Similarly, valid employees at the national level were often 'phased out' simply for having worked in the former government, even if they were knowledgeable and held the key to important issues.

Anticipated Developments in the Coming Months

Having a regard to the knowledge and skills of SPWG members, there are several possibilities of transformation: information resource center, advocacy alliance, social sector oriented NGO providing not only advocacy services to communities, etc. After the National Conference the SPWGs defined their 'identity' and presented to the SPU their strategic **development (sustainability) plans** elaborated through Horizonti local staff technical input. According to the work plans submitted in September the SPWGs will go through the registration procedures in August and September. Since September 2004 the SPWGs will also be engaged into the fundraising. Horizonti and both MC and CARE have or intend to include the SPWGs in their future programs or projects since these groups are very good human or organizational resource for those programs that are to be implemented on the community level. Meantime in addition to the fundraising the SPWGs will also work on several initiatives, including the development of information databases, education and PHC reform monitoring, etc. The **healthcare toolkit** developed for GCMI communities to assert their healthcare related rights secured by the Georgian law are adapted in Russian and Azeri languages and will be subsequently disseminated in the communities of Kvemo Kartli and Samtskhe-Javakheti.

The **NGO Coordination Board** set up by the Ministry of Healthcare, Labour and Social Welfare in 2003 has been disbanded and is being re-organized for the present with a broader mandate since the Board will be invited to share information and feed in with the policy recommendations both in the areas of healthcare and social welfare. Horizonti will continue to participate in the work of the Board as we have been involved in the work of the previous Board and maintained policy development through obtaining a wide NGO and community participation. Through the Horizonti participation in the board a channel will be established through which the

SPWGs will be enabled to obtain information on most recent healthcare initiatives and to feed in at some points in the policy making.

For the present the **Ministry of Education and the PCU** are contemplating **amendments into the Regulations** that will also affect the **BoTs**. The new regulations will be proposed to Parliament in May and hopefully adopted shortly so that both policy framework and boards of trustees can be clearly understood. Soon after the amendments **revised brochure on BoT election and functions** will be produced to incorporate new legal framework and to help communities as of September, to elect and train their Boards. Horizonti through available channels will provide information to SPWGs, CIGs, CBOs and NGOs on the Ministry initiatives and where relevant assist the SPWGs to approach the Ministry.

The **Georgian Association of School Boards** founded through the SPU's technical input will further develop institutionally in the fall 2004. As anticipated the GASB will develop programs assist the school personnel and community members to properly organize around the BoT elections in accordance with the new school regulations and to build the capacities of elected BoT members.

Horizonti will continue participation in the implementation process of the **framework policy document for Child Welfare developed under its leadership**. In September-October the Georgian Parliament will review the draft amendments into the education law and a part of those that relate to the inclusive education (access to education for the children with disabilities). Horizonti will also seek possibilities to facilitate further initiatives and advocacy for ensuring government's compliance with the framework policy document.

The SPU has been working with both CIDA and TEMPUS EU partners to find a best solution to **inaugurate Social Work Education at the State University of Tbilisi**. Work is on going and a first class is likely to start this academic year (September 2004) on Community Development. The Social Work Education Coordination group will meet one last time to discuss all the achievements over the last two years, of this coordination group.

Having a regard to anticipated **social welfare reform** to be launched through the WB support, Horizonti will offer the public and nonprofit sectors its services as of a facilitator of the coordination team or workgroup to be formed to develop the reform strategy and synergize various SW policy development programs implemented by local or international organizations.

SPU will collect information on best advocacy practices and experiences within GCMI communities and put them in an **advocacy manual** that will be subsequently disseminated among the targeted communities. The edition will contain laws or extracts from the laws (international treaties) appertaining the advocacy actions and the respective citizen rights. Most importantly, the manual based on the successful examples and cases as well as Horizonti advocacy training modules will describe the methodologies and tools of designing and implementing grassroots, regional or national-level advocacy initiatives. As thought, the manual will be disseminated beyond the GCMI communities as well.

Horizonti has built close contacts with SPWGs and GCMI target groups through providing information and consultation on a variety of issues. After completion of the Program Horizonti and SPWGs will continue to operate and will likely serve as **information resource centers** for these communities.

5.4 Management, Coordination, Program Monitoring

Coordination

During the GCMI program implementation the SPU has been coordinating with other key players both international and local involved in the area of social policy or citizen advocacy development. Regular meetings or information exchange on a variety of issues has occurred with USAID contactors and other international organizations including World Learning, IFES, SAVE, World Bank, UNDP, OXFAM-GB, etc.

The SPU had been networking with local foundations and NGOs including the OSGF, UNA, GYLA, PSI, GEDI, etc. Coordination with NGOs has been especially active in those regions or districts where SPU or SPWGs were implementing information or advocacy campaigns.

The SPU's efforts to participate in the national social policy development had been taken in close coordination with the national public agencies including the MOLHSA and MoE as well as their regional or district units, Georgian Parliament and its various committees. A large number of meetings with policy makers both from the executive and the legislature were held during the SPU's advocacy campaigns.

Project: Georgia Community Mobilization Initiative
 Sub-Grantee: CARE - Caucasus
 Funding Source: USAID No: 114-A-00-00-00149-00

**QUARTERLY EXPENDITURE STATEMENT
 FOR THE PERIOD from 1 October 2000 to 30 September 2004**

DESCRIPTION	TOTAL FY 01	TOTAL FY02	TOTAL FY 03	June'04	July'04	Aug'04	Sept'04	TOTAL FY 04	TOTAL Expenses	BUDGET	BALANCE	% EXP.
Salaries	214,788	577,120	505,685	53,432	64,014	43,687	66,231	684,895	1,982,488	2,047,739	65,251	97%
Fringe benefits	108,566	29,226	97,362	11,530	11,880	10,193	11,700	148,713	383,867	384,233	366	100%
Travel	14,972	104,276	119,772	19,958	18,058	29,913	52,678	286,515	525,535	609,060	83,525	86%
Supplies & Equipment	195,953	(6,413)	28,399	8,315	746	724	360	22,647	240,586	242,281	1,695	99%
Contractual (IMC)	126,909	163,564	198,690	9,378	8,558	9,413	18,135	225,875	716,038	705,571	(10,467)	101%
Other Direct Costs	96,744	112,163	161,674	14,170	22,546	14,333	44,955	267,179	637,760	636,736	(1,024)	100%
Sub-awards	-	511,352	1,079,494	483,663	251,070	499,100	51,130	4,219,590	5,810,438	6,142,832	332,396	95%
TOTAL DIRECT COSTS	757,932	1,491,286	2,192,076	600,466	376,872	607,363	245,189	5,855,414	10,296,710	10,768,452	471,742	96%
NICRA	58,528	115,155	177,430	53,321	29,509	47,557	19,200	507,053	858,166	831,540	3,965	100%
ICR ad)	816,460	6,503	34,496	653,797	406,361	(71,590)	264,389	6,290,877	(30,591)			
TOTAL EXPENSES		1,612,946	2,404,002			583,330		6,290,877	11,124,285	11,599,992	475,707	96%

ANNEX 1

Annex 1

SO/IR NO.	RESULT STATEMENT	PERFORMANCE INDICATOR	DATA SOURCE	TARGETS AND ACTUALS BY PROJECT YEARS							
				Year 1		Year 2		Year 3		Year 4	
				Proposed	Actual	Proposed	Actual	Proposed	Actual	Proposed EOP	Actual EOP
SO 3.1	Reduced Human Suffering in Targeted Communities(# of individuals in target vulnerable communities served by WGCMI Interv.	# of vulnerable individuals with improved access to basic services	CARE	75,000	27,274	235,000	157,411	395,000	754,188	555,000	1,997,988
IR 3.1.2	Vulnerable Communities Meet Own Needs	1. # community groups (community action teams) organized to assess local needs 2. # community projects completed	CARE	75	58	159	174	289	300	300	300
				75	12	200	71	425	306	550	535

SO/R NO.	RESULT STATEMENT	PERFORMANCE INDICATOR	DATA SOURCE	TARGETS AND ACTUALS BY PROJECT YEARS							
				Year 1		Year 2		Year 3		Year 4	
				Proposed	Actual	Proposed	Actual	Proposed	Actual	Proposed EOP	Actual EOP
IR 3.1.2.1	Increased Capacity to Deliver Health and Other Services	1. Community contribution to selected projects	CARE	93750	47110	247074	298,793	690625	1,459,080	888730	2,554,995
		a. Total Amount		93750	47,110	247074	298,793	690625	1,459,080	888730	2,554,995
		i. Cash			0		1800		1800		14,300
		ii. Material		61,600	18,846	98829	112,943	276250	551,532	355492	987,720
		iii. Labor		32150	28,284	148245	184,050	414375	905,748	533238	1,573,075
		b. Average % per project		b. 20%	36.36%	b. 25%	38.50%	b. 25%	41.58%	b. 25%	41.48%
		2. Attributable # direct beneficiaries receiving services from activities under IR 3.1.2.1	CARE and NGO Partners	74,000	19,790	219217	85,032	316818	403,128	410,000	849,012
		% women benefiting from micro-projects			10,860 54.9%		45,924 54.1%		214,421 53.2%	225,500	453,440 53.28%
		% children under 17 benefiting from micro-projects			4,985 25.2%		26,112 30.7%		104,384 25.8%	98,400	225,899 27.2%
		% IDPs benefiting from micro-projects			565 2.8%		2,851 3.35%		38,000 5%	28,700	24,063 2.8%
# of micro-projects addressing the following: education, transport, drainage, irrigation, electrification, water, sanitation, health, civil society and other communal needs.			12		71		308		635		
				education - transport - drainage - electric - water - health - civil society		education - transport - drainage - electric - water - health - civil society		education - transport - drainage - electric - water - health - civil society		education - transport - drainage - electric - water - health - civil society	

SOBR NO.	RESULT STATEMENT	PERFORMANCE INDICATOR	DATA SOURCE	TARGETS AND ACTUALS							
				Year 1		Year 2		Year 3		Year 4	
			Proposed	Actual	Proposed	Actual	Proposed	Actual	Proposed EOP	Actual EOP	
IR 3 1 2 2	More Active Participation	1 # jobs created by USAID programs (WGCM)	CARE	34	1	32	6	54	3475	9072	
				75	58	177	174	300	300	4330	
		# of pre-existing CBOs strengthened	1650	281	583	6500	2986	7486		9072	
				907	281	3575	1488	3734		4330	
		# of CBOs completing formal training curriculum	33	12	125	71	306		635		
		# of individuals trained	CARE	875	0	1750	0	2625	3475	3148	
				481/393	0/0	862/792	0/0	1443/1185	1925/1575	2671/577	
		n of Vulnerable Groups in the Economy	CARE	87/87	0/0	174/1574	0/0	261/2361	350/3150	793/2365	
				0	0	450	0			1716	
		2 # individuals who receive loans from USAID (WGCM)	CARE	300					N/A	1701	
				144/156						1421/280	
		a # Microenterprise loan borrowers (Group lending)	CARE	75/225						343/1358	
		i. Total	CARE	300						1701	
				144/156						1421/280	
		ii. Female/Male	CARE	75/225						343/1358	
		iii. IDPs/Locals	CARE	75/225						343/1358	

SO/R NO.	RESULT STATEMENT	PERFORMANCE INDICATOR	DATA SOURCE	BASELINE DATA		TARGETS AND ACTUALS								
				Year	Value	Year 1		Year 2		Year 3		Year 4		
						Proposed	Actual	Proposed	Actual	Proposed	Actual	Proposed EOP	Actual EOP	
		b # SME loan borrowers Individuals loans												
		i. Total						150		100				
		ii. Female/Male						72/78		48/52				16 8/8
		iii. IDPs/Locals						37/113		25/75				2/13
		3 Attributable # direct beneficiaries receiving services from activities under IR 3 1 2 2	CARE	N/A	N/A									
		i. Total				400		2312		1700				1716
		ii. Female/Male				200/200		1110/1210		816/884				1430/286
		iii. IDPs/Locals				100/300		578/1734		425/1275				345/1371
		iv. Youth/Adults												

ANNEX 2

Success Indicators for Ambulatory Rehailitation Projects

of ambulatory visits calculated by month (e.g. # patients have visited ambulatory in 8 months before and after amb. rehab.)

	Abedati	Bandza	Khamiskun	Total	%		
Before:	408	912	173	1493	35.4	Average before:	498
After:	492	1244	286	2022		Average after:	674

of vaccinations for children (8 months before and after ambulatory rehabilitation)

	Abedati	Bandza	Khamiskun	Total	%		
Before:	373	492	303	1168	29.2	Average before:	389
After:	537	615	357	1509		Average after:	503

Types of medical intervention (therapeutic, pediatric, vaccination and dentist)

	Abedati	Bandza	Khamiskun	Total	%		
Before:	3	3	3	9	33.3	Average before:	3
After:	4	4	4	12		Average after:	4

of tests (including blood tests) conducted by lab

	Abedati	Bandza	Khamiskun	Total	%		
Before:	206	691	276	1173	14.4	Average before:	391
After:	292	678	372	1342		Average after:	447

Success Indicators for Electric Systems Rehailitation Projects

How many local businesses will be affected by this project

	Narazeni	Znakva	Rodinouli	Tsikvaki	Total	%		
Before:	7	2	8	2	19	68.4	Average before:	5
After:	16	3	10	3	32		Average after:	8

Number of employees per business that will be affected by this project

	Narazeni	Znakva	Rodinouli	Tsikvaki	Total	%		
Before:	87	14	9	14	124	133.9	Average before:	31
After:	238	22	13	17	290		Average after:	73

How many other businesses currently operate in the community

	Narazeni	Znakva	Rodinouli	Tsikvaki	Total	%		
Before:	7	2	1	0	10	110.0	Average before:	3
After:	16	3	2	0	21		Average after:	5

How many households have electric meters

	Narazeni	Znakva	Rodinouli	Tsikvaki	Total	%		
Before:	127	342	770	420	1659	19.3	Average before:	415
After:	369	342	825	443	1979		Average after:	495

How many hours a day community have electric supply

	Narazeni	Znakva	Rodinouti	Tsirkvaki	Total	%	Average before:	
Before:	2	5	6	6	19		5	
After:	18	8	22	24	72	278.9	18	

How many hours a day electricity provided to schools

	Narazeni	Znakva	Rodinouti	Tsirkvaki	Total	%	Average before:	
Before:	2	4	6	7	19		5	
After:	8	8	22	8	46	142.1	12	

Working hours of ambulatory

	Narazeni	Znakva	Rodinouti	Tsirkvaki	Total	%	Average before:	
Before:	2	n/a	5	7	7		2	
After:	8	n/a	6	8	14	100.0	4	

Success indicators for feeder road rehabilitation project

How many local businesses will be affected by this project

	Likheti	Total	%	Average before:	
Before:	6	6		6	
After:	12	12	100.0	12	

Number of employees per business that will be affected by this project

	Likheti	Total	%	Average before:	
Before:	20	20		20	
After:	39	39	95.0	39	

Attendance at local Schools (# of students from September to May)

	Likheti	Total	%	Average before:	
Before:	504	504		504	
After:	584	584	15.9	584	

Number of visits to ambulatory (May 2002 - April 2003)

	Likheti	Total	%	Average before:	
Before:	334	334		334	
After:	348	348	4.2	348	

Migration rate in last two years

	Likheti	Total	%	Average before:	
Before:	66	66		66	
After:	18	18	266.7	18	

Success indicators of secondary school rehabilitation projects

Number of students at school

	Chrebaio	Kojobani	Akhali Sopeli	Erketi	Total	%		
Before:	160	230	95	n/a	485		Average before:	121
After:	182	215	100	n/a	497	2.5	Average after:	124

Student attendance last school year (September 2003 - May 2004) - average month

	Chrebaio	Kojobani	Akhali Sopeli	Erketi	Total	%		
Before:	134	218	n/a	n/a	352		Average before:	88
After:	182	207	n/a	n/a	389	10.5	Average after:	97

How many parents with school-age children have visited ambulatory - average month

	Chrebaio	Kojobani	Akhali Sopeli	Erketi	Total	%		
Before:	15	6	n/a	n/a	21		Average before:	5
After:	3	4	n/a	n/a	7	200.0	Average after:	2

Number of total classes held (average winter)

	Chrebaio	Kojobani	Akhali Sopeli	Erketi	Total	%		
Before:	300	256	n/a	n/a	556		Average before:	139
After:	600	340	n/a	n/a	940	40.9	Average after:	235

Number of graduates

	Chrebaio	Kojobani	Akhali Sopeli	Erketi	Total	%		
Before:	23	15	n/a	12	50		Average before:	13
After:	26	19	n/a	14	59	18.0	Average after:	15

Level of migration

	Chrebaio	Kojobani	Akhali Sopeli	Erketi	Total	%		
Before:	35	n/a	n/a	n/a	35		Average before:	9
After:	15	n/a	n/a	n/a	15	133.3	Average after:	4

Equipping Classrooms. SbS projects

Capacity Building for School personnel and primary grade children

of Students of primary grades at school

	Kojobani	Akhali Sopeli		%		
Before:	76	95	171		Average before:	86
After:	78	100	178	4.1	Average after:	89

of Teachers trained in interactive teaching Methodology

	Kojobani	Akhali Sopeli		%		
Before:	0	0	0		Average before:	0
After:	6	4	10	10.0	Average after:	5

Family participation

of parents received the educational training and support regarding child-rearing practices

	Kolobani	Akhali Sopeni		#		
Before:	0	0	0	154.0	Average before:	0
After:	79	95	174		Average after:	87

Planning a child-centered program

if short-term plans for individual child learning and development developed by teachers

	Kolobani	Akhali Sopeni		#		
Before:	0	0	0	154.0	Average before:	0
After:	79	95	174		Average after:	87

Health and safety

of written records about children health conditions maintained by school personnel

	Kolobani	Akhali Sopeni		#		
Before:	0	0	0	154.0	Average before:	0
After:	79	95	174		Average after:	87

of training sessions on safety procedures and personal hygiene provided by teachers to the children

	Kolobani	Akhali Sopeni		#		
Before:	0	0	0	17.0	Average before:	0
After:	7	10	17		Average after:	9

Sports Hall Rehabilitation Success Indicators

of sports events held (12 months before and after)

	Sujuna	Opurchkhet	Perevisa	Erketi	Total	%		
Before:	18	4	1	n/a	23	82.6	Average before:	6
After:	27	7	8	n/a	42		Average after:	11

Types and numbers of sports/culture and other clubs

	Sujuna	Opurchkhet	Perevisa	Erketi	Total	%		
Before:	6	4	1	4	15	100.0	Average before:	4
After:	9	7	5	9	30		Average after:	8

of students playing sports and participating in culture and other clubs

	Sujuna	Opurchkhet	Perevisa	Erketi	Total	%		
Before:	120	82	12	n/a	214	102.3	Average before:	54
After:	178	130	125	n/a	433		Average after:	108

of awards won by sports team in the 12 months before and after project implementation

	Sujuna	Opurchkhet	Perevisa	Erketi	Total	%		
Before:	6	12	0	n/a	18	-61.1	Average before:	5
After:	6	1	0	n/a	7		Average after:	2

of addition sports activities school plans to add

	Sujuna	Opurchikheti	Perevisa	Erketi	Total	%		
Before:	3	3	3	n/a	9	22.2	Average before:	2
After:	4	4	3	n/a	11		Average after:	3

of teachers teaching sports and cultural activities

	Sujuna	Opurchikheti	Perevisa	Erketi	Total	%		
Before:	3	3	1	n/a	7	100.0	Average before:	2
After:	5	7	2	n/a	14		Average after:	4

Cultural Center / Multi-purpose building rehabilitation projects

of events held (last 12 months)

	Perevisa	Kolobani		%		
Before:	1	17	18	88.9	Average before:	9
After:	6	28	34		Average after:	17

Types and numbers of sports/culture and other clubs

	Perevisa	Kolobani		%		
Before:	1	6	7	100.0	Average before:	4
After:	3	11	14		Average after:	7

of members of each club

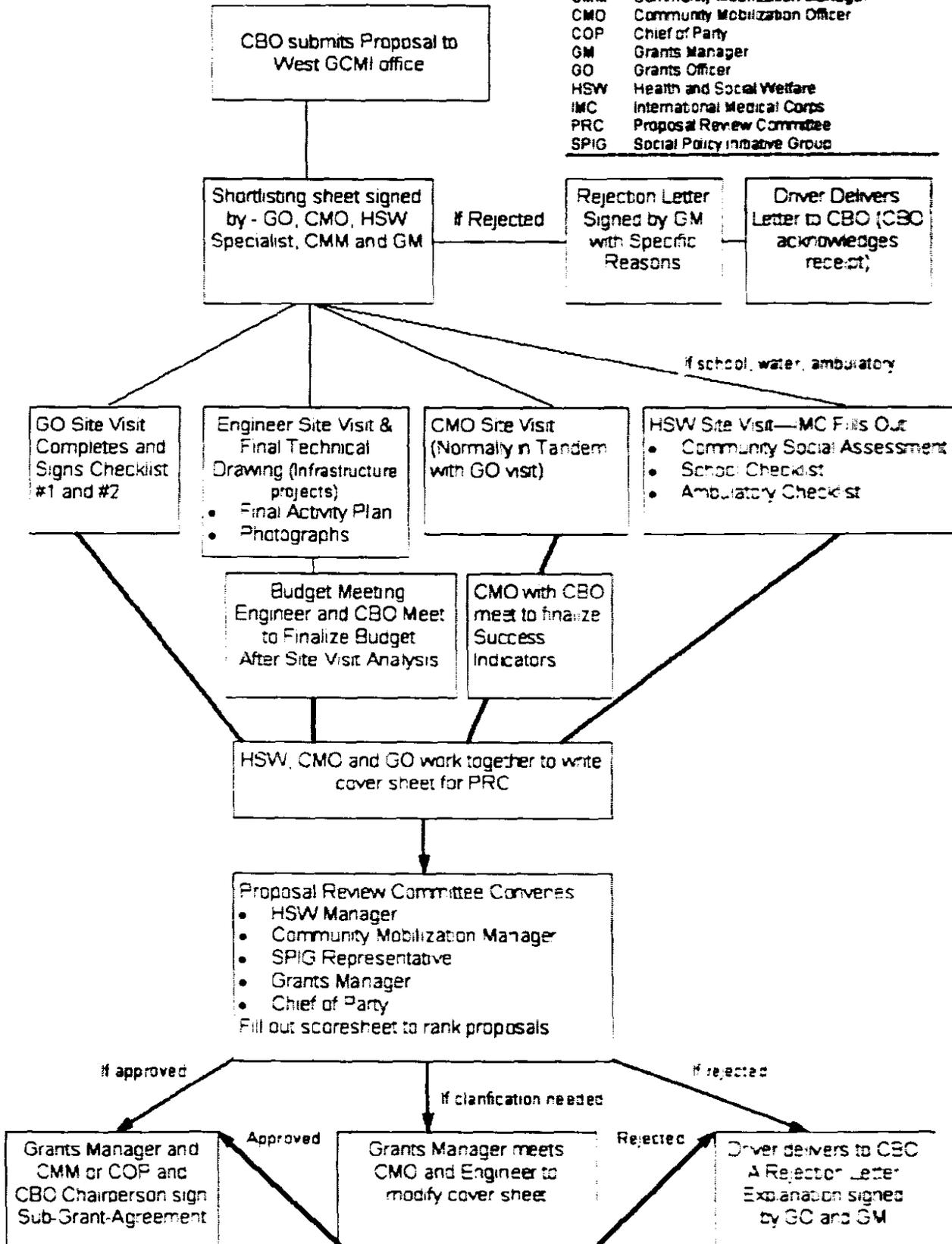
	Perevisa	Kolobani		%		
Before:	18	74	92	147.8	Average before:	46
After:	24	204	228		Average after:	114

ANNEX 3

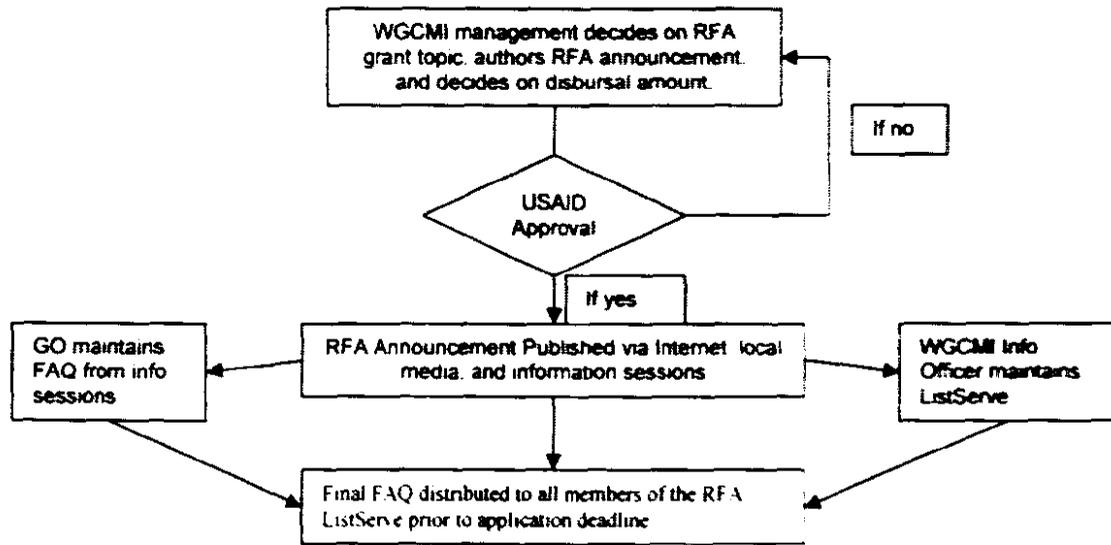
Updated as of 14-Apr-2003

Key (alphabetically)

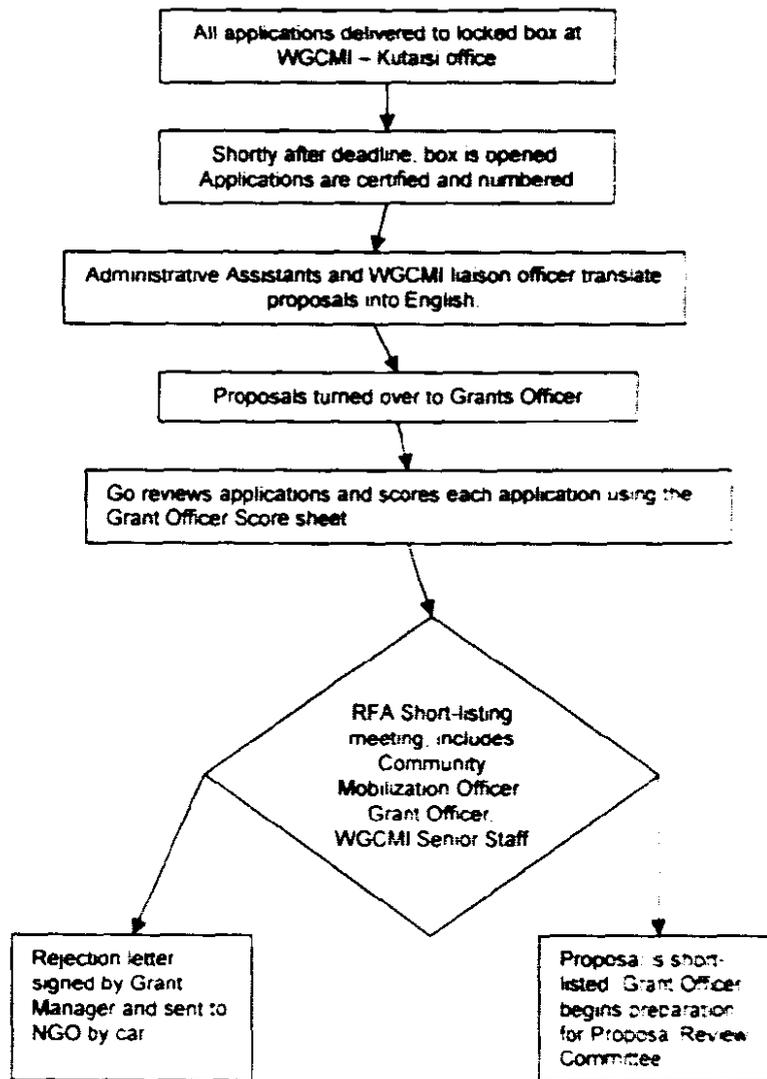
- CBO Community-Based Organization
- CMM Community Mobilization Manager
- CMO Community Mobilization Officer
- COP Chief of Party
- GM Grants Manager
- GO Grants Officer
- HSW Health and Social Welfare
- IMC International Medical Corps
- PRC Proposal Review Committee
- SPIG Social Policy Initiative Group



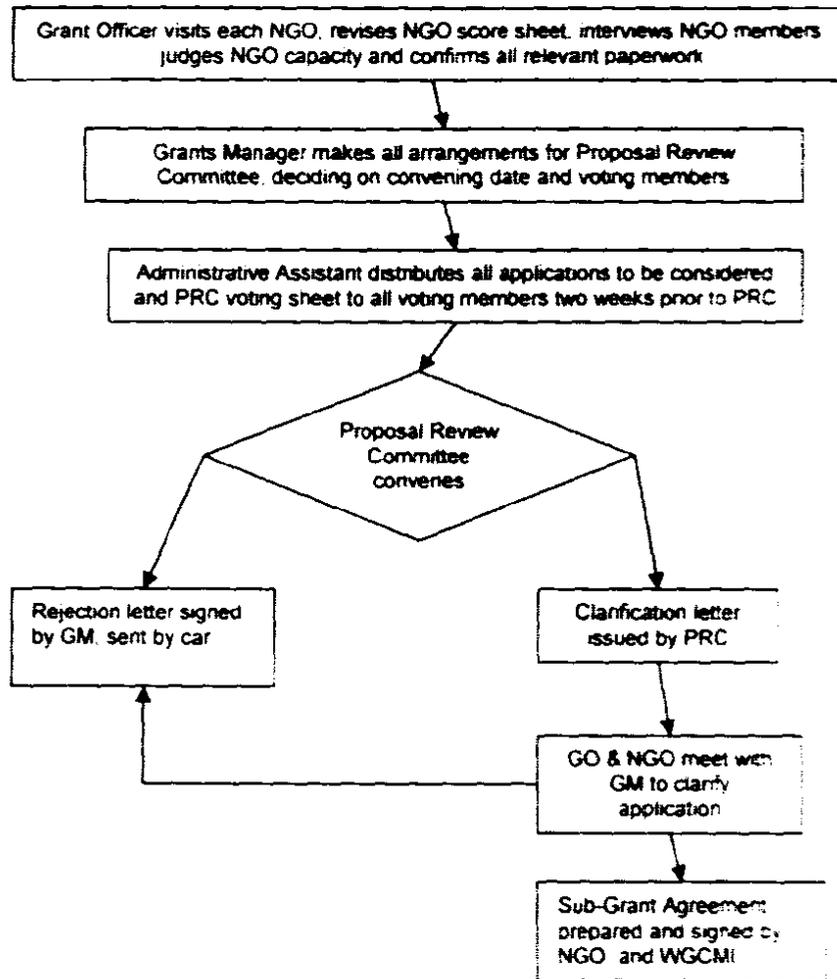
RFA Grant Process – Announcement and Application Process



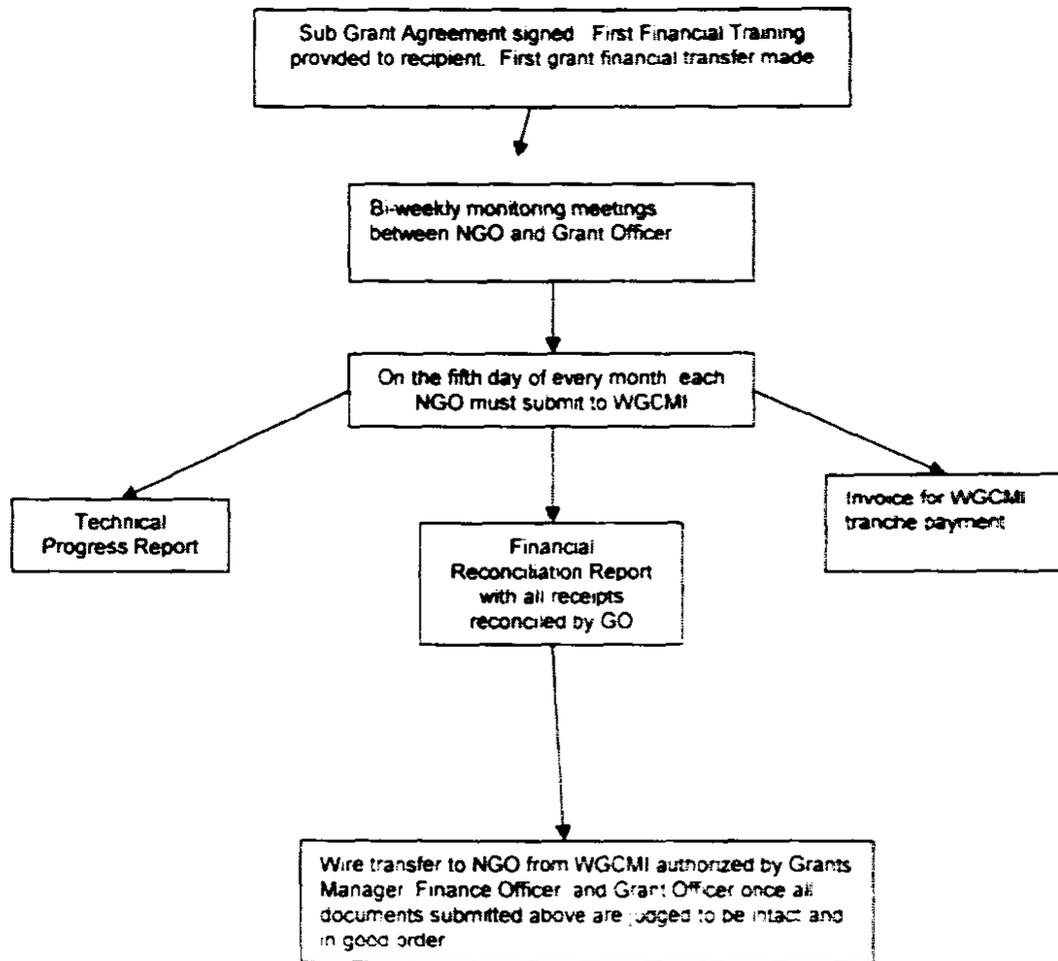
RFA Evaluation of Applications



RFA Short-listed Proposals



RFA Project Monitoring



ANNEX 4

Representing Partner: CARE International, Address No. and Type: CA 1164-00-00-00140-00
 Report for the Life of the Activity: September 2003 - September 2004

Referral for Proposal (RFAs)

WOCM

REQUEST FOR APPLICATIONS (RFAs) 2000 - 2004

1. Below is the summary of grants given through the CARE-WOCM RFA mechanism

SUMMARY	Number of NGO Projects	Grants Awarded
I. Agriculture RFAs	6	\$532,421.62
II. Community Mobilization RFAs	13	\$324,422.00
III. Health & Social Welfare RFAs	2	\$20,179.38
IV. Economic Opportunities RFA	1	\$20,179.38
V. Food Distribution RFA	1	\$0.00
VI. Water Education RFA	1	\$20,179.38
TOTAL RFAs - Funded by USAID 100%	22	\$907,282.68
VII. Water Education Initiative RFA - OCEC	1	\$ 58,986.28
VIII. Water Education Initiative II RFA - OCEC	1	\$ 48,328.37
TOTAL RFAs Funded by OCEC	2	\$107,314.65

All RFAs I - VI (USAID) GRAND Total	\$1,691,398.38
All RFAs VII - VIII (OCEC) GRAND Total	\$107,314.65

2. Proposed Targets for RFAs Funded by USAID

Total Available Funds for Community Mobilization RFAs
 Total Available Funds for other RFAs
 Total Remaining Funds

Funds Obligated According to USAID Agreement	Percent Disbursement of funds over award amount	Funds Remaining for awards
\$400,000.00	83.24%	\$72,799.87
\$1,292,398.38	81.28%	\$292,528.45
\$1,692,398.38	81.58%	\$514,722.66

Funds Obligated According to OCEC Agreement	Percent Disbursement of funds over award amount	Funds Remaining for awards
\$107,314.65	99.12%	\$1,642.12
\$107,314.65	99.12%	\$1,642.12

OCEC Funds

3. Details list of projects awarded through RFA mechanism

I. Agricultural RFAs				
Agricultural RFA (School Youth Clubs):				
Began 17 Jan. 2003, Finish 17 January 2004				
REASD Approval Received 20 December 2002				
				Sub Total
RF 027-0078	ADABCI			\$24,791.00
RF 027-0079	Guna Agro Business Center (ABC)			\$23,202.00
	Total:			\$58,003.00
General Agricultural RFA I				
Began May 6 June 2003, Finish June 2004				
Received REASD Waiver for Purchase 20 March '03				
REASD Approval Received May 5 2003				
				Sub Total
RF 027-0074	Business Support Center (BSC)			\$19,201.94
RF 027-0075	Guna Agrobusiness Center (ABC)			\$17,710.00
RF 027-0076	Hazretut Growers Association (HGA)			\$40,111.00
RF 027-0077	Imereti Agro Ecological Association			\$44,182.67
RF 027-0078	Society Development Union			\$26,445.11
RF 027-0079	Shalom Club			\$14,157.11
	Total For Agr RFAs	\$332,421.62 Total:		\$274,418.62
II. Community Mobilization RFAs				
Community Mobilization RFA I (Imereti, Samegrelo & Gurja)				
Began 25 March 2002, Finish March 2003				
				Sub Total
RF 027-0070	ADABCI	\$24,840.00	\$4,583.80	\$1,465.00
				\$30,888.80
RF 027-0071	VTJC	\$24,978.00	\$5,811.38	\$1,350.50
				\$31,139.88
RF 027-0072	Human Being and Environment	\$15,810.00	\$1,157.41	\$0.00
				\$16,967.41
	Total:			\$82,496.29
Community Mobilization RFA II (Adjara & Racha)				
Began on 17 Jan. 2003, Finish 17 September 2003				
REASD Approval Received 19 December 2002				
				Sub Total
RF 027-0073	ADABCI			\$19,201.94
RF 027-0074	Black Sea EcoAcademy			\$17,710.00
RF 027-0075	Young Scientists Union "Intellect"			\$17,190.00
	Total:			\$54,101.94
Community Mobilization RFA III (Imereti, Samegrelo, Gurja)				
Began on 7 April 2003, Finish 7 December 2003				
REASD Approval Received 18 November 2002				
				Sub Total
RF 027-0076	ADABCI			\$20,421.11
RF 027-0077	Human Being and Environment			\$17,710.00
RF 027-0078	VTJC			\$17,048.19
	Total:			\$55,179.30
Community Mobilization RFA IV (Adjara & Racha)				
Began July 27 2003, Finish April 2004				
REASD Approval Received April 16th 2003				
				Sub Total
RF 027-0079	ADABCI			\$17,710.00
RF 027-0080	Black Sea EcoAcademy			\$17,710.00
RF 027-0081	Young Scientists Union "Intellect"			\$17,710.00
	Total:			\$53,130.00
Community Mobilization RFA V "GEF Projects" (Imereti, Racha Lechkhumi, Samegrelo, Gurja)				
Began on 7 May 2004, Finish July 7 2004				
GEF Mobilization				
				Sub Total
RF 027-0082	ADABCI			\$19,201.94
RF 027-0083	Human Being and Environment			\$17,710.00
RF 027-0084	Foundation "ERANI"			\$17,710.00
	GRAND Total For all CM RFAs	\$324,422.00 Total:		\$324,422.00
III. Health/Social Welfare RFAs				

Social Protection RFA (1)			
Began 16 Sept 2003. Finish Sept. 2003			
USAID Approval Received September 16th 2003		Sub Total	
FA 201 01 78	Children and Mothers Support Organization "Taman"		\$30,200.00
FA 201 01 86	Cultural-Humanitarian Fund "Suburam"		\$27,148.00
FA 201 01 88	Helpers International Foundation		\$21,138.00
Total:			\$78,486.00
Health Education (HE) RFA			
Began August 7 2003. Finish August 2004			
USAID Approval Received May 7th 2003		Sub Total	
FA 201 01 77	ISRG Began on 15 July 2003. Finish May 2004		\$16,894.13
FA 201 01 77	Grass Roots Support Center 15 July 2003 - May 2004		\$18,528.25
FA 201 01 77	Robert Puh Began on 16 July 2003. Finish Feb 2004		\$28,627.20
Total:			\$124,050.38
Community-Based Health Financing (CBHF) RFA			
Began on 27 June 2003. Finish May 2004			
USAID Approval Received June 9, 2003		Sub Total	
FA 201 01 77	Curabo		\$14,285.00
Total:			\$14,285.00
Community Based Social Services RFA			
Began August 7 2003. Finish August 2004			
USAID Approval Received to advertise RFA: March 17th 2003		Letter of Intent	Sub Total
USAID Approval for winner NGO Received July 29th 2003			
FA 201 01 77	Association Adep		\$22,740.00
FA 201 01 77	Association Child & Environment		\$27,488.00
FA 201 01 77	Children and Mothers Support Org "Taman"		\$18,878.20
FA 201 01 77	The First Step		\$24,488.70
FA 201 01 77	Georgian Association of Mental Health		\$32,858.94
FA 201 01 77	Psychometric and Consulting Association		\$25,898.00
FA 201 01 77	Vocational Training & Job Center (Kutaisi)		\$19,967.65
Total:			\$184,404.35
Community Integrated Management of Childhood Illnesses (CIMCI) RFA			
Began on 4 August 2003. Finish March 1 2004			
USAID Approval Received to advertise RFA: April 16th 2003			
USAID Approval for winner NGO Received July 29th 2003		Sub Total	
FA 201 01 77	Children's Rights Defense Association - Caritas KIC		\$49,739.25
Total:			\$49,739.25
Step by Step (SbS)			
Began 11 September 2003. Finish September 2004			
USAID State Source Monitor Approval Received May 7th 2003		Sub Total	
FA 201 01 77	Center of Educational Initiatives (CEI)		\$40,000.00
Total:			\$40,000.00
OSMD Total Health & Social Welfare RFA: \$538,822.90			
IV. Economic Opportunities (Income Generation) RFA			
Economic Opportunities - Group Lending Initiative (GLI) RFA			
Began July 25 2003. Finish August 2004			
USAID Approval Received to advertise RFA: March 24th 2003			
USAID Approval for winner NGO Received July 29 2003		Sub Total	
FA 201 01 77	Concerta Foundation		\$350,000.00
Total:			\$350,000.00
V. Food Distribution RFA			
Feeding Program for Orphanages, Children's Institutions and elderly pensioners			
Began on January, 2004. Finish May 2004			
USAID Approval for winner NGO Received January 15, 2004		Sub Total	
FA 201 01 78	Caritas Georgia/Caritas Charitable Foundation		\$21,571.44
FA 201 01 78	"Lazans" charitable fund of Georgian Patriarchs		\$64,203.24
Total:			\$85,774.68
VI. Voter Education RFA			
Voter Education I - RFA USAID			
Began on 1 Sept 2003. Finish Oct 2003			
USAID Approval Received to advertise RFA: June 27th 2003			
USAID Approval for winner NGO Received Aug 22th 2003		Sub Total	
FA 201 01 01 01	RACHA Lachitium & Lower Svaneti Self-reliance Association		\$1,194.00
FA 201 01 01 01	Amendment 20 Sept 2003 Printing Materials RFA GC 11 001 55		\$1,126.85
FA 201 01 01 01	Georgian Young Lawyers Association Kutaisi Branch Office		\$47,133.55
FA 201 01 01 01	Amendment 20 Sept 2003 Printing Materials RFA GC 11 001 55		\$421.28
FA 201 01 01 01	Euro-Caucasian Cooperation Association		\$18,500.00
FA 201 01 01 01	Amendment 20 Sept 2003 Printing Materials RFA GC 11 001 55		\$1,440.40
FA 201 01 01 01	Helpers International Foundation		\$14,628.00
FA 201 01 01 01	Amendment 20 Sept 2003 Printing Materials RFA GC 11 001 55		\$2,722.80
FA 201 01 01 01	"Teachers Union 'Education and the world"		\$2,128.00
FA 201 01 01 01	Amendment 20 Sept 2003 Printing Materials RFA GC 11 001 55		\$1,877.18
Total RFA			\$54,261.85
Voter Education II - RFA OSCE			
Began on December 2003. Finish January 2004			
OSCE Approval for winner NGO Received *** 2003		Sub Total	
FA 201 01 01 01	RACHA Lachitium & Lower Svaneti Self-reliance Association		\$1,907.00
FA 201 01 01 01	Georgian Young Lawyers Association Kutaisi Branch Office		\$1,214.54
FA 201 01 01 01	Euro-Caucasian Cooperation Association		\$1,295.00
FA 201 01 01 01	Helpers International Foundation		\$1,514.00
FA 201 01 01 01	"Teachers Union 'Education and the world"		\$1,158.49
Total RFA			\$6,893.03
Voter Education III - RFA OSCE			
Began on February 2004. Finish March 2004			
OSCE Approval for winner NGO Received *** 2003		Sub Total	
FA 201 01 01 01	RACHA Lachitium & Lower Svaneti Self-reliance Association		\$1,140.00
FA 201 01 01 01	Georgian Young Lawyers Association Kutaisi Branch Office		\$2,779.00
FA 201 01 01 01	Euro-Caucasian Cooperation Association		\$2,480.70
FA 201 01 01 01	Helpers International Foundation		\$1,128.84
FA 201 01 01 01	"Teachers Union 'Education and the world"		\$2,181.29
Total RFA			\$10,709.83

ANNEX 5

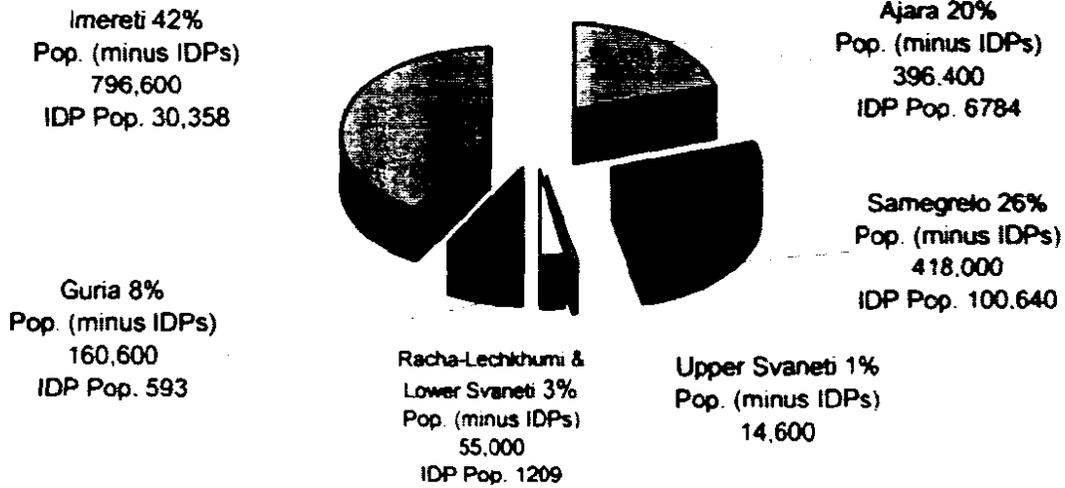
Capacity Building Activities and Training for WGCMI Staff

- CARE-Georgia "Strategic Planning Meeting for WGCMI", Tbilisi, October 21-24, 2002
- CARE-Georgia "Civil Society Training", Kutaisi, November 12-13, 2002.
- CARE Middle East & Europe Regional Management Unit (MERMU) "Design and Proposal Development Workshop", Amman (Jordan), January 11th-18th, '03
- Horizonti Foundation and Management Systems International (MSI) "Advocacy Training", Tbilisi, March '03
- CARE-Georgia "Advocacy Training" conducted by Sophie Sprekhmann, May 2003
- Center for Public Management "Intensive Training on USAID Grants and Cooperative Agreements", Kiev, May '03
- CARE-Georgia "First Aid & CPR Training", June 2003
- CARE-Georgia "Project Cycle Management Training, Center for Training and Consultancy", July 2003
- CARE-Georgia "Gender Training conducted" conducted by Marge Gitonisi, July, 2003
- Association of PVO Financial Managers, "USAID Rules & Regulations Workshop", Moscow, July 2002
- CARE-Georgia "MERMU Baseline Workshop", Tbilisi, August 4-6, 2003
- CARE-Georgia "Income Generation and Brainstorming Session" conducted by Jeff Gowa, September 2, 2003
- IFES "Training in Voter Education", September 8-9, 2003
- CARE-CIP "Partner Workshop", Tbilisi, October 21, 2003
- UNDP "Strategy of CBO Engagement in Monitoring of the Economic Development and Poverty Reduction Program, Tbilisi November 27, 2003
- CARE-Georgia "Civil Society Strengthening Workshop", Tbilisi, December 4-5, 2003
- CARE-Georgia "Coaching & Counseling Workshop", Tbilisi, February 2004
- CARE "Quantitative Research Methods Workshop", Macedonia, February 2004
- IFES Voter Education training sessions, West Georgia, December 2003 & March 2004
- LNGOs ("Erani" Foundation and Euro-Caucasian Cooperation Association) "1st Regional Conference on Voter Education", Zugdidi, Samegrelo, March 24, 2004
- LNGOs (Young Scientists Union "Intellect" and Euro-Caucasian Cooperation Association) "1st Regional Conference on Voter Education", Batumi, Ajara AR, March 25, 2004
- CARE-Georgia "Scenario Planning Workshop", Tbilisi, March-April 2004
- Danish Refugee Council "Micro Finance Impact Assessment Workshop", Tbilisi 20-21 May, 2004
- Horizonti "Social Policy Working Group National Conference on Best Practices and Institutional Sustainability", Tabakhmeia (village near Tbilisi) May 29-30, 2004
- Center for Public Management "Intensive Training on USAID Grants and Cooperative Agreements", Tbilisi, June '04
- Civil Society Institute "Taxation Training", Kutaisi July, 2004
- PA Consulting "Energy as a Development Tool in Community Development" Roundtable, Tbilisi, April 22nd - May 5th, 2004.

ANNEX 6

Population Per Region West Georgia

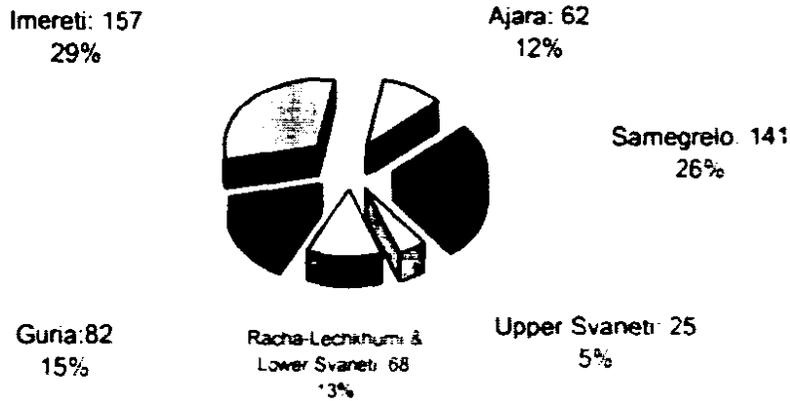
(2002 www.parliament.ge & 2003 www.idpproject.org)



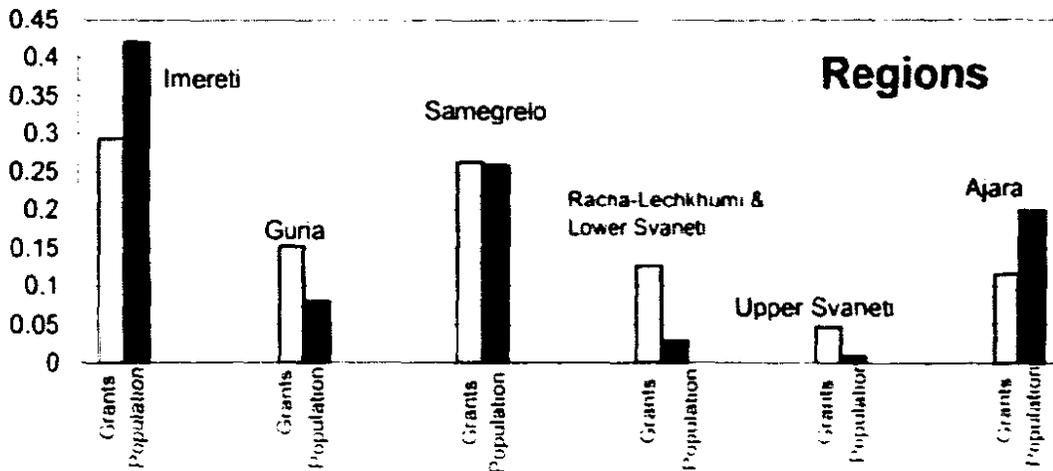
Projects Awarded Per Region In West Georgia

Number of projects and percent of Total WGCMII Grants Awarded

Total Projects Awarded: 535



Percent of Population VS. Percent of Grants Funded West Georgia



ANNEX 7



Name of NGO: Association "Atinati"

Region(s): Samegrelo

Project Title: "Agrarian Youth Clubs"

Project Type: Agrarian Youth Clubs

Sub Grant Agree. #: 1) RFA-GC4-002-SS

Grant Amount awarded by WGCMI: 28,781 USD
(For more details please see below)

Project Description:

The project addresses the problem of low productivity in agriculture due to the lack of experience and ineffective use of existing resources. It is anticipated that extra-curricular for agricultural youth clubs in 8 villages of Samegrelo region will be developed. Economically viable micro projects will be implemented.



Goal: To promote awareness of environmentally sound agricultural practices on the part of rural youth and increase their ability to undertake related practical activities.

Key Project Accomplishments

- Increased interest and awareness of youth in different agricultural branches;
- Development of leadership skills and assumption of responsibilities by youth;
- Increased self-esteem and self-confidence of youth;
- Development of professional skills and respect towards labor of youth;
- Involvement of youth in social development of community;
- Resolution of school's and community's particular problems by means of implementing profitable projects;
- Re-creation of traditional old technologies and crops;
- Local production created;
- Youth clubs served the role of extension agents for the rural population, as there did not exist any formal informational network that would provide farmers with knowledge on the advanced agricultural technologies.

Impact Summary:

The members of the agricultural youth clubs increased their awareness in agriculture, became motivated to learn more and applied their skills in their plots; the project has also contributed to their personal development.

Beneficiary Information:

- Total: 1365
- Beneficiaries:
- Men:
- Women: 1365
- Children:
- IDP:

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement #	WGCMI	In-Cash
		\$ 28,781
	LNGO	\$ 4,319
	Total	\$ 33,100

Follow up and Sustainability:

The project has been implemented effectively and has produced the results that were planned. The project has demonstrated its sustainability. The activities related to livestock, apiculture and perennial crops would continue to generate revenues in the future. The youth clubs will continue their agricultural and information dissemination activities aiming at increasing the awareness of advanced growing methods among rural population. The youth clubs are looking for the resources to continue functioning and undertake new initiatives.



Name of NGO: Guria Agribusiness Centre

Region(s): Guria

Project Title: Acquiring Business Skills from School

Project Type: West GCM Agricultural RFA – School Youth Clubs I

Sub Grant Agree. #: 1) RFA-GC4-001-SS

Grant Amount awarded by WGCMI: \$29,222.00
(For more details please see below)



Fieldwork: Youth Club "Imedi" Village Merta, Ozurgeti District

Project Description:

From February, 2003 the organization has been implementing the project "Agrarian Youth Clubs" funded by CARE WGCMI that considers establishing of Agrarian Youth Clubs in 9 schools of Guria Region.

Traditionally agricultural educational system was dominant in Georgia, that means passing existing experience and skills to future generation. Existing production technological processes and schemes require high professionalism and knowledge that is achieved through the establishment of special educational systems.

Goal:

To provide theoretical knowledge and practical agri-business skills to rural youth. The Guria Agribusiness Center aimed:

- ✓ to establish youth agricultural clubs in the schools of selected villages in the Guria Region
- ✓ to provide business and agricultural consultations for them.
- ✓ to establish pilot school based garden and develop practical skills among the students.

Key Project Accomplishments

- 315 students participated in the program
- 9 agrarian clubs were established in 9 schools of Guria region
- After the trainings provided by GABC students got necessary knowledge in agribusiness
- Youth Clubs produced and sold agricultural production of the value of GEL 4,183 at local market
- Club members elaborated the future action plan

Impact Summary:

Students' attitude to agricultural activities became more professional and creative.

Beneficiary Information:

- Total Beneficiaries: 325
- Men:
- Women:
- Children: 325
- IDP: 3

WGCMI/Partners' Contribution:

(According to the sub grant agreements)

Sub Grant Agreement # RFA- GC7-003-SS	In Cash
WGCMI	\$29,222.00
NGO	\$4,533.00
Total	\$33,755.00
WGCMI Total	\$29,222.00
LNGO Total	\$4,533.00
Grand TOTAL:	\$33,755.00



GABC is passing the Certificate to the member of the Youth Club "Samamale Rka", village Buzkistakhe, Ozurgeti District

Follow up and Sustainability:

Community attitude to local problems and students' involvement to agricultural activities has changed. Project got very positive feedback from community, local government and regional/district educational department.



Name of NGO: Union "Shalom Club"

Region(s): Guria

Project Title: "Improving food security of poor population in Guria region by utilizing reserves of livestock husbandry and feed production and increasing community mobilization initiative"

Project Type: General agriculture RFA I

Sub Grant Agree. #: RFA-GC7-006-SS

Grant Amount awarded by WGCMI: \$ 47,107.71
(For more details please see below)

Photo:



Project Description:
The project anticipated increasing the productivity of the livestock husbandry through introducing better feeding practices and breed improvement. The project was implemented by the leading organization: Tbilisi-based "Shalom Club" and its partner - Association of Chokhatauri district Sakrebulo, registered in Chokhatauri district, Guria region.

Goal: To increase the food security and income level of the small-scale livestock farmers in Guria region.

Key Project Accomplishments

- Farmers in three districts of Guria region increased their awareness in the issues of cattle-breeding and farming as well as: business planning, farm management and marketing, through training sessions provided;
- New technologies of cattle-breeding and food producing were introduced;
- Through 10 demonstration plots organized in the communities advantages of new technologies were demonstrated;
- Local communities have been mobilized around viable business opportunities, business plans - developed;
- Farmers motivation and interest in cooperation and business planning increased;
- The project formed an informational-consulting center at the Regional Department of Agriculture, for continuing farmers consultations during and after the completion of the project.

Impact Summary:
Improved food security and livestock productivity;
Improved provision of veterinary services;
Improved cattle-breeding;

Beneficiary Information: (direct)
-Total Beneficiaries: 623
- Men: 262
- Women: 361
- Children:
- IDP:

WGCMI/Partners / Contribution:
(According to the sub grant agreements)

Sub Grant Agreement	#		In-Cash
	RFA-GC7-006-SS	WGCMI	\$ 47,107.71
		LNGO	\$ 6,307.37
		Total	\$ 53,415.08

Follow up and Sustainability:

Despite the fact that the project ended in July '04, when there is no crops harvest taking place, the specialists of the partner organization had acquired enough experience to assist the farmers with consultations during vegetation and food preparation period. The project formed an informational-consulting center at the Regional Department of Agriculture, which provides the interested farmers with qualified advice. Similar centers are being established in the communities.

Name of NGO: Society Development Association

Region(s): Imereti

Project Title: Income Generation Support through Agricultural Activities

Project Type: West GCM General Agricultural RFA

Sub Grant Agree. #: 1) RFA-GC7-003-SS

Grant Amount awarded by WGCM: \$36,465.15
(For more details please see below)

Project Description:

The project "Increasing Income By Supporting Agricultural Activities" was implemented by the NGO Society Development Association (SDA), based in Kutaisi. The project covered three villages in Tskhaltubo district: Kvitiri, Maghlaki and Partskhanakanebi and is benefiting 300 persons in total.

- Thermo-isolation of warehouse will be built.
- Greenhouses will be built in Tskhaltubo, Imereti Region.
- Organic fertilizer will be distributed between farmers.
- Agricultural and business training manual will be prepared and training will be conducted.
- Site demonstrations and training of 300 farmers in agribusiness issues will be conducted.
- Free mechanical services to the pre-selected 10 disadvantaged households will be provided each year during the project lifetime.
- The vegetable collection center for buying 60 Mt of herbs from the local growers will be built.

Goal:

The project addresses the problem of rural poverty. Project goal is to increase income of

Project goals include:

- Improving the greenhouse facilities of vegetable growers;
- Providing improved vegetable seedlings to growers;
- Facilitating technology transfer and technical assistance;
- Providing assistance to the poorest disadvantaged households;
- Improving the marketing opportunities of the vegetable growers.



Key Project Accomplishments

This project has already had the added success of inspiring two farmers to take out micro credits for building their own greenhouses. Vegetable growing is an important source of household income in Western Georgia and especially in Imereti. Farmers of Tskhaltubo district enjoy the climatic benefits for growing off-season vegetables that are exported to Russia during winter months.

Therefore, increasing yields and the quality of the farm output has a significant impact on mitigating rural poverty.

Experience has already been accumulated in Tskhaltubo district related to selling off-season herbs in Russia.

Impact Summary:

Farmers sell their products that are kept in the storehouse, before it is exported. Greens are mainly exported to the Russian market.

Beneficiary Information:

- Total Beneficiaries: 300
- Men: 190
- Women: 110
- Children: 30
- IDP: 21

WGCM/Partners' Contribution:

(According to the sub grant agreements)

Sub Grant Agreement # RFA-GC7-003-SS	In Cash
WGCM	\$36,465.15
NGO	\$14,711.82
Total	
WGCM Total	\$36,465.15
LNGO Total	\$14,711.82
Grand TOTAL:	\$51,176.97



Follow up and Sustainability:

About 20 locals are recently employed in the greenhouses and 50 are brought in periodically to help bring in the harvest. The storehouse is also used as a collection center for consolidating off-season herbs. Laboratory equipment will be purchased for conducting pesticide residue tests. These greenhouses enable farmers to grow high yield dill and parsley. Tomatoes are also planned in the future.



Name of NGO: Imereti Agro ecological Association

Region(s):
Imereti Region,
Tskaltubo district

Project Title: "Holding Agro-Technical Activities, Demonstration-Trainings for increasing Livestock Nutrition Basis According to Tskaltubo District Example"

Project Type: General Agricultural RFA

Sub Grant Agree. #: 1|RFA-GC7-005-SS

Grant Amount awarded by WGCF: \$49,080.57
(For more details please see below)

Photo:

Project Description: The project addresses the problem of low productivity of the livestock sector in Western Georgia. Cultivation activities were undertaken during the period June-July, 2004.



Goal: To increase income generation of the livestock farmers in Imereti Region. It led to increasing of milk and dairy products production.

Key Project Accomplishments

- The project participant farmers attended the demonstrative days and shared experience they've received during project implementation process.
- About 60 farmers attended three demonstrative days.
- Farmers' gained understanding of the arrangement of the mowing-pastures.

Impact Summary:

The project emphasized improvement of feeding practices as the crucial point for increasing the efficiency of livestock farming.

Beneficiary Information:

-Total Beneficiaries: 500
Farmers: Around 500

WGCF/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement #		In-Cash
	WGCF	\$49,080.57
	LNGO	\$12,674.70
	Total	\$61,755.27
	WGCF Total	\$49,080.57
	LNGO Total	\$12,674.70
	Grand TOTAL:	\$61,755.27

Follow up and Sustainability:

After the project implementation around 500 Tskaltubo farmers will get theoretical and practical knowledge for growing livestock nutrition basis, at the same time harvest on demonstration plot will be distributed among them. Imereti Agro-Ecological Association will provide free consultations and handouts to any interested farmer.



Name of NGO: Business Support Center

Region(s): Samegrelo and Racha-Lechkhumi Regions

Project Title: Development of Livestock and Fodder in Samegrelo and Racha-Lechkhumi Regions

Project Type: General Agricultural RFA

Sub Grant Agree. #: 1) RFA-GC7-004-SS

Grant Amount awarded by WGCMI: \$58,260.90
(For more details please see below)

Photo:

Project Description: 20 villages (10 from each region are selected for the project). Beneficiaries will acquire knowledge about effective usage of small size land plots to provide forage throughout the year and especially for the winter season, which is crucial for sustainability of small farmers. Step by step introduction of intensive farming methods will happen during the following 2-4 years when good cases implemented by few members of the community stimulate other smallholder farmers.



Goal: The goal of the project is improvement of socio-economic conditions in 20 communities of Samegrelo Racha-Lechkhumi regions (10 in Samegrelo and 10 in Racha-Lechkhumi).

Key Project Accomplishments

- In selected communities 11.2 tons of Sudanura grass had been harvested from a total of 0.8 hectares of grass land during the first mowing. The yield has been distributed among beneficiaries. Yield per beneficiary accounted to 560 kg. Sudanura grass. (in Samegrelo)
- In selected communities 9 tons of Sudanura grass had been harvested from total 0.6 ha grass land during first mowing. The yield has been distributed among beneficiaries. Yield per beneficiary accounted to 515 kg. Sudanura grass. (in Racha-Lechkhumi Region)

Impact Summary:

Due to timely fertilization and proper cultivation crops are in good condition and yield will be received according to the initial plan.

Beneficiary Information:

-Total Beneficiaries: 3060
- Men: 1896
- Women: 1164

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement #		In-Cash
	WGCMI	\$58,260.90
	LNGO	\$13,757.75
	Total	\$91,515.19
	WGCMI Total	\$58,260.90
	LNGO Total	\$13,757.75
	Grand TOTAL:	\$72,018.65

Follow up and Sustainability:

Local CBO with participation of vulnerable families will implement demonstration plot activities after the completion of the project.

Name of NGO: Guria Agribusiness Centre

Project Title: Development Strategy of Subtropical Gardening

Project Type: West GCM General Agricultural RFA

Grant Amount awarded by WGCMI: \$33,262.00

(For more details please see below)

Project Description:

Since June 2003 the organization is implementing the project "Development strategy of subtropical gardening" funded by CARE WGCMI. The project considers working out the development strategies for subtropical crops, kiwi, citrus, for 8 communities of Guria and Samegrelo Regions.

In terms of the project agricultural training program was implemented for project participant farmers, the farmers were informed about latest scientific achievements, new technologies that will be supportive to produce high quality breeds of the crops.

Project included practical activities for selected citrus and kiwi demo plots and seedling farms.

Region(s): Guria, Samegrelo

Sub Grant Agree. #: 1) RFA-GC7-001-SS



GABC Staff visiting Ureki demonstration plot Village Ureki, Ozurgeti District

Goal:

The project goal was to increase the household income of small-scale farmers in Guria and Samegrelo regions. The objective of the project was to increase the yield and the quality of citrus and kiwi in the identified regions by technology transfer and provision of extension services.

Key Project Accomplishments

- | | |
|--|--|
| <ol style="list-style-type: none"> 1. Organized citrus and kiwi demonstration plots for on-site training and technology transfer. 2. Established a nursery for improving the quality of available seedlings. | <ol style="list-style-type: none"> 3. Conducted agricultural and business training sessions for improving growing techniques as well as business skills of the beneficiary farmers. 4. Mobilized communities for priority setting in agriculture |
|--|--|

Impact Summary:

The training sessions provided by Guria ABC were met with great interest and are expected to contribute to the successful transfer of advanced technology to the targeted communities.

Beneficiary Information:

- Total Beneficiaries: 192
- Men: 158
- Women: 34
- Children: 0
- IDPs: 0

WGCMI/Partners / Contribution:

(According to the sub grant agreement(s))

Sub Grant Agreement # RFA-GC7-003-SS		In Cash
WGCMI		\$33,262.00
NGO		\$8,583.00
Total		\$41,845.00
WGCMI Total		\$33,262.00
LNGO Total		\$8,583.00
Grand TOTAL:		\$41,845.00



Demonstration plot in village Nopshivi, Khobi district

Follow up and Sustainability:

Through the utilization of knowledge received and experience gained the farmers will be capable to arrange seedling farms at their households and provide agro activities at own plantations.



Name of NGO: Hazelnut Growers' Association

Region(s):
Guria Region

Project Title: Support and Development of Guria region Hazelnut Growing Farmer

Project Type: General Agricultural RFA

Sub Grant Agree. #: 1) RFA-GC7-002-SS

Grant Amount awarded by WGCMI: \$46,213.00
(For more details please see below)

Photo:

Project Description: 1. Purchase and re-construction of the hazelnut storage building; 2. Arrangement of the dryer facilities and laboratory equipment; 3. Selection of the four on-farm sites for the demonstration of better methods of hazelnut orchard management and conducting TOT seminars for the growers; 4. Information support to the project (Issue Newsletter, growers handbook, marketing bulletin, arrange website); and 5. Micro loans project.



Goal: Increase quality and quantity of member-farmers hazelnut stocks and productivity, train them in proper care of plantations and post harvest management.

Key Project Accomplishments

- The quality increase in the farmers' hazelnut stocks was achieved.
- The poor farm families benefited from the community activities.

Impact Summary:

The poor hazelnut-growing farmers got more value from their hazelnuts by the direct export. The quality increase in the farmers' hazelnut stocks was achieved. The poor farm families benefited from the community activities.

Beneficiary Information:

-Total Beneficiaries: 2050
 - Men: 1230
 - Women: 820

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement #		In-Cash
	WGCMI	\$46,213.00
	LNGO	\$12,601.00
	Total	\$58,814.00
	WGCMI Total	\$46,213.00
	LNGO Total	\$12,601.00
	Grand TOTAL:	\$58,814.00

Follow up and Sustainability:

After project implementation HGA will manage the storage building with the dryer facility and laboratory equipment independently. HGA anticipates having hazelnut stocks for international client requirements and demand.



Name of NGO: VTJC (now called Erani Foundation)

Region(s): Samegrelo

Project Title: The development of Social-Economic Conditions and the support to the initiative of the communities in Samegrelo

Project Type: Community Mobilization RFA

Sub Grant Agree. #:

- 1) RFA-GC1-003-TB and RFA-GC1-003-TB-Ext1
- 2) RFA-GC1-005-DT and RFA-GC1-005-DT-Ext3

Grant Amount awarded by WGCMI: \$ 62,718.08

(For more details please see below)

Photo:

Project Description: West-GCMI is facilitating the development of a more engaged citizenry in vulnerable communities. Assists communities to strengthen their capacities to identify and address priority needs within the community. Also develops innovative partnerships with targeted communities cross sectors that contribute to improved social service and economic growth of 50 communities in the Samegrelo region.

Goal: To contribute directly and quantitatively to the reduction of suffering for vulnerable and isolated groups and communities, both internally displaced persons (IDPs) and local residents in Western Georgia.

Key Project Accomplishments

- 6576 Community representatives trained
- 50 CBO(s) formed.
- 55 Micro and Small projects implemented by CBO(s).

Impact Summary:

- CBO(s) promoting Accountability Transparency and Participation on day to day activities.
- Community resident more active participate in problem identification, decision making and policy dialog.
- Increased community contribution during implementation of community based projects more than 25%.
- More self initiatives to solve community problems.
- Increase level of collaboration and trust building between LG, Private sector and NGO sector.

Beneficiary Information:

- Total direct Beneficiaries: 45368
- Men: 21236
- Women: 24132
- Children: 13281
- IDP: 3528

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement # RFA-GC1-003-TB and RFA-GC1-003-TB-Ext1		In-Cash
	WGCMI	30,789.58
	LNGO	10,120.00
	Total	40,909.58
Sub Grant Agreement # RFA-GC1-005-DT and RFA-GC1-005-DT-Ext3		In-Cash
	WGCMI	31,928.50
	LNGO	8,956.80
	Total	40,885.30
	WGCMI Total	62,718.08
	LNGO Total	19,079.8
	Grand TOTAL:	81,794.88

Follow up and Sustainability:

1. Capacity Enhancement of CBO and LNGO staff members.
2. Support multiply initiative from CBO and LNGO. (More than one projects funded by WGCMI)
3. Follow up maintenance plan proposed by CBO.
4. CBO and LNGOs idea shearing through during stakeholder conferences and cross visits.



Name of NGO: intellect

Region(s): Ajara.

Project Title: The development of Social-Economic Conditions and the support to the initiative of the communities in Ajara region.

Project Type: Community Mobilization RFA

Sub Grant Agree. #:

- 1) RFA-GC3-001-SS
- 2) RFA-GC3-004-SS

Grant Amount awarded by WGCMI: 36,488.20

Photo:

(For more details please see below)

Project Description: West-GCMI is facilitating the development of a more engaged citizenry in vulnerable communities. Assists communities to strengthen their capacities to identify and address priority needs within the community. Also develops innovative partnerships with targeted communities cross sectors that contribute to improved social service and economic growth of 20 communities in the Ajara AR.

Goal: To contribute directly and quantitatively to the reduction of suffering for vulnerable and isolated groups and communities, both internally displaced persons (IDPs) and local residents in Western Georgia.

Key Project Accomplishments

- 2525 Community representatives trained
- 20 CBO(s) formed.
- 12 Micro and Small projects implemented by CBO(s).

Impact Summary:

- CBO(s) promoting Accountability Transparency and Participation on day to day activities.
- Community resident more active participate in problem identification, decision making and policy dialog.
- Increased community contribution during implementation of community based projects more than 25%.
- More self initiatives to solve community problems.
- Increase level of collaboration and trust building between LG, Private sector and NGO sector.

Beneficiary Information:

- Total direct Beneficiaries: 22296
- Men: 10712
- Women: 11584
- Children: 8094
- IDP: 166

WGCMI/Partners / Contribution:

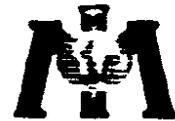
(According to the sub grant agreements)

Sub Grant Agreement # RFA-GC3-001-SS		In-Cash
	WGCMI	17,472.00
	LNGO	2,992.00
	Total	20,464
Sub Grant Agreement # RFA-GC3-004-SS		In-Cash
	WGCMI	19,016.20
	LNGO	2,991.87
	Total	22,008.07
WGCMI Total		36,488.20
LNGO Total		5,983.87
Grand TOTAL:		42,472.07

Follow up and Sustainability:

1. Capacity Enhancement of CBO and LNGO staff members.
2. Support multiply initiative from CBO and LNGO. (More than one projects funded by WGCMI)
3. Follow up maintenance plan proposed by CBO.
4. CBO and LNGOs idea shearing through during stakeholder conferences and cross visits.

Human Being and Environment



Name of NGO: Human Being and Environment

Region(s): Guria

Project Title: The development of Social-Economic Conditions and the support to the initiative of the communities in Guria region.

Project Type: Community Mobilization RFA

Sub Grant Agree. #:

- 1) RFA-GC1-001-NJ and RFA-GC1-001-NJ-Ext
- 2) RFA-GC1-006-DT

Grant Amount awarded by WGCMI: 32,787.71

(For more details please see below)

Photo:

Project Description: West-GCMI is facilitating the development of a more engaged citizenry in vulnerable communities. Assists communities to strengthen their capacities to identify and address priority needs within the community. Also develops innovative partnerships with targeted communities cross sectors that contribute to improved social service and economic growth of 23 communities in the Guria region.

Goal: To contribute directly and quantitatively to the reduction of suffering for vulnerable and isolated groups and communities, both internally displaced persons (IDPs) and local residents in Western Georgia.

Key Project Accomplishments

- 3360 Community representatives trained
- 23 CBO(s) formed.
- 29 Micro and Small projects implemented by CBO(s).

Impact Summary:

- CBO(s) promoting Accountability Transparency and Participation on day to day activities.
- Community resident more active participate in problem identification, decision making and policy dialog.
- Increased community contribution during implementation of community based projects more than 25%.
- More self initiatives to solve community problems.
- Increase level of collaboration and trust building between LG, Private sector and NGO sector.

Beneficiary Information:

- Total direct Beneficiaries: 25001
- Men: 11640
- Women: 13361
- Children: 6164
- IDP: 142

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement #		In-Cash
RFA-GC1-001-NJ and RFA-GC1-001-NJ-Ext	WGCMI	18,987.41
	LNGO	4,695.00
	Total	23,682.41
RFA-GC1-006-DT	WGCMI	13,800.30
	LNGO	2,838.00
	Total	16,638.30
WGCMI Total		32,787.71
LNGO Total		7,533.00
Grand TOTAL:		40,320.71

Follow up and Sustainability:

1. Capacity Enhancement of CBO and LNGO staff members.
2. Support multiply initiative from CBO and LNGO. (More than one projects funded by WGCMI)
3. Follow up maintenance plan proposed by CBO.
4. CBO and LNGOs idea shearing through during stakeholder conferences and cross visits.



Name of NGO: Black Sea Eco- Academy

Region(s): Ajara.

Project Title: The development of Social-Economic Conditions and support the mobilization initiative for communities in Ajara AR.

Project Type: Community Mobilization RFA

Sub Grant Agree. #:

1) RFA-GC3-002-SS

2) RFA-GC3-005-SS

Photo:

Grant Amount awarded by WGCMI: 36,302.00

(For more details please see below)

Project Description: West-GCMI is facilitating the development of a more engaged citizenry in vulnerable communities. Assists communities to strengthen their capacities to identify and address priority needs within the community. Also develops innovative partnerships with targeted communities cross sectors that contribute to improved social service and economic growth of 20 communities in the Ajara AR.

Goal: To contribute directly and quantitatively to the reduction of suffering for vulnerable and isolated groups and communities, both internally displaced persons (IDPs) and local residents in Western Georgia.

Key Project Accomplishments

- 2560 Community representatives trained
- 20 CBO(s) formed.
- 12 Micro and Small projects implemented by CBO(s).

Impact Summary:

- CBO(s) promoting Accountability Transparency and Participation on day to day activities.
- Community resident more active participate in problem identification, decision making and policy dialog.
- Increased community contribution during implementation of community based projects more than 25%.
- More self initiatives to solve community problems.
- Increase level of collaboration and trust building between LG, Private sector and NGO sector.

Beneficiary Information:

- **Total direct Beneficiaries:** 22567
- **Men:** 10763
- **Women:** 11804
- **Children:** 7185
- **IDP:** 0

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement # RFA-GC3-002-SS	In-Cash
WGCMI	17,506.00
LNGO	3,178.00
Total	20,684.00
Sub Grant Agreement # RFA-GC3-005-SS	In-Cash
WGCMI	18,786.00
LNGO	2,649.87
Total	21435.87
WGCMI Total	36,302.00
LNGO Total	5,817.87
Grand TOTAL:	42,119.87

Follow up and Sustainability:

1. Capacity Enhancement of CBO and LNGO staff members.
2. Support multiply initiative from CBO and LNGO. (More than one projects funded by WGCMI)
3. Follow up maintenance plan proposed by CBO.
4. CBO and LNGOs idea shearing through during stakeholder conferences and cross visits.



Name of NGO: Abkhazinterconti

Region(s): Racha-Lechkhumi and Low Svaneti

Project Title: The development of Social-Economic Conditions and support the mobilization initiative for communities in Racha-Lechkhumi & Low Svaneti region.

Project Type: Community Mobilization RFA

Sub Grant Agree. #:
1) RFA-GC3-003-SS
2) RFA-GC3-006-SS

Grant Amount awarded by WGCMI: 54,587.00
(For more details please see below)

Photo:

Project Description: West-GCMI is facilitating the development of a more engaged citizenry in vulnerable communities. Assists communities to strengthen their capacities to identify and address priority needs within the community. Also develops innovative partnerships with targeted communities cross sectors that contribute to improved social service and economic growth of 29 communities in the Racha-Lechkhumi & Lower Svaneti region.

Goal: To contribute directly and quantitatively to the reduction of suffering for vulnerable and isolated groups and communities, both internally displaced persons (IDPs) and local residents in Western Georgia.

Key Project Accomplishments

- 2709 Community representatives trained
- 29 CBO(s) formed.
- 39 Micro and Small projects implemented by CBO(s).

Impact Summary:

- CBO(s) promoting Accountability Transparency and Participation on day to day activities.
- Community resident more active participate in problem identification, decision making and policy dialog.
- Increased community contribution during implementation of community based projects more than 25%.
- More self initiatives to solve community problems.
- Increase level of collaboration and trust building between LG, Private sector and NGO sector.

Beneficiary Information:

- Total direct Beneficiaries: 17220
- Men: 8046
- Women: 9174
- Children: 2651
- IDP: 279

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement # RFA-GC3-003-SS		In-Cash
	WGCMI	33,444.00
	LNGO	4,237.00
	Total	37,681.00
Sub Grant Agreement # RFA-GC3-006-SS		In-Cash
	WGCMI	21,143.00
	LNGO	3,795.44
	Total	24,938.44
	WGCMI Total	54,587.00
	LNGO Total	8,032.44
	Grand TOTAL:	62,619.44

Follow up and Sustainability:

1. Capacity Enhancement of CBO and LNGO staff members.
2. Support multiple initiatives from CBO(s) and LNGO(s). (More than one project funded by WGCMI)
3. Follow up maintenance plans proposed by CBO.
4. Promote CBO(s) and LNGO(s) idea sharing through holding stakeholder conferences and cross visits



Name of NGO: Abkhazinterconti

Region(s): Imereti

Project Title: The development of Social-Economic Conditions and support the mobilization initiative for communities in Imereti region.

Project Type: Community Mobilization RFA

Sub Grant Agree. #:

- 1) RFA-GC1-002-SK, RFA-GC1-002-SK-Ext and RFA-GC1-002-SK-Ext2
- 2) RFA-GC1-004-DT

Grant Amount awarded by WGCMI: 60,988.8

(For more details please see below.)

Photo:

Project Description: West-GCMI is facilitating the development of a more engaged citizenry in vulnerable communities. Assists communities to strengthen their capacities to identify and address priority needs within the community. Also develops innovative partnerships with targeted communities cross sectors that contribute to improved social service and economic growth of 57 communities in the Imereti region.

Goal: To contribute directly and quantitatively to the reduction of suffering for vulnerable and isolated groups and communities, both internally displaced persons (IDPs) and local residents in Western Georgia.

Key Project Accomplishments

- 5488 Community representatives trained
- 56 CBO(s) formed.
- 74 Micro and Small projects implemented by CBO(s).

Impact Summary:

- CBO(s) promoting Accountability Transparency and Participation on day to day activities.
- Community resident more active participate in problem identification, decision making and policy dialog.
- Increased community contribution during implementation of community based projects more than 25%.
- More self initiatives to solve community problems.
- Increase level of collaboration and trust building between LG, Private sector and NGO sector.

Beneficiary Information:

- Total direct Beneficiaries: 83315
- Men: 39517
- Women: 43798
- Children: 17654
- IDP: 398

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement #		In-Cash
RFA-GC1-002-SK, RFA-GC1-002-SK-Ext and RFA-GC1-002-SK-Ext2	WGCMI	31,368.8
	LNGO	13,963.50
	Total	45,332.3
RFA-GC1-004-DT	WGCMI	29,620.00
	LNGO	6,538.75
	Total	36,158.75
WGCMI Total		60,988.8
LNGO Total		20502.25
Grand TOTAL:		81,491.05

Follow up and Sustainability:

1. Capacity Enhancement of CBO and LNGO staff members.
2. Support multiple initiatives from CBO(s) and LNGO(s). (More than one project funded by WGCMI)
3. Follow up maintenance plans proposed by CBO.
4. Promote CBO(s) and LNGO(s) idea sharing through holding stakeholder conferences and cross visits



Name of NGO: Constanta Foundation

Region(s):
Imereti, Samegrelo
and Adjara

Project Title: "Microfinance Initiative – West Georgia"

Project Type: Economic Opportunities – Group Lending Initiative RFA

Sub Grant Agree. #: 1) RFA-GC9-001-DT

Grant Amount awarded by WGCMi: \$ 350,000.00 USD
(For more details please see below)

Project Description:

Provide micro and small-scale business development opportunities to communities in Imereti, Samegrelo and Adjara regions. Change income generation, jobs and employment opportunities at the local community level.



Goal:

Promote sustainable and long-term socio-economic development for the communities in Imereti, Samegrelo and Adjara regions through bringing in a strong and well-proved group lending as well as individual lending schemes.

Key Project Accomplishments

- One fully set up branch in Kutaisi, one outlet in Poti and two service points in Samtredia and Senaki are operational at the end of the project and provide long-term financial services to the population of West Georgia.
- 1701 micro entrepreneurs (including agro-processors and producers) have received loans in the cumulative amount of \$266,000.00 from Constanta Foundation, \$250,000.00 out of which is a Grant from West GCMi project.
- Up to 2500 jobs are sustained through the businesses funded by Constanta Foundation including owner-operators.
- More than 3500 people, clients and their family members have improved their life conditions.

Impact Summary:

Services provided by Constanta Foundation to self-employed micro and small entrepreneurs for development of their business at micro level ultimately will have a macro impact on the socio-economic development of the communities.

Beneficiary Information:

-Total Beneficiaries: 1,716
 - Men: 286
 - Women: 1,430
 - Children: 0
 - IDP: 345

WGCMi/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement # RFA-GC9-001-DT	In-Cash
WGCMi	\$ 350,000.00
LNGO	\$ 67,440.00
Grand TOTAL:	\$ 417,440.00

Follow up and Sustainability:

Branch offices become operationally sustainable after 14-18 months of operations. As for service points, they could cover their expenses after 8-10 months. Therefore, after the West GCMi funds have been used, Constanta plans to support West Georgia offices during the following 5-6 months using foundation's overall income.



Name of NGO: "CARITAS GEORGIA", Catholic Charitable Foundation

Region(s):
Georgia wide

Project Title: Provision of Social Institutions with Food Products

Project Type: Food Distribution

Sub Grant Agree. #:
1) FP-GC12-002-KC

Grant Amount awarded by WGCMI: \$27,578.44
(For more details please see below)

Project Description:

As a response to the current situation and the urgent needs of vulnerable population living in different institutions of Georgia, Caritas Georgia distributed basic food products to 11 needy state institutions in the country.



Goal: To provide humanitarian assistance through food delivery to 1092 needy beneficiaries at 11 different social institutions throughout Georgia.

Key Project Accomplishments

- Tbilisi, Kutaisi, Kaspi, Terjola and Senaki Institutions got additional amount of food and, in addition with other products received from the state budget, improved the nutritional value of beneficiaries menu that had become much better.

Impact Summary:

- In the Institutions the daily intake of calories and fiber became more diverse, this especially benefited orphanages and boarding schools where food was lacking high proteins.

Beneficiary Information:

- Total Beneficiaries: 1017
- Elderly people: 587
- Children: 237
- Hospital Patients: 193

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement #		In-Cash
	WGCMI	\$27,578.44
	LNGO	\$1,200.00
	Total	\$28,778.44
	WGCMI Total	\$27,578.44
	LNGO Total	\$1,200.00
	Grand TOTAL:	\$28,778.44

Follow up and Sustainability:

During the process of project implementation, weekly monitoring had been performed by Caritas Georgia volunteers; they have documented success of the project and had received much words of gratitude from the beneficiaries and the administration of institutions.



Name of NGO: Lazarus - Charitable Foundation of the Georgian Patriarchate

Project Title: Supplementary Food for Children's Institutions

Project Type: Supplementary Food for Children's Institutions

Region(s): Kakheti, Tbilisi/Kartli, Samtskhe-Javakheti and Guria/Samegrelo/Adjara
Sub Grant Agree. #: 1) FP-GC12-001-KC

Grant Amount awarded by WGCMI: \$ 64,003.28

(For more details please see below)

Project Description:

The project took over the provision of bread to the institutions, the most important staple food item for these children.

In addition to bread Lazarus provided occasional deliveries of other food products, which improved each institution's menu.

And finally, each institution was bound to use their own food funds, which were released by Lazarus provided food, for the purchase of items missing from the required menu.



Goal: To provide approximately 5,500 children housed in 43 children's institutions throughout Georgia with supplementary food products.

Key Project Accomplishments

- All 43 institutions were assisted with primary food commodities (vegetable oil, sugar, spaghetti, wheat flour and milk powder) for three months; *Wheat flour was used for enriching children's menu with pies and other bakery products;*
- Additional commodities were distributed in all Children's institutions: 200 gr. Orange juice and 115 gr. biscuits per each child (total number of children: 4900);
- The project anticipated the assistance of children's institutions that had budget crisis and has over fulfilled its goal. The NGO staff assisted them in everyday search for the ways of getting commodities. The assistance covered 20 % of the amount allocated per each child;
- The assistance helped the beneficiary children's institutions to save money that will be useful for them in case of cost increase.

Impact Summary:

5500 children, who were in a dire need of adequate nutrition, were given the opportunity to have food rich with vitamins and protein and improve their overall health state.

Beneficiary Information:

- Total Beneficiaries: 5500
- Men:
- Women:
- Children: 5500
- IDP:

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement #	WGCMI	In-Cash
		\$64003,27
	LNGO	16550,32
	Total	80553,59

Follow up and Sustainability:

The assistance helped the beneficiary children's institutions to save money that will be useful for them in case of cost increase.



Kutaisi



Project Title: Improving the Economical Situation of Socially Vulnerable People
NGO: VTJC Kutaisi

Region(s): Imereti

Project Type: Community Based Social Services

Health or Social Need: The unemployment rate in Georgia is very high and increasing fast. One of the reasons of it is the lack of knowledge and skills of young generation that would unable them to be successful in job market. Especially the vulnerable groups suffer from this problem. They can not afford to pay for education.



A sewing course at the vocational training center in Kutaisi

Project Description: To address the problem project provided theoretical and practical knowledge and skills to about 300 IDPs and other socially vulnerable groups through vocational training. It enabled them to find jobs and increase their income. At initial stage the LNGO staff conducted needs assessment and selected the beneficiaries for the vocational training. It also recruited the specialist according to the needs of course type. The Sewing Alumni arranged self-employment. The LNGO distributed three sewing machines to the alumni. The production made by sewing training alumni was distributed to extremely vulnerable beneficiaries. An informal agreement was made between VTJC and a number of enterprises operating in Imereti. According to the agreement, the management of the enterprises will inform VTJC about any job vacancies.

Goal: The project's goal is to improve the economical situation of the vulnerable people by the professional trainings.

Key Project Accomplishments

- 300 youth received training in English, German, Sewing, Car repairing, computer, office management
- 625 educational booklets and 106 manuals were published and distributed to participants
- 35 students found jobs
- 44 trainings for farmers conducted and 77 farmer increased their knowledge

Impact Summary:

The skills and knowledge of 300 youth increased that enabled them to be successful in job market. The self employment opportunity was provided to about the students.

Beneficiary Information:

- Total Beneficiaries: 300
 - Men: 124
 - Women: 176
 - Children: 0
 - IDP: 147

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCMC	\$ 19 997		\$ 19 997
LNGO		\$ 25 697	\$ 25 697
External:			
Government			
Int'l Donor			
Private			
TOTAL:	\$ 19 997	\$ 25 697	\$45 694



At the model training farm

Follow up and Sustainability:

The LNGO is looking for the new funding to continue the project implementation. It also plans to initiate the advocacy campaign to assure the government in need to funds for this kind of vocational trainings.



Project Title: Community Based Social Services in Samegrelo and Upper Svaneti **Region(s):** Samegrelo

Project Type: Community Based Social Services

Health or Social Need: Due to the deteriorated Social Protection system in Georgia, especially in rural area, the social conditions of most vulnerable groups such as lonely pensioners is desperate. There is no system in the communities to take care of these people.

Project Description: The project addressed the most pressing problem of 500 vulnerable youth (12-19 years old) and members of their families. motivated and developed the capacity of the youths, to provide daily in-home services for vulnerable elderly in 15 villages of Samegrelo and Zemo Svaneti. Fifteen youth groups were voluntarily organized in 15 selected communities' secondary schools. Each group of volunteers consisted of 3-4 teenagers, who developed a schedule of visits to the elderly. During the visits the teenagers helped the elderly in doing housework - cutting wood, bringing water, cleaning of the house and yard. The youth groups established the following classes during the project lifetime: sewing, knitting, embroidery, drawing, music and sports. The LNGO "Tamari" provided the students with basketballs, footballs and volleyballs, tape-recorders, audiocassettes and embroidery sets.



Youth visit to assist a pensioner

Goal: The goal of the project was to reduce the suffering of homebound elderly through providing daily home care and support of adolescents through providing the small business development training.

Key Project Accomplishments

- 53 elderly persons received daily home care
- 150 youth with increased knowledge in small business development
- 75 trainings conducted on small business development
- 15 youth clubs established
- 30 TOT trainings conducted for youth leaders
- 75 courses established
- 300 youth involved in daily home care of elderly
- 38 sport competitions organized
- 7 social workers involved in the project;

Impact Summary:

17 elderly people received home care in addition to some self-care and hygienic items provided to them for free that significantly improved their conditions. 500 teenager improved their knowledge and skills that enabled them to be successful in job market.

Beneficiary Information:

-Total Beneficiaries:	600
- Men:	282
- Women:	318
- Children:	500
- IDP:	58

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCM	\$ 18 876		\$ 18 876
LNGO		\$ 13 020	\$ 13 020
External:			
Government			
Int'l Donor			
Private			
TOTAL:	\$ 18 876	\$ 13 020	\$ 31 896

Project Photo



Follow up and Sustainability:

Project established the young volunteer groups in the 15 selected communities and provided them with relevant knowledge to take care of lonely pensioners. There was established the system that will ensure the project sustainability.

Children and Mothers support organization "Tamari"



Project Title: Assistance to displaced single mothers in Western Georgia

Region(s): Samegrelo

Project Type: Social Protection

Health or Social Need: Due to the poor economic situation in Georgia, the system of social protection of IDP single mothers and their children is deteriorated, especially in rural areas. Poverty is rapidly increased the number of those who are unable to access basic rights such as health and education.

Project Description:

Main objectives of the project were:

1. To give to 6 single mothers groups from 6 communities analytical and management skills that will enable them to facilitate sustainable development initiatives in Zugdidi district.
2. To relieve most pressing problems in health and education identified by single mothers groups through providing funds for micro-projects developed by them independently.

The active groups of displaced single mothers were identified and training sessions for them were organized in proposal writing, planning, monitoring and evaluation, accounting. Needs assessment for 6 communities using PLA methodologies were conducted. By single mothers 6 project proposals were prepared and implemented. Projects included improving the accessibility of health care services and education for the single mothers and their children.

Goal:

To support the IDP communities in Zugdidi district by increasing the capacity of 6 communities, focusing on displaced single mothers and their children, to address their unmet social, health and educational priorities through strengthening ties to internal and external donor, business and government resources.

Key Project Accomplishments

- 6 single mothers groups are formed
- 60 active representatives from the target population gain capacity and are empowered to help themselves.
- 36 single mothers trained in planning, proposal writing, project monitoring and evaluation, accounting.
- 6 project proposals were developed by the single mothers groups independently.
- 6 projects implemented in target communities increased access to health and education for single mothers and their children.

Impact Summary:

Project supported the IDP communities by increasing the capacity of 6 communities, focusing on displaced single mothers and their children to address their unmet social, health and educational priorities.

Beneficiary Information:

- Total Beneficiaries:	1570
- Men:	137
- Women:	56
- Children:	145
- IDP:	1570

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCM	\$ 30 000		\$ 20 740
LNGO			\$ 11 060

External:

Government

Int'l Donor

Private

TOTAL:

\$ 41 060

Follow up and Sustainability:

Increased financial sustainability of displaced single mothers group. By increasing the capacity of single mothers group dependence of communities to others has decreased and these groups can obtain their own sources of funding for the future.

Project helped to increase institutional sustainability of single mothers groups. Coordination between single mothers and government representatives increased. IDPs with locals gain knowledge and capacity to organize their collective priorities and appeal to regional government to promote their interest.

Cultural-Humanitarian Fund "Sukhumi"



Project Title: Improvement of the social condition for IDPs residing in the Didi Jikhaishi IDP Center through their involvement in entrepreneur activities.

Project Type: Social Protection

Region(s): Imereti

Health or Social Need: Due to the poor economic situation in Georgia, the system of social protection of IDP is deteriorated, Poverty is rapidly increased the number of those who are unable to access basic rights such as health and education.



Project Description:

Main objectives of the project were: Conduct training for the community members in order to prepare them for active participation in the income-generating projects. Conduct the contest of small-grants: fund the best income-generating project, which aimed to solve the social problems by means of "Social fund". Trainings in small business development were conducted for the IDPs residing in the Didi Jikhaishi Collective center. By the trained IDPs residing in the collective center were developed and implemented projects: Operation of the workshops - sewing, mini-bakery, watches/clocks repairing, furniture restoration, international communication service, ritual services, cultural-educational center, computer and English classes, Health care point. In the Collective Center were created "Social fund", which was used for solving of social problems in the community.

Goal:

Improvement of the social condition for IDPs residing in the Didi Jikhaishi IDP Center through their involvement in entrepreneur activities and integration in the local community.

Key Project Accomplishments

- 477 IDPs were integrated in the local community.
- 156 jobs were created
- For 200 IDPs residing in the Didi Jikhaishi Collective center improved the economic conditions.
- 600 IDPs were employed and have their own income source.
- 700 IDPs improved access to health care.
- Improved educational level of 157 IDPs by establishing computer, English classes and Cultural-Educational center for youth

Impact Summary:

Project supported de-isolation of the IDPs living in the IDP center and their integration in the local community.

Beneficiary Information:

-Total Beneficiaries:	950
- Men:	150
- Women:	140
- Children:	101
- IDP:	500

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCM			\$27 198
LNGO			\$ 2 563
External:			
Government			
Int'l Donor			
Private			
TOTAL:			\$ 29 761

Follow up and Sustainability:

Increased financial sustainability of IDPs residing in the collective center. By increasing the capacity of IDPs

dependence of community to others has decreased and these groups can obtain their own sources of funding for the future.

Project helped to increase institutional sustainability of IDPs. Coordination between IDPs and government representatives increased. IDPs with locals gain knowledge and capacity to organize their collective priorities and appeal to regional government to promote their interest.



Project Title : Health education in Samegrelo Region

Region(s): Samegrelo

Project Type: Community Based Health Education

Health or Social Need:

The health status of the Georgia population has worsened last 10 years. One of the reason of that in addition to poor physical and health service infrastructure is the lack of knowledge of the population on their health problems and the ways of its correction.

Project Description: Groups of three community educators were formed in each of the 43 communities. In order to cover wide range of the community the group included community doctor, teacher and a community representative. The trainers were provided with leaflets, posters, registration journals, manuals and schedule for each month. Total 90404 leaflets and 848 posters were given away. The trainers tested community members before and after trainings in order to measure their Health Education level. The trained community health educators developed their training schedules and hang it at different places accessible for the communities. They have formed the groups of women, children, etc and provided the training in different subjects according to their needs. In order to raise the local trainers' reputation and incorporating wide masses of the population in the project free medical preventing examinations were organized in the mountain villages Chvana, Tchmonsí and Zamletí. (Consultations of the theurapists, cardiologist, gynecologist, pediatncs, echoscopic examination) The consultations were held in Ozurgetí, Lanchkhutí, Chokhataun district.



Health education class

Partners: Imedi XXI: Tana - Ajara

Goal: Information intervention to increase community awareness level on certain healthcare issues.

Key Project Accomplishments

- 129 community health educators were selected
- 43 community health groups were formed
- 23127community members were trained
- 4230 individual counseling were accomplished by the community health educators
- 90404 Leaflets, 848 posters and manuals were distributed to community members and community health educators
- 1676 training sessions were conducted by the community health educators

Impact Summary:

According to the results of the survey the public awareness on major health problems increased by 15 %. This gave possibility to community members to make health decision without any external interference.

Beneficiary Information:

- Total Beneficiaries: 23256
- Men: 10931
- Women: 12325
- Children: 6200
- IDP: 522

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCMC	\$ 28 627		\$ 28 627
LNGO		\$ 8 568	\$ 8 568
External:			
Government			
Int'l Donor			
Private			
TOTAL:	\$ 28 627	\$ 8 568	\$37 195



Follow up and Sustainability:

All target communities formed health groups & developed their one year activity plan. The trained community health educators worked on a voluntary basis that is the strong guarantee of the project's sustainability. To ensure the projects sustainability and in order to stimulate trainers' enthusiasm "Patient Plus" diagnostic center awarded the trainers free medical cards for the whole year.

Project Title: Mobilization of People with Epilepsy and Health Education Project

Region(s): Imereti

Project Type: Community Based Social Services

Health or Social Need: Epilepsy is one of the most prevailing chronic diseases. Approximately 1% of world's population - 60 million people - suffer from it. The society as well as patients themselves low level of knowledge about treatment of this disease. This category of patients cannot openly express their needs and are not able to protect their rights. There was no register of epileptic patients in Imereti.

Project Description: In order to address the problems related to epileptic patients the project established the register in Kutaisi that will serve Imereti region. The project provided the training to health professionals as well as epileptic patients and their family member in epilepsy treatment. Main accomplishment of the project is the foundation of patients' mobilization group consisting of 13 patients with epilepsy (7 women, 6 men). They were trained intensively during the 5 days on the issues of epilepsy, healthy life, safety, and first aid, coping with disease, psychological and social aspects of being patient with epilepsy. They provided with training materials and 5 booklets about epilepsy. After completing the training, all 13 patients often contacted KES, fill their diaries. 4 from 13 agree to participate in other training sessions as mediators. 3 of them were engaged in finding out non-registered patients.



A training session in Kutaisi

Partners: Kutaisi Epileptic Center (KEC)

Goal: The goal of the project is to establish the system of medical and social service for epileptics through the training of medical staff, epileptics and their family members, establishment of system of self care and forming of advocacy mobile groups.

Key Project Accomplishments

- 3 epilepsy patients mobilization groups established
- Two six days trainings conducted for patients
- Two six days trainings conducted for family members
- 24 patients received training
- 38 health professionals received training
- 41 patients' family members received training

Impact Summary:

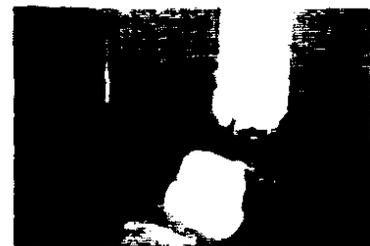
As a result of project there were registered and received treatment new epileptic patients. The capacity of patients and their family members on how to take care of their illness has increased. The level of knowledge of health professionals was increased. The attitude of people towards epileptic patients changed to positive.

Beneficiary Information:

- Total Beneficiaries: 1200
 - Men: 500
 - Women: 700
 - Children: 0
 - IDP: 85

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCM	\$ 25 956		\$ 25 956
LNGO		\$ 7 964	\$ 7 964
External:			
Government			
Int'l Donor			
Private			
TOTAL:	\$ 25 956	\$ 7 964	\$33 920



Follow up and Sustainability:

The mobilization groups established will ensure the sustainability of established system. The KEC is looking for new sources of funding the continuation of the project.

Project Title: Health education in Imereti and Racha-Lechkhumi

Region(s): Imereti and Racha - Lechkhumi

Project Type: Community Based Health Education

Health or Social Need: The health status of the Georgia population has worsened last 10 years. One of the reason of that in addition to poor physical and health service infrastructure is the lack of knowledge of the population on their health problems and the ways of its correction.



Health education for mothers in Racha-Lechkhumi

Project Description: 13 types of leaflets were created together with 7 types of posters and a manual for healthcare educators. Groups of three community educators were formed in each of the 36 communities. In order to cover wide range of the community the group included community doctor, teacher and a community representative. The training and monitoring officers were trained as well as 108 community educators of 36 communities. Trainers came up with healthcare education plans for information distribution within the population and this envisaged holding frequent seminars and meetings in the communities. A Survey was conducted to identify level of public awareness on healthcare issues and covered whole project area.

Partners: Georgian healthcare Support Initiative; Curatio International Foundation; Public Union Bemoni

Goal: Information intervention to increase community awareness level on certain healthcare issues.

Key Project Accomplishments

- 108 community health educators were selected
- 36 community health groups were formed
- 16800 community members were trained
- Leaflets, posters and manuals were distributed to community members and community health educators

Impact Summary:

According to the results of the evaluation survey the public awareness on major health problems increased by 10-15 %. This gave possibility to community members to make health decisions without any external interference.

Beneficiary Information:

-Total Beneficiaries: 16908
 - Men: 6720
 - Women: 10080
 - Children: 5104
 - IDP: 168

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCM	\$ 74 904		\$ 74 904
LNGO		\$ 10,571	\$ 10,571
External:			
Government			
Int'l Donor			
Private			
TOTAL:	\$ 74 904	\$ 10,571	\$85 475



Health education class in Imereti

Follow up and Sustainability:

All targeted communities formed health groups & developed their one year activity plan. The trained community health educators from the very beginning worked on a voluntary basis that is the strong guarantee of the project sustainability.

Helpers International Foundation



Project Title: Sustainable support to Institutionalized children

Region(s): Imereti

Project Type: Social Protection



Health or Social Need:

Children institutions in Georgia due to current bad economic and social situation are poorly maintained and badly deteriorated. Level of care and treatment at such institutions is very low and children suffering serious psychological problems.

Project Description:

Main objectives of the project were:

1. Provide children and staff at the children institutions - Gumati Support School-Internat and Kutarsi School for Deaf and Dump with a long-term sustainable access to food.
2. Provide children with necessary life skills through theoretical and practical applications.
3. Provide children with access to better services, such as education, health and physical development.

Members of two CBOs established in this institutions have received training in project writing, monitoring and evaluation, budgeting. There were submitted and implemented by the CBOs micro-project in Gumati school- establishing of sewing workshop, which had employed teachers and children and were produced bed linen and tea towels. In Deaf-and Dump school were submitted and implemented micro- project -establishing Of stone-processing workshop , which helped students to develop professional skills and second micro-project identified for the school was providing cattle for school farm , which improved access of students to food.

Goal:

To support vulnerable children affected by the social and economic crisis in Georgia.

Key Project Accomplishments

- 544 children and staff were provided with sustainable access to food.
- There were established two CBOs , which will work in other projects in the future.
- 78 children were provided with necessary life skills through theoretical and practical applications.
- Institutions established 3 sustainable micro-enterprises, which employed people and generate products and profits.

Impact Summary:

Project supports vulnerable children affected by the social and economic crisis in Georgia

Beneficiary Information:

-Total Beneficiaries:	610
- Men:	289
- Women:	321
- Children:	142
- IDP:	26

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCM			\$ 21 109
LNGO			\$ 4 390
External:			
Government			\$ 540,00
Int'l Donor			
Private			
TOTAL:			\$ 26 039



Follow up and Sustainability:

The project provide vulnerable and disable children with access to better food , shelter and better social services , such as education, health and physical development. Self-sustainable and profitable enterprses, established CBOs with expenence gain from this projects will give the institutions more power to overcome everyday problems , such as maintenance of the schools , basic food and cloths needs, school furniture, equipment and textbooks.



Project Title: Health Education in Samegrelo and Upper Svaneti regions

Region(s): Samegrelo and Upper Svaneti

Project Type: Community Based Health Education

Health or Social Need: The health status of the Georgia population has worsened last 10 years. One of the reason of that in addition to poor physical and health service infrastructure is the lack of knowledge of the population on their health problems and the ways of its correction.



Project Description:

Groups of three community educators were formed in each of the 43 communities. In order to cover wide range of the community the group included community doctor, teacher and a community representative. The trainers were provided with leaflets, posters, registration journals, manuals and schedule for each month. Total 90404 leaflets and 848 posters were given away. The trainers tested community members before and after trainings in order to measure their Health Education level. The trained community health educators developed their training schedules and hang it at different places accessible for the communities. They have formed the groups of women, children, etc and provided the training in different subjects according to their needs. In order to raise the local trainers reputation and incorporating wide masses of the population in the project free medical preventing examinations were organized in the mountain villages Chvana, Tchmorisi and Zamleti, (Consultations of the theurapists, cardiologist, gynaecologist, peditrieries, echoscopic examination) The consultations were held in Ozurgeti, Lanchkhuti, Chokhatauri district.

Goal: Information intervention to increase community awareness level on certain healthcare issues.

Key Project Accomplishments

- 105 community health educators were selected
- 35 community health groups were formed
- 18000 community members were trained
- 319 individual counseling were accomplished by the community health educators
- Leaflets, posters and manuals were distributed to community members and community health educators
- 2004 training sessions were conducted by the community health educators

Impact Summary:

According to the results of the survey the public awareness on major health problems increased by 30 %. This gave possibility to community members to make health decision without any external interference.

Beneficiary Information:

-Total Beneficiaries: 18000
 - Men: 7568
 - Women: 6403
 - Children: 1165
 - IDP: 1257

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCM	\$18 528		\$18 528
LNGO		\$23 620	\$23 620
External:			
Government			
Int'l Donor			
Private			
TOTAL:	\$18 528	\$23 620	\$42 148



Follow up and Sustainability:

In all targeted communities the formed health groups developed their one year activity plan. The trained community health educators from the very beginning worked on voluntary basis that is the strong guarantee of the project sustainability.



Project Title: Pilot Integrated Studies for Children with Disabilities in Zugdidi
NGO First Step

Region(s): Zugdidi

Project Type: Community Based Social Services

Health or Social Need: Children with disabilities are attached with the stigma, many of these children never have opportunity to study and learn.

Project Description: The project deals with integration of disabled children in the community, it provides an opportunity for children to grow and develop together with their peers in the school environment. The project offered integrated education to 18 disabled children in Zugdidi, West Georgia. Through this effort The First Step Foundation aimed at implementing the best practice for education of disabled children, development of the integrated and further inclusive education in Tbilisi and regions of Georgia as well as reduction of number of institutionalized children through provision of day care services. The project capacity was created within the past year, through such efforts as training of staff, partnering with local organizations, renovation of building and the playground. The success of the project is preserved in developing capacity of the local parent organization "Nergebi" and full support of local authorities.



Special education classes in Zugdidi

Partners: 1. Parents organization "Nergebi" based in Zugdidi. 2. NGO "Children of Georgia", based in Tbilisi; 3. Irish Foundation St. Lazarus, Ireland

Goal: Integration of the children with mental and physical disabilities into the society in Zugdidi, Samegrelo region.

Key Project Accomplishments

- Two psychologists and 8 teachers were selected and employed
- Two psychologists and 8 teachers trained in behavioral analysis and in working with disabled children with duration of two months;
- Theoretical materials supplied;
- 8 teachers and 2 psychologist involved in the training process.
- 18 mentally and physically disabled children selected by "Nergebi"- Parents Organization of Zugdidi District with assistance of "First Step";
- First Step with the assistance of St. Lazarus Ireland Foundation adapted Learning environment and renovated the space for the classes
- 18 individual plans for disable children created;
- Each student received basic curriculum training according to individual abilities.
- Students have gained elementary knowledge in Georgian Language, Mathematics, and Science.
- Students have acquired everyday skills (eating, dressing, using restroom, etc.)

Impact Summary:

Specialists received more spots on knowledge abilities because of its connection to individual goal. Children's ability to behave in the society increased a little. Level of communication ability increased. Children had chance to communicate between each other.

Beneficiary Information:

-Total Beneficiaries: 64
- Men: 30
- Women: 34
- Children: 18
- IDP: 0

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCM	\$ 24 486		
LNGO	26 600		
External:			
Government			
Int'l Donor			
Private			
TOTAL:			



Follow up and Sustainability:

Capacity of LNGO "Nergebi" increased to follow up the project implementation. Local Authority will provide finances for the mill and free electricity and water. The LNGO Nergebi initiated advocacy campaign to make local education department to include in their budget certain amount for this school.



Project Title: Community Integrated Management of Childhood Illnesses (CIMCI)

Region(s): Imereti, Samegreto, Upper Svaneti, Racha Lechiumi, Lower Svaneti, Ajara

Project Type: Community and Child Health Development

Health or Social Need: The Child mortality and morbidity rates are very high in Georgia. Improper management of common illnesses by medical providers and parents leads to avoidable illness and mortality among children and hampers their growth and development.



Training seminars in Mestia - Upper Svaneti Region

Project Description: The CIMCI strategy combines improved case management of childhood illnesses in first level health facilities with aspects of nutrition, immunization, disease prevention and promotion of growth and development. Claritas XXI conduct 11-day UNICEF standard course trainings of health workers (doctors and nurses) in the skills needed to apply these algorithms. The NGO also conducted post-training assessment in all targeted communities. Training needs took place in a teaching hospital that provided a classroom and sufficient number of actual cases of children illnesses. The community representatives were selected and trained in sanitation and communication issues.

Partners:

The CIMCI project was co-financed by UNICEF who contributed \$20,000 for project activities.

Goal: The community IMCI initiative aimed to reduce mortality and morbidity associated with major causes of disease in children under five, and to contribute to their healthy growth and development.

Key Project Accomplishments

- 83 doctors were trained in CIMCI during the projects lifetime
- 78 nurses were trained in CIMCI during the projects lifetime
- 78 community health groups were formed in 78 communities mobilized by WGCMI
- 245 community representatives were trained in CIMCI
- 78 primary health care clinics improved services for children under five 60 % increase in knowledge level of medical professionals on CIMCI
- The level of knowledge of caretakers in CIMCI increased by 60 %
- Communication/supervision between district polyclinics and ambulatories improved

Impact Summary:

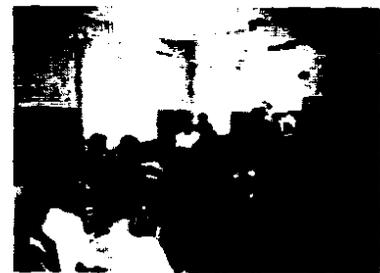
Quality of service provided by health professionals increased in PHC clinics of WGCMI mobilized communities.

Communication/supervision between district polyclinics and ambulatories improved. The community

Beneficiary Information:

- Total Beneficiaries: 40 406
- Men: 18991
- Women: 21415
- Children: 40000
- IDP: 521

	In-Cash	In-Kind	Total
WGCMI	\$49 739		\$49 739
LNGO		\$5 648	\$5 648
External:			
Government			
UNICEF	\$20,000		\$20,000
Private			
TOTAL:	\$69 739	\$5 648	\$75,387



Training of Community Members

Follow up and Sustainability:

1. The program of Integrated Management of Childhood Illnesses is acknowledged by the state as one of priorities till 2010;
2. Inclusion of the program in permanent education process;
3. Involvement of the program in test-questionnaires for certification of medical workers;
4. Creation of coordinative groups at regional levels that will supervise village outpatient clinics;
5. The representatives of "CLARITAS" field offices will make observation of activities conducted by supervisors and medical workers of village outpatient clinics;
6. The sessions conducted by the trained community representatives together with medical workers.



Project Title: Community Based Health Financing Project
NGO Curatio International Foundation

Project Type: Community Based Health Finance

Region(s): Imereti, Guria and Samegrelo

Health or Social Need: The qualitative research carried out by CIF in 2001 and 2002 has shown that many Georgians have lost faith in the government's promise to provide health care and rarely accessed state services because the government has failed to meet the promises. Self-reliance among the Georgians is increasing and more (if they can afford) prefer to purchase the better quality services through direct payments to the providers. Thus, in one hand, there is a significant reliance on private payments for medical services that create significant financial access barriers for the population and on the other hand, low level of trust in the government, triggering more self-reliance among communities.



Training session of PHC staff and CBHF scheme board members in Tbilisi.

Project Description: The general approach of addressing community health financing problems is to establish Community Based Health Financing Schemes, that could mobilize community financial resources on a pre-paid basis, thus, remove existing financial access barriers for the scheme members. It was hoped that mobilized financial resources would also benefit the health care providers in the community to improve coverage of scheme members with quality primary health care services. The schemes were hoped to also help enlarge the role of local PHC providers and community members in solving their health problems, through their participation in management and supervision of the CBHF Schemes.

Goal: The main goal of the project was to decrease financial access barriers in the targeted communities through establishing Community managed and operated schemes that mobilize community financial resources on a "pre-paid" basis.

Key Project Accomplishments

- 12 CBHF schemes were established in west Georgia communities during the project lifetime
- 250 individuals have gone through the course of trainings provided by the CIF
- 29 job places were created since the project outset;
- PHC utilization rate increased by 129.8% in all 12 villages;
- 28.63% of total population have enrolled in the CBHF schemes.
- CBHF schemes provided communities with additional health care services above the currently existing medical services.
- Capacity building of CBHF scheme managers, health care providers and community members.

Impact Summary:

Quality of service provided by health professionals increased in PHC clinics of WGCMC mobilized communities.

Communication/supervision between district polyclinics and ambulatories improved. The community

Beneficiary Information:

- Total Beneficiaries: 6633
- Men:
- Women:
- Children:
- IDP:

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCMC	\$ 74,395		\$ 74,395
LNGO		\$ 10,571	\$ 10,571
External:			
Government			
Int'l Donor			
Private			
TOTAL:	\$74,395	\$ 10,571	\$84,966



Training of CBHF scheme board members in Guria Region

Follow up and Sustainability:

1. All established CBHF schemes reached both administrative and financial sustainability and operate without external assistance;
2. Conduct planned activities to sustain achievements;
3. Design and implementation of Social Marketing campaign in order to promote CBHF scheme activities;
4. Stabilize existing enrollment rate and take efforts to increase the rate;
5. Assure provision of high quality health care services to the population;
6. Conduct IES activities among the community members.



Project Title: Chiatura Youth Centre
Project Type: NGO Child and Environment
 Community Based Social Services

Region(s): Imereti

Health or Social Need: Social situation in Imereti Region, particularly in Chiatura, has become extremely grave for the last 10-12 years. Unemployment, poverty and very difficult criminal situation adversely affected the mental and physical condition of adolescents. Family relationships are being destroyed frequently resulting in divorce: a large part of children lack, fully or partly, for parental care.



Lunch time

Project Description: To achieve the project goal the day center was established in Chiatura. The social workers have selected 150 peoples for the center. Selected children were divided into 3 age groups. Children practically spent most time of the day in the Center; the students had meals twice a day (lunch and dinner), computer, drama, sport, sewing, English, singing, dancing, painting classes, the psychologist worked with the children also. The parents were helping the staff of the Center with cleaning of the Center ground and building. The special Parents Committee, comprising of five parents are responsible to control hygiene and sanitation condition of the center, they assisted children and staff in arranging cultural and recreational activities -excursions, concerts, exhibitions. A local humanitarian organization - Meokhi - provided 125 jackets, socks and hats for vulnerable children. The director and staff of a secondhand shop provided the children with textbooks and pens. The psychologist worked with these pupils.

Goal: To improve the skills and knowledge of children of vulnerable households through providing them with non-formal education and professional skills and Psychological rehabilitation.

Partners: Youth Center "JEJILI" in Naguti Settlement; UNICEF

Key Project Accomplishments

- Children's self-consciousness and self-assessment were increased;
- 90 % of students improved relationship with family members, friends, teachers as a result of psychological discussions;
- Children were taken back from the street life through their involvement into the activity of the Center.
- 66% of students improved their academic performance

Impact Summary:

The behavior of 150 young people improved significantly to positive. Their school performance was improved.

Beneficiary Information:

- Total Beneficiaries: 150
- Men: 80
- Women: 70
- Children: 160
- IDP: 0

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCMC	\$ 21 489		\$ 21 489
LNGO		\$ 6 630	\$ 6 630
External:			
Government			
Int'l Donor			
Private			
TOTAL:	\$ 21 489	\$ 6 630	\$ 28 119



Follow up and Sustainability:

Under leadership of the president of "Child and Environment" Nana Iashvili, the means for 3 year financing of the center were obtained; the World Food Program envisages the finances allocated by "Save the Children", the exemption of the Center from payment for electricity, water and other municipal service.

Project Title: Step by Step
Project Type: Step-by-Step Primary Education Development Project

Region(s): Imereti, Samegrelo, Guria, Ajara



Health or Social Need: General education system in Georgia is deteriorated, especially in rural area. It can not provide relevant skills to youth to effectively participate in Georgia's social and economic development. It requires upgrading of physical and educational infrastructure, as well as improvement of administration and teaching in general secondary schools.

Project Description:

Project introduced the new methodology, which focuses on child-centered approach and developmentally appropriate practices making emphasis on individualization and family and community participation and contributes to the democratic way of teaching and learning in the selected schools of western Georgia. During first stage of the project 11 schools were selected. The sites were selected from among the educational institutions that have been supported by the WGCMI and where rehabilitation works were completed. The implementation of this program was the logical next step in the improvement of the quality of education in the CBOs that have identified education as their priority through the Participatory Learning Appraisal and Strategic Planning Events. In order to create the classroom environment that corresponds to SBS program standards that facilitates successful classroom performance, the classrooms were furnished according to SBS guidelines. This was accomplished through micro projects by the community themselves following WGCMI program standard requirements for community participation. The training sessions were held for the 80 teachers and staff from the selected 11 school sites. The participants were divided into two groups of 39 and 41 people and each group received 6-day training, 24 sessions in all. The participants received number of handouts for each topic and 4 methodology books. Project promoted parents participation in the education of their children through providing them with relevant skills and knowledge.

Goal: The goal of SbSP is to prepare children to live and be successful in the rapidly changing world, develop and maintain the desire for lifelong learning.

Partners: Open Society Institute - New York provided co-funding and technical leadership in this program.

Key Project Accomplishments

- 11 communities were selected for the participation in SbS project
- 11 schools were selected for classroom equipment
- 80 teachers improved their skills through training in child-oriented methodology
- 44 primary school classrooms were rehabilitated & equipped through WGCMI Micro project funding mechanism

Impact Summary:

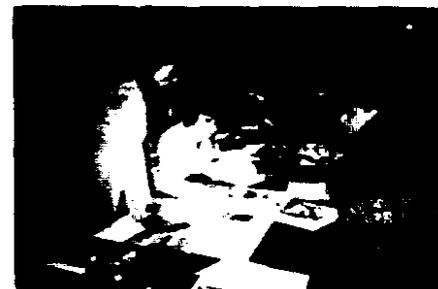
Step by Step project contributed to the improvement of the education process in general secondary schools. Project promoted parents active participation in their children education process.

Beneficiary Information:

- Total Beneficiaries: 960
- Men: 452
- Women: 508
- Children: 880
- IDP: 85

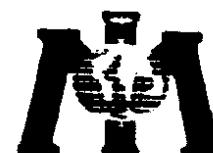
Partners / Contribution:

	In-Cash	In-Kind	Total
WGCMI	\$ 40 000		\$ 40 000
LNGO			
External:			
Government			
OSI-New York	\$ 30 000		\$ 30 000
Private			
TOTAL:	\$70 000		\$70 000



Follow up and Sustainability:

It is envisaged to carry out follow up activities, namely to visit the classrooms operating according to SbS Program for the provision of consultancy as well as for the evaluation of the classroom performance quality according to the established SbS Program and Teacher Standards and finally to assess the Program outcomes according to the developed success indicators. The CEI staff will be available for all trained teachers and staff for further consultancy and advisory services related to the improvement and refinement of the Program methodology implementation after the completion of the Project.



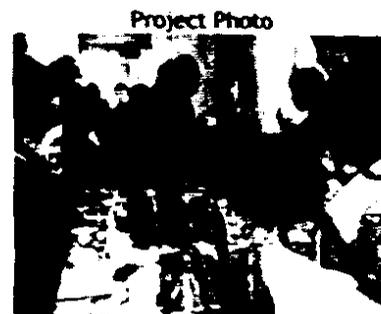
Project Title: "Social House - First Step"

Region(s): Guria

Project Type: Community Based Social Services

Grant Award No: RFA-GC8-002-DT

Health or Social Need: People currently going through an episode of a mental illness are facing daily discrimination. There is no opportunity for people with mental illness to receive rehabilitation after receiving the treatment. This discrimination coupled with unfavorable economic and living conditions and careless attitudes promotes isolation of these members of our society. In addition to the difficulties of overcoming living, social and psychological problems, family members also feel ashamed for having a family member with a mental illness.



Project Photo

New year party celebration

Project Description: In order to establish the social house the LNGO staff undertook the refurbishment of the building donated by Ozurgeti Church. The project selected the users base on the pre-defined selection criteria. Training of the social house staff and other mental health specialists were conducted in Tbilisi by the trainers of NGO "Georgia Mental Health Association". During its lifetime the project arranges series of social activities of mentally disabled people. The project introduction of new methodologies of community based social services and target group education. The consortia organized number of events that increased public awareness to overcome stigma and social exclusion.

Goal: The goal of the project is to establish the house for mentally disabled people, to improve their psychosocial service, protection of their interests and their integration in social life.

Partners: Women's Health Care Association of Guria "Patient Plus"

Key Project Accomplishments

- The project completed the rehabilitation of the building for social house for 30 mentally disabled people
- Two groups of users created
- 36 users visited at home
- 72 health workers received trainings;
- 34 trainings were provided to health professionals;
- There were distributing 1500 papers, 600 leaflets, 50 books
- 12 meetings were conducted with the local community-antistigma campaign
- Thirty mental health users have received art therapy, ergo therapy and music therapy courses during the project lifetime;

Impact Summary:

The project provided high quality service to the mental ill users that significantly changed their health status. As result of project's hard effort to brake existing in Georgia society stigma towards mental illness, the attitude of Ozurgety community has changed to positive.

Beneficiary Information:

-Total Beneficiaries:	86
- Men:	28
- Women:	58
- Children:	0
- IDP:	0

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCM	\$ 32 858		\$ 32 858
LNGO	\$ 8630		\$ 8630
External:			
Government			
Int'l Donor			
Private			
TOTAL:	\$ 41488		\$ 41488

Project Photo



Interview with implementing staff

Follow up and Sustainability:

New contacts were established with international funds (GIP, Hamlet Trust, Cordaid). The consortium was granted by Hamlet trust to develop green house for our users; The consortium wan MDAP grant to arrange Mental Health Day in October in Guria region and hold social house users exhibition. The local authority will provide free facility for ten years and electricity free of charge.

Project Title: Social Protection of Children in Samegrelo and Upper Svaneti

Region(s): Samegrelo

Project Type: Community Based Social Services

Health or Social Need: Due to the poor economic situation in Georgia, the system of social protection of children is deteriorated, especially in rural areas. Although there is an acute need in the villages to have the kindergarten, communities can not resolve this problem on their own.



Kindergarten in Mukhuri Community

Project Description: In collaboration with CBOs, the Aegis staff accomplished the rehabilitation of three kindergartens of Tsalenjikha district- Jgali, Medani and Mukhuri. The LNGO Aegis initiated purchase of kindergarten basic equipment. The kindergarten children were provided with toys, note-books, pens and pencils and other supplies. Local governments supported the kindergartens by covering the electricity expenses in all three communities and heating expenses in Mukhuri also. Aegis supported the training of 14 selected teachers. The training was conducted by the LNGO Atinati trainers contracted by Association Aegis. Parent-teacher associations were formed in all three communities. The major objectives of these associations are to improve financial management of community teaching institutions and to exchange ideas between the teachers and the community representatives. By the initiative of Aegis there were medical check-ups and vaccinations for kindergarten children in the three communities.

Goal: The goal of the project was to provide community-based childcare through sustainable support of pre-school education in three vulnerable communities of Samegrelo.

Key Project Accomplishments

- 86 children improved access to pre-school education (NGO and CBOs think that this number will increase to 100)
- 5 disabled children improved access to pre-school education and are integrated in the society
- 14 kindergarten teachers are employed and trained
- Approximately 160 women, who have a job, have access to day care for their children.
- Management capacity of 3 existing CBOs increased
- Improved parents -day care relationship in 3 vulnerable communities.

Impact Summary:

Project supported improvement of pre-school education in three vulnerable communities of Samegrelo through community active participation, which enhanced the over skills of its members

Beneficiary Information:

-Total Beneficiaries: 260
 - Men: 123
 - Women: 137
 - Children: 86
 - IDP: 26

Partners / Contribution:

	In-Cash	In-Kind	Total
WGCM	\$ 20 740		\$ 20 740
LNGO		\$ 9 490	\$ 9 490
External:			
Government			
Int'l Donor			
Private			
TOTAL:	\$ 20 740		\$ 30 230



Follow up and Sustainability:

To ensure sustainability of the project, the regional education department took responsibility for the provision of salaries for teachers in kindergartens from the beginning of the project. Aegis staff introduced the concept of a sliding scale scheme of payment for the parents to the community helping families with payment for childcare, the decision was made by the community and CBO members.



Name of NGO: Teachers Union "Education and the World"

Region(s): Tskaltubo
(IDP settlements in this city near Kutaisi, Imereti)

Project Title: "Community Based Voter Education project in Tskaltubo"

Project Type: Voters' Education RFA

Sub Grant Agree.
#: RFA-GC11-005 SS

Project Description:

Currently 4682 IDPs live in Tskaltubo District. IDPs did not participate in the elections up to the year 2000; the reason was that number of the voter IDPs was very low during the last two - Presidential and Local elections.

According to the preliminary assessment "Education and the World" determined that low level of knowledge about the election procedures and culture, informational vacuum and efforts of different parties, who were interested in falsification of the voter's voices was the main cause for people's low voter participation.

As the number of IDP constituency exceeds the number of local constituency in Tskaltubo District, it is necessary to organize education sessions for these people, which means to provide them with information on legal issues as they relate to elections.



Goal:

This project will eradicate gap between IDPs and local population, and will support their integration into society.

Key Project Accomplishments

Whole spectrum of voter education activities:

- Mobilization of citizens to check the voter lists for accuracy
- Voter rights and responsibilities
- Government structure
- What citizens should expect from their elected representatives
- Why voters participation is important
- Voters procedures from a voters perspective
- Votes counting procedures
- Outreach to disadvantaged groups

Impact Summary:

- Voter Education training was conducted in 19 IDP settlements in Tskaltubo district.
- LINGO trainers facilitated over 35 info meetings at 19 IDP's settlements in Tskaltubo district.
- Leaflets distributed in IDPs settlements of Tskaltubo district

Beneficiary Information:

-Total Beneficiaries: 2459
 - Men: 1400
 - Women: 1059
 N/A- Children:
 - IDP: 2459

WGCM/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement # RFA-GC11-005 SS		In-Cash
WGCM		\$2,335.00
LINGO		\$970.00
Total		\$3305.00

Follow up and Sustainability:

Developed effective and sustainable mechanisms for reaching disadvantaged groups and delivering information about election processes. Created environment where citizens are an active and integral part of democratic processes at the grass-roots level.



Name of NGO: Georgian Young Lawyers' Association

Region(s): Imereti

Project Title: "Raising the self Consciousness of the Electors"

Project Type: Voters' Education RFA

Sub Grant Agree. #: RFA-GC11-003-SS

Grant Amount awarded by WGCM: 4,619.55 USD
(For more details please see below)

Photo:



Project Description:

Project intended to support and maintain capacity of voting stakeholders through formal trainings, workshops, legal consultations. Meetings with potential voters and providing them with useful information about voters' rights and duties, also motivating voters to participate in the elections.

Goal:

To increase capacity of voters in their rights and duties during elections

Key Project Accomplishments

- 1164 people trained in 33 communities
- 7390 information leaflets and brochures distributed
- 87% of trained electors participated in the elections
- 38% of trained electors have contributed in education of other voters

Impact Summary:

Capacity of voters has significantly increased.

Beneficiary Information:

- Total Beneficiaries: 1164
- Men: 547
- Women: 617
- Children: 87
- IDP: 87

WGCM/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement # RFA-GC11-003-SS	In-Cash
WGCM	4619.55
LNGO	618.00
Total	5237.55

Follow up and Sustainability:

Developed effective and sustainable mechanisms for reaching disadvantaged groups and delivering information about election processes. Created environment where citizens are an active and integral part of democratic processes at the grass-roots level.



HELPERS INTERNATIONAL FOUNDATION

Name of NGO: Helpers International Foundation

Project Title: "Electors Education Initiative"

Project Type: Voters' Education RFA

Grant Amount awarded by WGCMI: \$14,935.00 USD
(For more details please see below)

Project Description:

To increase self-awareness of voters of their rights and duties in order to actively involve voters in elections and ensure fairness of elections. This has been achieved through training-seminar sessions about election code and voting process/procedures.

Region(s):
Imereti and Guria

Sub Grant Agree. #: RFA-GC11-001-SS



Goal:

To increase capacity of voters in their rights and duties during elections and ensure their active participation in elections

Key Project Accomplishments

- 39,134 people trained in 72 communities
- 42,080 information leaflets and brochures distributed
- 84% of trained voters participated in the elections
- 42% of trained voters have contributed to education of other electors

Impact Summary:

Knowledge of voters on the election process, procedures, and legal rights and duties has significantly increased.

Beneficiary Information:

- Total Beneficiaries: 39134
- Men: 18878
- Women: 20256
- Children: 2257
- IDP: 2257

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement #		In-Cash
RFA-GC11-003-SS	WGCMI	14,935.00 USD
	LNGO	2,700.00 USD
	Total	17,635.00 USD

Follow up and Sustainability:

Developed effective and sustainable mechanisms for reaching disadvantaged groups and delivering information about election processes. Created an environment where citizens are an active and integral part of democratic processes at the grass-roots level.



Name of NGO: Euro-Caucasian Cooperation Association

Region(s): Adjara & Samegrelo

Project Title: "Community Based Voters' Education in Adjara and Samegrelo Regions"

Project Type: Voters' Education RFA

Sub Grant Agree. #: 1) RFA-GC11-002 SS

Grant Amount awarded by WGCMI: 18,502.00 USD
(For more details please see below)

Project Description: Project director will inform the regional and district authorities, and election officials about Community Based Voter Education Initiative objectives, obtain additional detailed field insights and develop plans for meetings with a wider cross-section people in target communities.

Qualified project staff will conduct training sessions on following topics: Mobilization of citizens to check the voter lists for accuracy; Voter rights and responsibilities; Government structure in Georgia; What citizens should expect from their elected representatives; Why voter participation is important; Voting procedures from a voters perspective; Voter counting procedures; Outreach to disadvantaged groups.



Goal:

Community Based Voters' Education Project to contribute significantly in changes of citizen knowledge, attitudes and behavior as well as trust of the election process.

Key Project Accomplishments

- Local groups for Community Based Voter Education in partnership with CBOs formed by project mobilizers in 90 communities Adjara and Samegrelo regions.
- Detailed plans for CBVE Activities developed by CBVE local groups.
- 270 Voter Educators with knowledge and skills to plan and implement CBVE Activities Trained by project trainer team in one month.
- Wide cross of community members in 90 communities Adjara and Samegrelo were provided with CBVE and informational materials.

Impact Summary:

- 284 Voter educators elected and 104 CBVE group formed with involvement of CBO members
- 12 project staff trained for CBVE by IFES. 271 Voter Educators trained from 101 communities; 96% of participants, who pass the pre and post-test increased their knowledge of voting procedures; Number of correct answers increased from 58 to 90%.
- 26,567 citizens received voter education materials in 106 communities.

Beneficiary Information:

-Total Beneficiaries: 21590
 - Men: 10360
 - Women: 11230
 N/A- Children:
 - IDP: 1511

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement # RFA-GC11-002 SS	In-Cash
WGCMI	\$18,502.00
LNGO	\$2,244.00
Total	\$20,746.00

Follow up and Sustainability:

Developed effective and sustainable mechanisms for reaching disadvantaged groups and delivering information about election processes. Created environment where citizens are an active and integral part of democratic processes at the grass-roots level.



Name of NGO: Racha-Lechkhumi & Lower Svaneti Sakrebulo Association
Project Title: "Racha-Lechkhumi & Lower Svaneti Voters' Education"
Project Type: Voters' Education RFA

Region(s): Racha -
Lechkhumi &
Lower Svaneti
Sub Grant Agree. #: RFA-GC11-004 SS

Grant Amount awarded by WGCMI: 8,058.00 USD
(For more details please see below)

Project Description:

IFESs Kutaisi representatives will conduct trainings for trainers. There will be meetings with community members about election. Meetings will be held with voters to get aware of citizens rights and duties. Trainers will work in each community in Ambrolauri, Oni, Tsageri and Lentekhi Districts aiming at active involvement of population in the upcoming elections.



Goal: To make clear for citizen what's the importance of their participation in country's governance and life.

Key Project Accomplishments

- Totally 392 people from Ambrolauri, Lentekhi, Oni, Tsageri districts will participate in trainings.
- The trainers will work in 49 communities. Each team will conduct trainings once a week with groups consisting around 15-20 people. 14 060 voters will receive election education in the community.

Impact Summary:

- Trainings for 392 trainers of communities of Ambrolauri, Oni, Tsageri and Lentekhi districts were conducted that informed them about the changes in the voting code.
- 392 trainers in communities conducted trainings for 11760 voters in order to inform them about the voting procedures and their own rights.

Beneficiary Information:

- Total Beneficiaries: 14452
- Men: 5771
- Women: 8681
- Children: 1400
- IDP: 168

WGCMI/Partners / Contribution:

(According to the sub grant agreements)

Sub Grant Agreement #		In-Cash
	WGCMI	\$8,058.00
	LNGO	\$1,912.00
	Total	\$9,970.00

Follow up and Sustainability:

After spending the project money RLSSA continued working with the volunteers and other donors. An active participation of the voters was best result of the project. After the implementation 8 qualified trainers were assigned in each community. These trainers had enough knowledge to continue the same kind of activity independently.

ANNEX 8

HSW Unit Accountabilities

1. Induction training for the CARE Community mobilization team and LNGOs responsible for community mobilization on health and social welfare

- Introduction and instruction on filling up of the ambulatory, school and social assessment forms
- Instruction on health focus group discussion conduct and filling up the questionnaire.
- Introduction of hygiene sanitation norms for Ambulatory, Water system and Secondary school kindergarten rehabilitation MPs and training of it's usage in proposal development.
- Training of the LNGOs on social impact assessment (TBD).

2. Pre-evaluation site visits and preparation of project documents for Proposal Review Committee meetings.

Pre-evaluation site visits and the preparation of project documents for PRC meeting takes place prior to the review of the short listed projects together with the Regional team members – CMs, TQ&S Officer and GOs

The purpose of the visit is to:

- Check the quality of application of the hygiene and sanitation norms for the health and social welfare related micro-projects.
- Check the budget line items related to HSW activities (essential equipment, construction of the toilet, etc)
- Check the HSW related support documents
- Check HSW related success indicators
- The recommendations will be included in MP cover sheet.

3. Participation in PRC meetings (for MPs, SPs and RFAs)

- HSW officer will make a presentation on the recommendations given on HSW issues (for MPs and Small Projects).
- HSW Advisor takes part in voting final decision (for MPs, Small Projects and RFAs).

4. MP and Small Projects' monitoring

- #### 4.1 MP Implementation Monitoring - after the sub agreement is signed, HSW officers will conduct one monitoring visits to each HSW related project sites (ambulatory, school, cultural house, water system rehabilitation).

The purpose of the visit is to:

- Monitor the progress and quality of the implementation of the health and social welfare related recommendations
- Monitor the usage of the essential equipment and assess needs for additional training
- All the collected information will be included in HSW component MP Monitoring Form.

Note: In case of a problem the MP site can be visited in addition to the scheduled visits.

- #### 4.2 Monitor the completion of micro-project implementation. The project site will be visited together with

the Regional team of CM, TQ&S officer and GO at the completion of the MP

The purpose of the visit is to:

- Track the implementation of the health related indicators
- Track the implementation of the Sanitary/hygienic recommendations
- To identify key lessons learned during the MP implementation
- HSW officers will fill up and sign the Project Completion Assessment Form together with the WGCMI community Mobilizers and Grants officers.

5. Community Mobilization LNGO capacity monitoring:

- Monitor the Capacity of community mobilization partner LNGOs in conducting the assessments of ambulatones, schools and community social status.
- Monitor the Capacity of community mobilization partner LNGOs in giving the recommendations on sanitation hygienic norms to community health related projects.
- All the collected information will be included in LNGO Check list form.

6. Unsolicited Grants Evaluation for short listing

- HSW officers take part in the short-listing of the unsolicited proposals
- The HSW officers will review all the submitted proposals and then a team will meet to discuss and decide upon which proposals qualify for short listing.

7. HSW RFAs

- RFA development and or review
- Coordination with co-funders (UNICEF and Soros) and other agencies working in the same fields
- Information Meetings for the applicant LNGOs – HSW sector staff will participate in the information meeting together with GM and GO to provide specific information on HSW RFAs.
- **Short-listing of the RFA Proposals** - HSWU takes part in the short-listing of the HSW RFA proposals. The HSW staff will review all the submitted proposals in advance and then a team will meet to discuss and decide upon which proposals qualify for short listing.
- **Monitoring of the implementing LNGOs.** The purpose of the monitoring is to verify that the LNGO has affective project management system in place. These systems generally include several of the following (specific for the particular RFA): beneficiary selection, training, and capacity building of local groups and organizations, internal monitoring and evaluation plans.

HSW will develop a monitoring plan specific to each project. The plan will be based on the approved project proposal.

LNGO monitoring will take place on quarterly bases at a minimum. Monthly monitoring will take place as appropriate.

The plan will be reviewed and discussed with the LNGOs prior to finalizing. After each monitoring HSW sector will prepare a monitoring report and sent it to LNGO. The report will provide information on the strengths and weaknesses of the project implementation, areas needing improvement and ways of improvement.

All the collected information will be included in the LNGO Monitoring Form.

▪ **Final Evaluation of the Projects**

The purpose of the evaluation is to measure the impact indicators and determine the impact of the project as well as to assess the potential for sustainability.

8. Drug donation distribution and monitoring

- Drug selection
- Management of shipping and customs clearance
- Distribution plan development
- Monitoring plan development
- Selected of recipient clinics
- Distribution of drugs to the selected clinics along with the drug information in Georgian
- Training of providers in rational drug use
- Monitoring of distribution to the end users