

REPORT ON THE MID-TERM REVIEW OF THE STRIVE PROJECT



Submitted to:
Catholic Relief
Services/Zimbabwe
and
USAID/Zimbabwe

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**REPORT ON THE MID-TERM REVIEW OF THE SUPPORT FOR
REPLICABLE INNOVATIVE VILLAGE/COMMUNITY LEVEL
EFFORTS FOR CHILDREN AFFECTED BY HIV/AIDS IN ZIMBABWE
(STRIVE) PROJECT**

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The mid-term review team would also like to thank the Ministry of Health and Child Welfare, the Department of Social Welfare, the National AIDS Committee, UNICEF, CRS/Zambia, USAID/Zambia, SCOPE Zambia and COPE Malawi for allowing key members of their staff to participate (often over fairly extended periods of time) in the review. Not only were the contributions of each person from these organizations invaluable to the team and the results of the review, but their participation will help promote inter-agency collaboration which ultimately benefits all children at risk.

Finally, the mid-term review team would like to express its appreciation to CRS/Zimbabwe and USAID/Zimbabwe for their willingness to be innovative, take risks and undertake a participatory review. Having CRS/STRIVE and USAID/Zimbabwe representatives on the review team allowed the team to consult on a daily basis with those closest to STRIVE, discuss alternatives and their implications, and ultimately make recommendations, which were better grounded in reality.

Core Mid-term Review Team

Peter McDermott, Team Leader

Jonathan Brakarsh, Petronella Chigara, Lynne Cogswell,

Carol Coombe, Tonya Himelfarb, Mark Loudon, John Williamson

CRS/Zimbabwe and USAID/Zimbabwe Representatives

Columbus Chimani, Victoria James, Nyasha Mayanga,

Patrick Osewe, Mollyn Saurombe, Rita Sykes, Kyle Jemison

Government of Zimbabwe Representatives

Giva Roselyn Dete, Ministry of Health and Child Welfare

Nellie Dhlembeu, Ministry of Labor and Social Welfare

Karikoga Kutadzaushe, National AIDS Committee

Cooperating Partners

Stefan Germann (REPSSI), Linda Lovick (CRS/Zambia),
Perry Mwangala (USAID/Zambia),
Pelucy Ntambirweki (UNICEF), Stanley Phiri (UNICEF),
Mary Simasiku (SCOPE/Zambia), Brenda Yamba (COPE/Malawi)

Background

The national context

Over the past several years Zimbabwe has been severely affected by four interrelated and highly destructive crises: economic, political, humanitarian and HIV/AIDS. Any one of these crises would pose a severe challenge to any developing country—the combination has had a devastating effect on Zimbabwe. No sector of this once vibrant and growing economy has escaped damage, nor has any segment of the nation's diverse population emerged unscathed. Children, in particular, have been disproportionately affected.

Zimbabwe's health, economic and social indicators paint a picture of a country in deep crisis. As of January 2003, an estimated 7.2 million people, or 60% of the population, were in need of emergency food and other humanitarian assistance to survive.¹ An estimated 2.3 million people, or one-third of the sexually active population, are infected with HIV, of whom approximately 600,000 already have AIDS. Deaths from HIV/AIDS are estimated at 3,800 per week and leave in their wake a growing number of AIDS orphans.² Infant mortality has doubled to over 130 per 100,000 live births, and life expectancy has fallen to 39 years from 61 years in 1980.³ The food crisis is exacerbating the HIV/AIDS pandemic, with increased malnutrition accelerating the onset of AIDS for those infected with HIV and death for those with AIDS.

Zimbabwe's GDP declined by some 35% between 1997 and 2002. The annual inflation rate in 2002 was conservatively estimated at 175%. The market value of the Zimbabwe dollar has declined precipitously over the past two years, from the official exchange rate of ZD55:1 USD in January 2001 to ZD800:1 USD in May 2003.⁴ The drop has virtually wiped out the value of any household savings held in local currency. Unemployment is officially estimated to be in excess of 60%.

Situation of children at risk in Zimbabwe

Zimbabwe, along with Zambia, Malawi, Lesotho and Rwanda have the world's highest proportion of orphaned children (from all causes). The best available estimates⁵ suggest that in these five countries 17–18% of all children under the age of 15 had lost one or both parents by 2001. In Zimbabwe, that amounts to just **over one million orphans out of a total child population of approximately 5.8 million**. Of these, 77%, or some 780,000 of the orphans have lost one or both parents to AIDS. The next highest proportion of AIDS orphans is in Zambia, at 65.4%. Zimbabwe will likely have over 1.5 million orphans by the end of the decade.

¹ USAID Interim Humanitarian Assistance Strategy for Zimbabwe, draft, January 31, 2003, page 4.

² Epidemiological data in this report are from UNAID's Report on the Global HIV/AIDS Epidemic 2002.

³ U.S. Bureau of Census

⁴ Unofficial exchange rates are even more dramatic, declining from approximately ZD110:1USD in January 2001 to over ZD2,000:1USD in May 2003.

⁵ Children on the Brink 2002. A Joint Report on Orphan Estimates and Program Strategies, UNAIDS, UNICEF and USAID.

In addition to orphans, Zimbabwe is believed to have 240,000 children living with HIV/AIDS; 600,000 internally displaced children; 150,000 children living with disabilities; 12,000 children living on and off the streets; 5,000 children in institutions; and 26% of children aged 10-14 engaged in child labor.⁶ It is acknowledged that the number of child-headed households is increasing, although the exact magnitude of this phenomenon is unknown.

Zimbabwe has large numbers of children living in poor households which have taken in orphaned relatives. These households try to stretch already inadequate resources even further to provide for the additional children. There are also children who live with a parent chronically ill due to AIDS. In some cases these children become care providers for the parent. Additionally, there are children who themselves have HIV/AIDS. No one knows the total number of all the children affected by AIDS, nor does anyone have any idea of the number benefiting from current assistance programs.

National policy framework on child well being

The Government of Zimbabwe (GOZ) has a policy framework in place to provide for the protection of children. The National Orphans Care Policy and the National AIDS Policy are the core of this framework. The National Orphan Care Policy, adopted by the Cabinet in May 1999, focuses on strengthening a six-tier safety net system for children. The National AIDS Policy, which was launched in December 1999 following widespread consultation with Zimbabwean stakeholders and technical experts, provides clear guidance on matters pertaining to children affected by AIDS. To help operationalize this policy, the GOZ introduced a 3% “AIDS levy” payroll tax in early 2002 to improve AIDS services (excluding antiretroviral therapy). Funds from the levy are deposited with the National AIDS Trust Fund and distributed by the National AIDS Council to District AIDS Action Committees to implement AIDS programs.

To complement these policies, Zimbabwe has a well-developed legal framework for the protection of children’s rights and is a signatory to various international conventions on the rights of the child, including the Convention on the Rights of the Child and the African Charter on the Rights and Welfare of the Child.

In addition to its policy and legislative framework, the GOZ has social safety net programs for assisting children and households in difficult circumstances in place, including the Basic Education Assistance Module and the provision of social assistance to vulnerable families. Orphan care programs are coordinated through Child Welfare Forums at the district and central levels. These programs, however, are severely under-funded and Child Welfare Forums do not operate in many districts.

Subsequent to participating at the Southern Africa regional conference in Namibia on issues related to orphans and vulnerable children in November 2002, the GOZ-led delegation has embarked on a national consensus building effort to catalyze action among all levels of Zimbabwean society to improve the care and support of children at risk. The Ministry of Public

⁶ Presentation by Zimbabwean delegation at the Regional Workshop on Orphans and Vulnerable Children in Windhoek in November 2002, except children living with HIV/AIDS which is from UNAIDS figures quoted earlier.

Services, Labor and Social Services is convening a national meeting of those involved in children's issues in June 2003 to draft the outline of a National Plan of Action for addressing the condition of children at risk in Zimbabwe. CRS/STRIVE is actively participating in this effort.

USAID rationale for assisting children at risk

Under its Country Strategic Plan for the fiscal years 2000-2005, USAID/Zimbabwe committed to significantly broadening the scope of its HIV/AIDS program. Previous USAID efforts focused almost exclusively on behavior change interventions, whereas the new plan adopted "HIV/AIDS Crisis Mitigated" as its strategic objective. This strategic objective recognized that USAID/Zimbabwe's efforts to combat HIV/AIDS were taking place in a crisis environment and indicated that USAID planned to support the full prevention-to-care continuum of interventions needed to ameliorate the crisis.

To achieve its strategic objective, USAID's strategic plan identified three key intermediate results (IRs):

- IR1: Behavior change resulting from use of quality services with proven effectiveness to prevent HIV transmission and mitigate impact at the household level
- IR2: Enhanced capacity to conduct advocacy to prevent HIV transmission and mitigate impact at the national level
- IR3: Enhanced capacity at the regional and locals levels in Zimbabwe to support community responses to children affected by HIV/AIDS

In January 2000, USAID/Zimbabwe conducted a situation analysis of orphans and vulnerable children in Zimbabwe, building on the 1999 study undertaken by UNICEF. The study, which provided guidance on improving communities' ability to support children affected by AIDS without undermining existing creative and innovative community efforts, also proposed several principles for action.

On the basis of the situation analysis findings, USAID issued a Request for Applications (RFA) in March 2001, inviting organizations to submit proposals for a pilot project to support sustained and replicable community programs that assist children affected by AIDS.⁷ Following a competitive process, an independent review panel determined that the application by Catholic Relief Services (CRS) best met the requirements of the RFA.

CRS's proposal to USAID included several benefits expected to accrue from selecting CRS to undertake the pilot project, including:

- Partner relationships already established, thus allowing a faster start-up time;
- Partners already familiarized with CRS financial and management policies;

⁷ While the RFA specifically targeted "children affected by AIDS," the focus of the STRIVE project has gradually shifted toward children at risk in communities severely affected by AIDS. Recommendation 2 in Part III, Section 2 of this document discussed this issue in more detail.

- CRS's understanding of the Zimbabwean environment would allow for quick adaptation and facilitation of events; and
- CRS already had experts on staff in the country, regional, and home offices to assist with programming, systems structuring and technical advice.

CRS's cooperative agreement with USAID

In December 2001, CRS signed a Cooperative Agreement with USAID for implementation of the Support for Replicable Innovative Village/Community Level Efforts for Children Affected by HIV/AIDS in Zimbabwe (STRIVE) project. Under this Cooperative Agreement, USAID is providing approximately \$2.5 million in funding (with CRS contributing approximately \$1.0 million) to implement a two and a half year pilot project (ending June 19, 2004) testing innovative interventions that allow resources to reach children at risk quickly and efficiently and helps determine what basket of support would best meet the needs of large numbers of children at risk in Zimbabwe.

CRS/STRIVE's strategy is to provide sub-grants to local and international non-government organizations to support community efforts to assist children at risk. CRS/STRIVE helps build the organizational capacity of its sub-grantees and supports operations research to track and document the impact, quality, cost effectiveness and replicability of the community-level interventions, as well as the methods of delivering the various interventions. It is anticipated that the pilot project will help determine the usefulness of various community interventions/support strategies in providing an extensive network of support for larger numbers of children at risk and young people. USAID's RFA envisioned a second phase of STRIVE in which interventions identified by the pilot project would be applied more broadly and expanded to reach greater numbers of vulnerable children.

Project goals and objectives⁸

STRIVE's goal is **to improve the care and support of vulnerable children in Zimbabwe.**⁹ To achieve this goal, CRS outlined three objectives:

- To support and develop appropriate, effective and sustainable community-based approaches to support orphans and vulnerable children in Zimbabwe through participatory learning and action
- To improve the organizational capacity of at least eight local organizations enabling them to deliver high-quality care, support and prevention services for children at risk and their families
- To increase access to quality education for children at risk, with a special focus on girls

⁸ The STRIVE goal and project interventions have, in agreement with USAID, been modified from those presented in the original CRS project proposal. The goal and interventions presented in this document are those that were in effect at the time of the review.

⁹ Whereas the STRIVE program originally focused narrowly on "children affected by AIDS," the focus has slowly shifted to children at risk.

To achieve its goal and objectives, CRS identified five areas in which it would collaborate with its sub-grantees to support pilot activities:

- *Psychosocial interventions*: Child-focused activities to improve the psychosocial condition of orphans and other children at risk, as well as their caregivers.
- *Education assistance interventions*: Schemes for paying school enrollment and uniform costs for children at risk, particularly girls, either in the form of block grants or resource exchanges (books and desks in exchange for enrolment of an agreed number of children) that improve educational quality for many children in the school.
- *Food security interventions*: Community activities and intervention strategies, such as nutrition gardens and planting drought-resistant crops, to improve the nutritional status and food security of children at risk and their families.
- *Economic strengthening interventions*: Activities that strengthen family and community financial safety nets.
- *Capacity building interventions*: Actions that strengthen the organizational and programmatic capacity of sub-grantees to deliver effective services and to advocate on behalf of those they serve.

Operations research is at the core of the STRIVE pilot project. In order to identify models and organizational or programmatic lessons that can be applied and/or scaled up in the future, the STRIVE project tracks indicators, collects data and undertakes case studies and research that will help it answer the following four operations research questions:

- What is the impact of each intervention?
- How cost-effective is each intervention?
- How replicable is each pilot intervention and what elements are unique to each pilot site?
- What is the quality of care being provided by the various interventions?

Programming principles

CRS's technical application to USAID highlighted three key operating principles that guide implementation of the STRIVE project:

- *Community mobilization*: Community members must be involved in decision-making and program implementation.
- *Gender*: Equal participation of men and women is essential for addressing the issues of children.
- *Sustainability*: Services should be sustainable and able to continue after CRS's involvement ends.

STRIVE accomplishments to date

Start-up: Following the signing of the cooperative agreement in December 2001, CRS moved quickly to set up structures and begin project implementation. CRS was able to take advantage of its existing presence in Zimbabwe and its well-established relationships with local

organizations to accelerate its first round of grantmaking. In spite of the need for significant investments of time in assisting pre-identified potential sub-grantees in preparing and submitting project proposals between July and September 2002 CRS/STRIVE awarded sub-grants and disbursed funds to eight local community and faith-based organizations. Dubbed the “pilot eight,” or “P8,” these eight sub-grantees are now implementing combinations of psychosocial, educational, economic and nutritional support interventions and carrying out operations research to determine which interventions and sets of interventions have the greatest potential for effectively supporting children at risk on a larger scale.

PILOT EIGHT SUB-GRANTEE ACTIVITIES						
Sub-grantees	Grant USD	Psycho-social Support	Education Assistance	Food/Nutrition	Economic Strength.	Target # of Children at Risk
Batsiranai Buhera South Orphan Program	\$148,575		x	x	x	7,450
Bethany Project	\$169,085	x	x	x		8,200
Archdiocese of Bulawayo	\$182,978	x	x	x		5,000
Diocese of Chinoyi Catholic Development Comm.	\$189,851	x	x	x		6,000
Diocese of Mutare Community Care Program	\$195,120	x	x		x	4,682
Masiye Camp	\$186,475	x				8,000
Rural Unity for Development Organization	\$183,176		x	x	x	3,000
Tsungirirai Center	\$147,208	x	x	x		2,800
TOTAL	\$1,402,468					45,132

Expansion: Under the terms of the cooperative agreement, CRS was required to work with at least eight sub-grantees. Escalating numbers of orphans and vulnerable children in Zimbabwe, however, required USAID to reassess the STRIVE program. In spite of the fact that the pilot activities had not had sufficient time to demonstrate results, USAID and CRS felt that the urgency and magnitude of the orphan issue, exacerbated by the deteriorating operating environment, demanded a significant additional response. CRS therefore entered into agreements with an additional eight sub-grantees in late 2002, including international organizations. These sub-grantees, named the “scale-up eight” or “S8,” are not presently carrying out operations research.

SCALE-UP EIGHT SUB-GRANTEE ACTIVITIES						
Sub-grantees	Grant USD	Psycho-Social Support	Education Assistance	Food/Nutrition	Economic Strength.	Target # of Children at Risk
Intermediate Technology Development Group	\$45,807		x	x	x	6,000
Farm Orphan Support & Trust	\$88,070	x	x			17,000
Child Protection Society	\$83,223	x	x			20,000
Save the Children, UK	\$649,347	x	x			7,000
Scripture Union	\$100,665	x				12,000
Africare	\$140,351	x	x		x	25,275
Bekezela	\$65,462	x	x	x		1,000
Uzumba Orphan Trust	\$71,069	x	x	x		8,910
TOTAL	\$1,243,994					97,185

Baseline survey: In July 2002, CRS completed a baseline survey against which the pilot project's progress could be measured in the geographic locations in which the P8 sub-grantees were operating. Although the survey did not adequately meet the operations research needs of the project, it did help capture communities' view on children at risk, documented services currently being offered in those areas, assessed the psychosocial impact of parental loss on children, identified gender-specific issues, and elicited suggestions for improved services from community members. Both P8 and S8 sub-grantees also conducted their own comprehensive baseline studies in their operational areas and continued to carry out their own regular monitoring and evaluation.

Building staff capacity: Since project inception, building the capacity of CRS/STRIVE to carry out its responsibilities has been a principal focus of the project. While individuals to fill five key staff positions were identified in CRS's proposal, only four assumed their positions. The other key staff member, as well as several additional staff, had to be hired and trained.

Building sub-grantee capacity: Once the first round of sub-grants was awarded, CRS/STRIVE also began focusing on building the capacity of its sub-grantees. Funds were provided to sub-grantees to employ additional staff and CRS/STRIVE held a number of capacity-building/technical workshops to orient sub-grantees (Annex 9 for detail). In addition, CRS/STRIVE's Capacity Building and Gender Unit worked with sub-grantees to identify programmatic and/or organizational areas requiring strengthening and then provided assistance to meet those needs. To enable STRIVE to more efficiently support its sub-grantees, CRS/STRIVE placed Project Officers in CRS field offices in Mutare and Bulawayo, closer to sub-grantees.

Reaching children at risk: The number of children at risk being reached by the STRIVE project through its sub-grantees has continued to climb. STRIVE's January-March 2003 Quarterly Report indicates that a total of 45,132 children had been reached by March 31, 2003.

Learning from experience: In each of its quarterly reports, CRS/STRIVE documents its constraints and challenges as well as trends and lessons learned. This exercise helps staff and sub-grantees recognize and articulate problems and solutions, enables all to learn from others' experiences and contributes to STRIVE's goal of documenting lessons to share with others involved in child-focused programming.

Purpose of this mid-term review

A review of STRIVE activities was included in CRS/STRIVE's current annual workplan as a means of taking stock, learning lessons and making mid-course corrections. Rather than conduct a formal external evaluation, USAID and CRS jointly decided that a participatory and collaborative process would be more innovative and productive. The purpose of the review was to:

- Assess the current status of the STRIVE project, measured against its original objectives, as laid out in the Cooperative Agreement

- Asses the relevance of the STRIVE project in meeting the needs of children affected by HIV/AIDS and, more broadly, all children at risk, in Zimbabwe’s deteriorating environment
- Assess and examine the capacity and ability of the STRIVE Project to adjust to Zimbabwe’s rapidly changing socio-political and economic situation
- Make recommendations to USAID and STRIVE on better planning for future interventions, taking the operating environment and lessons learned from the ongoing project into consideration.

The mid-term review was primarily expected to assist CRS/STRIVE and USAID in developing a clearer framework for meeting the care and support needs of orphans and vulnerable children in Zimbabwe. At the same time, it was anticipated that the results of the review would be widely shared and disseminated so that all key stakeholders could benefit from the process.

Mid-term review process and methodology¹⁰

CRS and USAID participation: After deciding to undertake a participatory review, rather than a formal evaluation, CRS and USAID jointly defined a scope of work for the review (Annex 1) and identified experts to serve on the review team. USAID and CRS also selected individuals from their organizations to participate as part of the review team. Both CRS and USAID were represented on the team at all times during the review.

Self-assessment: As an integral part of the participatory review, CRS/STRIVE undertook a self-assessment exercise, designed to identify its operating and programmatic strengths and weaknesses. This self-assessment will be used by CRS/STRIVE as a baseline against which to assess the implications of the review findings and recommendations.

Reference group: A reference group of representatives from the Government of Zimbabwe, the international donor community, the United Nations, academia, faith-based organizations, international PVOs, and local NGOs was formed to guide and validate the review process and its outcomes. The Reference Group met three times: before the arrival of the review team to understand and comment on the proposed process; during the review for an update and discussion of emerging issues; and at the end of the review to consider the review findings and recommendations.

Government of Zimbabwe involvement: A key recommendation emerging from the first Reference Group meeting was to include representatives from the Government of Zimbabwe on the review team. This recommendation was endorsed by USAID and CRS and three GOZ members joined the team, one from the Ministry of Health and Child Welfare, one from the Department of Social Welfare and one from the National AIDS Committee.

Preparation/tool development: Before the review began, all team members were provided with background reports on the STRIVE project, USAID and CRS strategic plans and information on vulnerable children. In addition, a report on the economic, social, political and

¹⁰ See Annex 12 for a more detailed description of the review process and methodology as well as a summary evaluation of the assessment process.

health context in which CRS/STRIVE operates was prepared and provided to assist team members (Annex 2). The mid-term review team gathered in Harare on May 5, 2003. At an opening workshop, CRS/STRIVE staff briefed the team on their programs and the challenges they were facing; team members presented their ideas for the review; and the team, CRS and USAID forged a common understanding of the expectations for the review. Two days were then spent in intensive discussion on the process to be followed and the development of assessment tools.

Field visits: Members of the team assessing the program and operations research elements of STRIVE then departed Harare to visit each of the P8 sub-grantees.¹¹ The team divided into groups at each site, with some team members interviewing sub-grantee staff, while others conducted focus-group and key informant interviews in the communities receiving services. Each evening the two teams gathered to compare notes and discuss findings and impressions.

Financial and organizational effectiveness reviews: Two sets of team members did not work in conjunction with the others. Two team members reviewed the financial processes of both CRS/STRIVE and its sub-grantees on a separate schedule of field visits. Meanwhile, the team's organizational effectiveness expert worked intensively with CRS in Harare on organizational issues before making a limited number of field visits.

Key informant interviews and discussions: After visiting all P8 sub-grantees, the review team returned to Harare, where it spent the next ten days consulting CRS/STRIVE staff, the directors of the S8 sub-grantees, and other key informants; reviewing relevant literature; and holding an intensive series of internal "mini-workshops" focused on STRIVE's technical interventions and key issues arising from the field visits. The team leader also met with USAID HIV/AIDS officers, the CRS Regional Director for HIV and with the CRS management team.

Peer review: In addition, the team consulted with four "peer reviewers" involved in similar programs in Uganda, Malawi and Zambia,¹² to learn from their ideas and experiences in grappling with the difficulties of working at the community level to support children and young people at risk.

Preparing the report and recommendations: Individual team members then presented their preliminary findings, conclusions and recommendations to CRS counterparts for consideration, comment and validation. Preliminary recommendations were further discussed with both CRS and USAID in informal meetings. On May 28, 2003, the mid-term review team presented an initial overview to the Reference Group and their comments were incorporated, as appropriate, into the draft report. Following distribution of the draft report, there was a two-week period for broad consultation, followed by two weeks during which the team responded to

¹¹ The mid-term review focused on the P8, as the S8 sub-grantees had barely begun to implement their STRIVE-funded program.

¹²Uganda Women's Effort to Save Orphans (UWESO) in Uganda, Community-based Options for Protection and Empowerment/Scaling Up through Expanded Partnerships (COPE/STEPS) Project in Malawi, Strengthening Community Partnerships for the Empowerment of Orphans and other Vulnerable Children (SCOPE) Project in Zambia

the advice received. The final mid-term review report was submitted to CRS and USAID in early July 2003.

Follow-up: Even before the team presented its final report, both CRS and USAID/Zimbabwe responded generously to the recommendations of the review team. Both have already taken initial actions to implement key recommendations. CRS prepared detailed matrices that outlined both the steps necessary to implement key recommendations and the implications of doing or not doing so. In addition, CRS implemented several of the steps outlined in these matrices. USAID/Zimbabwe committed itself to working with CRS/STRIVE and sub-grantees to resolve issues raised, particularly those pertaining to financial management and changes in the country environment.

Review findings and recommendations

The review team was deeply impressed by the STRIVE project, which it believes is an extremely important means of testing the assumptions underlying many child-centered interventions. The project has vitally important contributions to make in supporting the development and demonstration of effective, replicable responses that can scale up an effective, collective national response to children at risk. It is particularly timely, if not overdue, in the context of Zimbabwe's extreme levels of child vulnerability. The team was also struck by the professionalism and openness of the CRS/STRIVE team. The team was humbled by the obvious dedication of the staff and volunteers associated with the sub-grantees and the projects visited. Given the extraordinary challenges facing the project – which certainly could not have been fully foreseen at the time it was designed – the review team found it admirable that the CRS/STRIVE staff and sub-grantees have accomplished as much as they have.

The mid-term review process itself was unusual – perhaps unprecedented – and the team was conscious that only an extraordinarily committed organization would voluntarily submit itself to this kind of scrutiny. The members of the review team were deeply honored to have had the opportunity to learn from all those involved in STRIVE, and hope that the ideas on these pages are able to repay, in some measure, the courage and hard work of this impressive group of individuals.

This report offers a wide range of suggestions on how STRIVE may be further improved. These recommendations are respectful suggestions from peers, not criticisms or instructions. It is the team's sincere belief that STRIVE has the potential to play an extremely influential role in the future of child-related programming. Many donors and international agencies are interested in doing more for vulnerable children, but are held back by a lack of convincing data. Providing such data is the ultimate goal of STRIVE.

With this in mind, the team is genuinely concerned that any attempt to significantly expand services beyond the current sixteen sub-grantees at this critical stage could result in minimizing the impact of STRIVE, with immediate consequences for thousands of children who are already receiving support through STRIVE-related activities, and long-term consequences for hundreds of thousands of children who could benefit from STRIVE's models in Zimbabwe and elsewhere.

The findings and recommendations of this main report are presented in seven sections. **Section One** of the report identifies key factors in the country environment that are affecting the implementation of STRIVE. **Section Two** presents the overarching themes that emerged from the review process and the resulting major recommendations for STRIVE. These recommendations do not relate to any single aspect of the review, but rather draw the team's observations together into a set of overall project recommendations. **Section Three** looks at CRS/STRIVE's management structure. **Section Four** discusses the four core functions of STRIVE: selecting sub-grantees, financial management, building sub-grantees' capacity and operations research. **Section Five** individually addresses each of STRIVE's four technical interventions: psychosocial support, education assistance, food security and economic strengthening. **Section Six** focuses on developing an adequate large-scale response to orphans and vulnerable children. Sections three, four, five and six are executive summaries of the detailed reports contained in Annexes 3-10. The annexes not only provide additional information in support of the recommendations, but also elaborate on the recommendations and provide steps for their implementing. The document concludes with **Section Seven**, which provides recommendations specific to STRIVE for USAID/Zimbabwe as well as recommendations for USAID/Zimbabwe for the longer-term. Ten Annexes, including the SOW, Zimbabwe's economic and social background, and analysis and recommendations for each main sector of CRS/STRIVE activities, follow the main report.

Section 1: Country environment

To prepare the mid-term review team for its assignment, a background paper entitled "Overview of Operating Environment" was prepared (Annex 2). The paper provides information on development indicators in Zimbabwe, discusses the status of orphans and vulnerable children in the country and outlines the national framework in which programs to address children's issues must operate. Based on a USAID scenario planning exercise, the paper then presents three possible scenarios for Zimbabwe's future and the implications of each for STRIVE's ability to reach children at risk.

With this information in mind, the review team sought to identify those key factors in the country operating environment that are having, and will continue to have, a particularly significant impact on STRIVE and its ability to operate successfully. Of particular note were:

- A moving target: The number of orphans continues to increase. Of particular concern, the number of child-headed households appears to be increasing dramatically.
- Food insecurity: Food shortage and nutritional deficiencies are overriding concerns in many areas of Zimbabwe. Addressing this issue is fundamentally important to any short-term efforts to improve the well-being of vulnerable children and their caregivers.
- Communities in crisis: Communities have been severely affected by the concurrent crises in Zimbabwe. Traditional "coping" mechanisms are being severely stretched.
- Staff turn-over: Due to the difficult economic situation in Zimbabwe, increasing numbers of qualified people are emigrating, leaving behind a smaller number of qualified professionals. This results in aggressive recruiting and a highly mobile workforce. The problem is

compounded by increasing numbers of AIDS deaths. The STRIVE project has already been affected by this phenomenon. It can only be expected to become more acute in the future.

- Political influences: The unpredictable political situation requires that STRIVE and sub-grantees take steps to ensure that project benefits reach those most in need. Stay-aways and polarization increasingly affect ability to get things done.
- Hyperinflation: Prices in Zimbabwe continue to rise almost daily, challenging planning and budgeting and contributing to the impoverishment of the communities served by STRIVE.
- Lack of inputs: Zimbabwe's economic crisis has resulted in severe shortages of even the most basic commodities. Fuel shortages are of great concern, as they constrain sub-grantees' ability to implement and monitor field programs.
- Volunteerism: Abject poverty will continue to constrain volunteerism. Resource-poor volunteers must support themselves and their families, affecting their ability and willingness to sacrifice their time and resources.

These constraints were taken into account by the team and helped shape the recommendations to a significant degree, particularly those on scaling up and diversifying partners.

Section 2: Overarching themes and recommendations for STRIVE

The seven recommendations presented below are cross-cutting recommendations, drawn from field visits, interviews, documents and experience. While they may reflect or repeat aspects of technical recommendations made in Sections 3-6 and their corresponding annexes, these recommendations are of broader scope, dealing with the manner in which STRIVE is directed and implemented.

Recommendation 1: Restore and intensify focus on original objectives

STRIVE's principle role is not to meet the needs of Zimbabwe's children at risk, but to determine the best ways that this can be done and to disseminate this information to key stakeholders. During the second half of the pilot project, CRS/STRIVE should intensify its focus on achieving its original goals rather than on expanding the number of sub-grantees. This means:

- Re-establish operations research as the core of the STRIVE project, thus ensuring that the ultimate deliverable of STRIVE is the empirical data that is needed as a foundation for much larger and longer-term interventions for vulnerable children by USAID and CRS in the future.
- Concentrate on ensuring that quality services are delivered to the current sixteen sub-grantees, rather than on increasing the number of sub-grantees supported. CRS/STRIVE should not take on additional sub-grantees for the remaining duration of the pilot project.

Recommendation 2: Strengthen management

Planning at CRS/STRIVE has been made difficult by the lack of a clear strategic vision and weaknesses in the management systems. As a result, daily operations are often "reactive" rather than "pro-active," with more time spent "fighting fires" than working toward organizational

goals. Strategic thinking and project direction need to be revisited and sharpened to provide clear short- and medium-term direction for all those involved in the STRIVE project. It is essential that this review follow standard CRS practice of involving both USAID and sub-grantees, along with key CRS/STRIVE staff.

Management systems at CRS/STRIVE are inefficient, reducing project efficiency and responsiveness. In particular, it is felt that too much decision-making is vested in the host organization, CRS, which inadvertently disempowers STRIVE management and results in delays that have reduced STRIVE's ability to carry out its activities. In addition, too many people appear to have been involved in decision-making and, in some cases, inappropriate staff appear to have had decision-making authority. Furthermore, lines of authority, while clearly laid out, have not been respected or adhered to and appeared to have been repeatedly undermined. To address these issues, it is essential that STRIVE's management be given a maximum level of decision-making and management autonomy.

The present Director at CRS/STRIVE will step down from this position when a qualified replacement is found. CRS urgently needs to replace him with a highly experienced person who can provide strategic thinking and skilled management. The issue of the Director has been discussed with USAID on numerous occasions and needs to be addressed immediately. Many of the specifics of CRS/STRIVE's future cannot be determined until a new Director is in place. As indicated previously, it will be essential to heighten the new Director's decision-making authority to allow him/her the autonomy required to "get the job done." The new Director will also have the urgent, immediate task of re-establishing staff confidence in decision-making and communications processes. CRS, as an agency, has internal models of communication upon which CRS/STRIVE could draw.

Linkages within CRS/STRIVE, and between the organization and its many stakeholders (government, USAID, sub-grantees), are not clearly defined and communication seems to be erratic and unstructured. Important information is not always shared between staff members or between CRS/STRIVE and its sub-grantees. The new Director should address communications issues as one of his/her top priorities.

Recommendation 3: Position CRS/STRIVE as a facilitator of processes rather than a direct provider of services

CRS/STRIVE should continue to move toward sub-contracting more services, rather than seeking to employ the necessary staff to deliver all services directly. This, in turn, would enable CRS/STRIVE to respond more rapidly to the needs of sub-grantees and to focus on operational quality, rather than service delivery. By building the capacity of CRS/STRIVE staff to identify and manage consultants and sub-contractors, the organization will be better placed to expand in future, as it will not be limited by the number of staff it employs, or their range of skills. Sub-contracting may also be more appropriate in the current operating environment, where staff turnover is common. Operations research, nutrition and capacity building for sub-grantees, in particular, offer opportunities for sub-contracting.

The recommendation to engage in increased sub-contracting is premised on strengthened management and improved capacity of STRIVE staff to manage and supervise consultants' work. Without these, ensuring the quality and consistency of sub-contractors' work would be difficult. Furthermore, when using sub-contractors, it will be incumbent on CRS/STRIVE to determine when skills and methodologies used by consultants need to be transferred to CRS/STRIVE and sub-grantee staff and then to ensure that sub-contracts contain provisions for these transfers.

Recommendation 4: Clarify STRIVE's operating principles and approaches

The review team believes that it would be better for CRS/STRIVE to adopt a lower profile for STRIVE as a project. Participating communities should describe their activities as “our work together”, rather than as “the STRIVE project”. Even identifying with the sub-grantee would be an improvement, since those organizations consider themselves to be ongoing, community-based programs.

CRS/STRIVE needs to continue to remove labels such as "children affected by AIDS (CABA)" and orphans and vulnerable children (OVC)" from the children benefiting from the project, particularly at the sub-grantee and community levels. As has been recognized for some time by CRS/STRIVE staff, these terms stigmatize project beneficiaries, negatively affecting those the project is attempting to reach. Rather than OVC or CABA, the project focus should be on children who are identified as the most vulnerable by communities severely affected by HIV/AIDS.

To implement this recommendation, CRS/STRIVE should develop strategies to end the use of the acronyms “CABA” and “OVC” and the concept that the project is targeting children affected by AIDS. First steps should include removing references to CABA and OVC from all CRS/STRIVE reporting documents used by sub-grantees, holding participatory discussions with sub-grantees on the issue and encouraging sub-grantees to facilitate discussions on the stigma associated with these terms in the communities where they work. In addition CRS/STRIVE should look critically at other ways in which children and adults are stigmatized, and work with their sub-grantees and communities to find ways of mitigating the stigma. In addition, STRIVE should take advantage of the June 2003 national consultation meeting and its subsequent mechanisms to raise the issue of labels and stigma and help develop strategies at this broader level for addressing the problem.

CRS/STRIVE should be commended on facilitating the involvement of children in the national consultation on orphans and vulnerable children in June 2003. However, more work is needed at the district and local level, with the outcomes forming part of STRIVE's operations research. To this end, the STRIVE project should explore and develop practical ways in which the voice of children can be heard and respected, all the way from the household to the national level. CRS/STRIVE should ensure that its sub-grantees receive participatory training in the field in ways of effectively involving children and adolescents in decision-making and implementation of interventions. The Child-to-Child Trust (<http://www.child-to-child.org>), the book *Stepping Forward: Children and Young People's Participation in the Development Process*¹³, UNICEF's

¹³ *Stepping Forward: Children and Young People's Participation in the Development Process*, Victoria Johnson, et al. eds., Intermediate Technology Publications, 1988.

The State of the World's Children 2003 and the report "Assessment of the Alliance/IPC OVC Project in Burkina Faso"¹⁴ provide examples of child participation and options that could be explored by STRIVE.

CRS/STRIVE needs to enhance its efforts to help sub-grantees develop and implement approaches that measurably benefit vulnerable children at a low cost per child. The most cost-effective and sustainable programs are usually those that are owned and managed by the communities themselves. However current STRIVE programming appears to concentrate more on programs where communities are participants, rather than owners. CRS/STRIVE should organize a study visit to the COPE and SCOPE-OVC programs (in Malawi and Zambia, respectively) which have extensive experience in this area, and collaborate with these and other programs in the region to develop a community mobilization network for information exchange and training.

The programming regulations and procedures of USAID are inappropriate to the massive, long-term impact of HIV/AIDS on children and families. The STRIVE Operations Research Unit should take the lead in identifying those aspects of the regulations and processes which hinder effective programming for children and identify the means of addressing these constraints. Steps should include convening a series of meetings with partners to identify the most onerous financial rules and regulations retarding implementation; holding a joint meeting with USAID to review processes and policies; and hosting a tripartite meeting to openly discuss identified constraints and jointly develop options for removing or working around these constraints. Before the tripartite meeting, USAID/Zimbabwe financial staff should visit project sites with STRIVE staff to familiarize themselves with the constraints faced by both the P8 and S8 sub-grantees.

Recommendation 5: Integrate technical intervention areas

It is essential to place the child at the center of CRS/STRIVE's activities, so that each receives STRIVE support in an integrated manner. The present structure of CRS/STRIVE allows for a high degree of independence between food security, education, psychosocial and economic support interventions with the result that a child frequently does not benefit from all of these interventions, at a time when the original intent of STRIVE was to test different, integrated baskets of support for children.

STRIVE's structure is designed to help eliminate this risk by positioning "generalist" intermediaries such as Project Managers (at sub-grantee level), Project Officers (within CRS/STRIVE) and the CRS/STRIVE Project Development and Management (PDM) Unit in key coordinating roles. However, this structure does not appear to be working optimally. It is essential that the roles of the PDM Unit be reviewed and reinforced as part of an overall review of STRIVE's management structures (Section 3 of this report and Annex 3). One option might be for STRIVE to consider its PDM Unit and staff more as an "integrator of activities and facilitator to the other Units," with responsibility for continuously monitoring the services

¹⁴ "Assessment of the Alliance/IPC OVC Project in Burkina Faso," John Williamson and Bridgette DeLay, February 2002.

reaching children to ensure that they are, indeed, integrated and holistic. Improved management should enable STRIVE to successfully integrate services.

Recommendation 6: Adapt to the operating environment

Zimbabwe has changed significantly since STRIVE was designed. While STRIVE has taken many steps to adapt to these changes, the review team is concerned that more needs to be done and that aspects of the project need to be reviewed in light of the country environment. For example:

- Are STRIVE-related activities and structures adequately prepared for (and protected against) hyperinflation, fuel shortages and accelerating staff turnover? A number of practical suggestions have been made in the main body of the report, but more consultation – especially with USAID and between the 16 sub-grantees – is needed. STRIVE should request that USAID convene a meeting with CRS and all sub-grantees to develop strategies for dealing with these constraints. STRIVE should also consult further with other USAID-supported organizations to see how they address these issues.
- Can the STRIVE interventions make an impact in the context of shrinking resources such as fuel, electricity and potable water, and public services delivered by the dwindling number of school-teachers, social welfare officers and other public servants? If not, what can be done to restructure the interventions so they can function more effectively? Options for establishing linkages and partnerships with the GOZ, United Nations agencies, international PVOs and other local organizations need to be explored so that available resources can be used in a coordinated, collaborative manner. In addition, increased community ownership of activities (Annex 10) will increase impact and enable STRIVE to stretch resources.
- Can and should STRIVE-related activities and structures be more closely integrated with existing structures such as district and local AIDS and development committees, child welfare forums, and activities like voluntary counseling and testing, home-based care, prevention of mother-to-child transmission etc.? STRIVE should pro-actively reach out to these structures, identifying options and exploring the implications of integration.
- What can be done to motivate unpaid community-level service providers (“volunteers”) who are themselves in need of food and support? Can they be provided with the tools for their work (bicycles, shoes, gloves, uniforms)? Can STRIVE ensure they are first in line for whatever benefits are available within the program (food, training)? Can they be assured of seeing the fruits of their work (data/information collected) being appropriately recognized and thanked? Alternatively, can the “volunteer” approach be revised so that communities decide what and who they are most concerned about, what capacities and resources they bring to bear, and what actions they are prepared to take? (Annex 10, Table 1) STRIVE should convene a meeting with P8 and S8 sub-grantees to discuss these issues and develop a uniform approach. UNICEF, international PVOs, and child-focused programs in other countries should be consulted for their experiences and approaches to dealing with these issues. Programs similar to STRIVE in neighboring countries (COPE/Malawi, SCOPE/Zambia) provide examples of options for volunteers. Such programs should be visited and consulted.

Recommendation 7: Contribute to developing an adequate large-scale, national response

As a major role player in child-focused activities in Zimbabwe, CRS/STRIVE should be prepared to adopt a higher profile in influencing and advising national policy. It should not attempt to assume roles properly carried out by the Government, but it should continue and more actively seek to influence the Government and other key stakeholders to adequately fulfill their essential roles. STRIVE's ongoing involvement in the National Stakeholder's Forum is an excellent beginning. The national consultation on orphans and vulnerable children in June 2003 will provide an ideal opportunity for CRS/STRIVE to develop higher public profile and to advocate the ideals STRIVE promotes.

Many of the recommendations in this report (particularly Section Six), will help to prepare CRS/STRIVE to fulfill this role. In particular, reinforcing the project's vision and capacity to deliver (acting more as a facilitator than as a service provider), ensuring that children have a greater say in decision-making, and improving linkages at all levels will help strengthen STRIVE's position.

In addition, CRS/STRIVE needs to work more closely with UNICEF to develop a strategic alliance for children at risk at the national level. STRIVE should also establish close linkages with USAID/Zimbabwe's Zimbabwe AIDS Policy and Advocacy (ZAPA) Project and work closely with ZAPA on policy-related issues.

Section 3: CRS/ STRIVE's management structure

Although STRIVE has been working to improve its management systems, those currently in place are not conducive to effective management, decentralization or decision-making. As mentioned previously, STRIVE's management structures within CRS are too interdependent and cumbersome with lines of authority, and roles and responsibilities, which, while clearly laid out, are not adhered to or respected. In addition, planning has been very fractured, resulting in "reaction" rather than "pro-action." STRIVE's vision, strategic thinking and project direction seem unclear, particularly in light of changes within the project and the rapidly shifting operating environment. Furthermore, information is apparently not shared effectively nor passed along as necessary, hindering STRIVE's ability to respond to its sub-grantees.

Over-involvement by USAID in STRIVE's day-to-day activities and management was also reported to have hindered STRIVE's ability to manage its own work. USAID countered that that without its continued involvement certain activities would not have been carried out satisfactorily or certain issues might not have been adequately dealt with. Though it appears that USAID and CRS/STRIVE discussed these issues several times, apparently no action was taken by CRS/STRIVE, thus encouraging USAID to feel that continued involvement in the project was necessary.

STRIVE's administrative systems appear sound and the current STRIVE staffing complement is more than adequate to handle present activities, in terms of both numbers and qualifications. Current staff levels would not be sufficient, however, to handle any growth. Staffing challenges identified by the review team include:

- The current Director plans to step down as soon as a qualified replacement is identified
- The roles and responsibilities of the Project Development and Management Unit staff and overall purpose of the Unit appear to be constantly evolving, causing confusion among other STRIVE Units and sub-grantees
- Core staff skills in planning, program management and supervision need reinforcement
- Staff need a solid grounding in HIV/AIDS and children at risk issues
- Sub-contracting seems to be inadequately used, as staff appear to want to take on many service delivery tasks themselves, rather than supervise delivery by others.

Linkages and relationships at all levels of the STRIVE project seem to be tenuous. STRIVE does not appear to have clarified its relationships with USAID, CRS, its sub-grantees, or the communities served by its sub-grantees.

Key recommendations for strengthening STRIVE's management structures were informed, in part, by a discussion with S8 Directors, and summarized in Annex 3 and include:

1. Hiring a seasoned, experienced director immediately. This person must be a skilled manager and strategic thinker.
2. Revisiting and sharpening STRIVE's vision, adjusting the strategic program plan and timeline accordingly.
3. Separating and simplifying STRIVE management structures and procedures within the CRS context.
4. Increasing the decision-making autonomy of STRIVE within the CRS context.
5. Reinforcing adherence to and respect for lines of authority within, and between, CRS and CRS/STRIVE.
6. Conducting a facilitated discussion around the issues raised in the "strengths, weaknesses, opportunities, threats (SWOT)" exercise and in-depth interviews carried as part of the mid-term review.
7. Reengaging the present Director in an appropriate alternative capacity, such as Senior Technical Advisor on Children/Quality Assurance.

Section 4: CRS/STRIVE's Core Functions

CRS/STRIVE's four main project implementation functions can be summarized as:

- Selecting sub-grantees to deliver services to Zimbabwean children at risk
- Providing assistance to sub-grantees to help them carry out their activities better
- Providing assistance to sub-grantees to help them better manage and account for their staff and funds

- Studying what happens and how it happens—and using this information to identify useful lessons, notable or commendable practices, and strategic principles and practical actions that can be applied or replicated elsewhere

Each of these functions is discussed below.

Sub-grantee selection

CRS/STRIVE has implemented a comprehensive, multi-step process that has been used to award two rounds of sub-grants. The process was modified slightly for the second round (S8), based largely on lessons learned in the first round (P8).

The sub-grantee selection process itself appears to be thorough and has resulted in the selection of sub-grantees that match the selection criteria well. To expedite project start up, potential sub-grantees for round one were pre-identified based on previous relationships with CRS. For Round 2, a transparent selection process was followed. Some S8 sub-grantees felt that the application and selection process helped build capacity within organizations applying for sub-grants. At the same time, however, the process was time-consuming, particularly for smaller community organizations. Similarly, participation in Round 2 took many key CRS/STRIVE staff away from their programmatic responsibilities for extended periods of time, affecting project implementation and their ability to respond effectively to the needs of P8 sub-grantees.

The review team has recommended that CRS/STRIVE not expand its services further during the pilot phase of STRIVE. Should CRS/STRIVE continue beyond the pilot phase and decide to expand, the review team recommends that the project review its sub-grantee application and selection procedures to:

1. Determine whether there are options for streamlining the process (including, if appropriate, establishing sub-committees to be involved in selection at different stages of the process, thus freeing up staff at the same time).
2. Consider hiring an external consultant to help with the process.

Building sub-grantee's capacity

Achieving STRIVE's second main project objective, "Improve the **organizational capacity** of at least eight local organizations to deliver high quality care, support, and prevention activities to benefit children affected by HIV/AIDS and their families," is the primary responsibility of the Capacity Building/Gender Unit.¹⁵ Although some activities have been affected by the delay in hiring a Program Manager and Project Officer for the Unit, many key activities have taken place as scheduled. Of particular note, organizational capacity assessment tools were adapted and administered during individual workshops with sub-grantees; a master plan for capacity-building

¹⁵ This section does not address financial capacity building or operations research capacity building as these capacity building activities do not fall under the purview of the CB/G Unit.

activities was designed based on the assessment results; and a management skills capacity-building workshop was held for sub-grantee Directors. Improved capacity will be measured against the baselines established for each P8 sub-grantee (using the organizational assessment tool) once more capacity-building activities have been carried out. The Capacity Building/Gender Unit anticipated conducting the next interim assessment by December 31, 2003. The S8 sub-grantees are presently being assessed using the same tool.

Several P8 sub-grantees indicated that they welcomed capacity-building activities and felt they were valuable. To date, most capacity building has transferred knowledge and understanding to sub-grantees. Skills and the ability to develop or use specific systems have not yet been sufficiently transferred. Because each Unit of CRS/STRIVE independently conducts capacity-building activities, many sub-grantees felt overwhelmed by the number of activities going on at the same time, with staff of least one sub-grantee reporting that they had spent at least one month per quarter in workshops and/or training sessions, some of which were not significantly different from others. There was also a concern expressed that capacity-building activities were often diluted by erratic communication, lack of coordination and less-than-adequate materials.

Sub-grantees also expressed concern that usually only STRIVE-funded staff were involved in capacity-building activities, creating divisions among sub-grantee staff. The adoption of "a project within a project" has created a degree of tension in sub-grantees, with a number of the smaller sub-grantees feeling genuinely threatened by the STRIVE element within their organization and the disparity it is creating. To achieve STRIVE's objective of building the capacity of at least eight local organizations to deliver high-quality care and support for children at risk and their families, STRIVE needs to assess the needs of each organization beyond STRIVE-funded staff (including other staff, management, board members, etc.) and develop individual capacity-building plans for each sub-grantee. What is needed for and by one sub-grantee may not be what is needed by another.

In spite of what has been achieved, many P8 sub-grantees still need significant organizational capacity building. Usually several different types of activities are required to ensure that a staff member or volunteer has learned a skill and can use it. Creating buy-in, treating sub-grantees appropriately and developing relationships will help sub-grantees accept and implement changes within their organizations. Gender has not been adequately addressed in STRIVE's capacity building activities and needs to come out more strongly.

The Capacity-Building and Gender Unit at STRIVE currently has enough staff who are highly qualified and professional. A skills bank is being put in place that will allow the Unit to access expertise for designing, organizing and conducting capacity-building activities on a broader range of topics.

Key recommendations include:

1. Coordinating the capacity building activities of all STRIVE Units to reduce overlaps and burdens on sub-grantees and to organize, oversee, and assure quality.

2. Creating a menu of capacity-building topics from which all sub-grantees can choose. Developing a combination of activity styles, such as formal, informal, and organizational one-on-one alternatives to workshops.
3. Developing more creative capacity transfer programs including not only formal workshops, but also informal inter-program visits, and peer group or self-study opportunities. Relying more purposefully on good quality materials (study guides, procedural manuals, information on HIV and AIDS, children at risk, community mobilization) as alternatives to workshops which take staff and volunteers away from their sites.
4. Developing a complete organizational capacity assessment package to improve the quality of the assessment to be administered, i.e. provide greater variety and more modules that focus on special issues, such as gender.
5. Developing a clear set of specific indicators to assess capacity-building activities and the appropriateness of methodologies used.
6. Adding a gender target to the STRIVE plan and develop appropriate indicators.

Financial management

One of CRS/STRIVE's core functions is to effectively manage the CRS cooperative agreement funds and to ensure that the sub-grants awarded to the implementing partners/sub-grantees are equally well managed.

Based on staff interviews, randomly tested financial documents, written policies and procedures review, and examination of management systems and policies, the mid-term financial review team assessed the financial status of CRS and its sub-grantees to determine whether:

- Acceptable, properly documented financial management systems for controlling, accounting and safeguarding USAID resources were in place both at CRS and grantee level.
- Direction and building of implementing partners financial systems was provided by CRS/STRIVE.
- Capacity building of sub-grantees financial officers was provided by CRS/STRIVE.
- On-going project implementation is cost effective.
- Financial capacity to manage and absorb additional funds for scaling up or out existed within CRS and sub-grantees.

The focus areas for the financial review were financial management systems; computerized accounting systems; auditing; procurement; administration; travel and per diem; and personnel. Systems were further broken down into smaller processes; e.g. the financial management system was broken down into cash payments, payments, bank reconciliation, accounting, reporting and internal controls. Individual, confidential reports for each sub-grantee and CRS were prepared. CRS and USAID received copies of all reports. The sub-grantees received the report on their organization. The section below summarizes general findings, conclusions and recommendations.

Sub-grantees

Funding: In July 2002 the sub-grantees were awarded a total of US\$1.4 million, targeting 45,132 vulnerable children. CRS/STRIVE funding to the sub-grantees equals an average of 70% of total sub-grantee funding. Expenditures amounting to US\$254,000 had been recorded as of April 2003, benefiting 24,545 vulnerable children at an average cost of US\$10 per child.

ORGANIZATION	Total Amount of Sub-grant (US\$000)	First year budget (US\$000)	Funds disbursed (US\$000)	Pipeline (US\$000)	Pipeline as a % of 1 st year budget
		07/02-06/03	07/02-04/03	As of 04/2003	
Batsiranai	149	74	29	45	61
Bethany	169	85	12	73	86
Diocese of Bulawayo	183	91	48	43	47
Diocese of Chinhoyi	190	95	31	64	67
Diocese of Mutare	195	98	25	73	74
Masiye Camp	186	93	55	38	41
RUDO	183	92	32	60	65
Tsungirirai	147	74	22	52	70
TOTAL	1,402	700	254	446	64

Pipeline: It was observed that most sub-grantees had an excess pipeline ranging from 41% to 86%. It was also noted that there is no relation between the number of children reached and the funds expended. In the current Zimbabwean environment it is difficult to understand how, for example, 96% of the targeted children were reached with 39% actual funds spent.

*Expenditure figures are for the period July 2002 to April 2003

Internal Controls: The financial review team tested the adequacy of internal controls and observed that the internal controls of each sub-grantee were generally ranked "inadequate." Although the absence of internal controls is common in small organizations, an effort to establish internal controls to the extent possible is important to discourage the misuse of funds.

Adherence to Policy: CRS/STRIVE's grants management unit worked with sub-grantees during regular visits to ensure that USAID policies were being adhered to within their organizational framework. However, sub-grantees expressed concern that CRS/STRIVE was creating a better remunerated "sub-office" within the sub-grantees (i.e. sub-grantee staff funded by CRS/STRIVE are more highly paid than other employees of the sub-grantee organization), which was unsustainable and causing divisions within the whole organization workforce. There was also a general misunderstanding among sub-grantees of USAID policy and financial guidelines.

Financial Management Capacity: It was observed that the sub-grantees were at different levels in financial management capacity. Each implementing partner was ranked, with overall ranking ranging from 2.6 to 3.8 on a scale of 1 (low, needs improvement) to 5 (high, excellent). There was also evidence of a slow start up process, which had an adverse impact on implementation and expenditures.

Staffing & Personnel: The ratio of CRS/STRIVE employees to the total number of employees in P8 sub-grantees was examined. In three of the eight sub-grantees, CRS/STRIVE employees constituted a majority. This indicated to the reviewer that five of the eight sub-grantees were not overly dependent on CRS/STRIVE funding for existence and might be able to carry on STRIVE-related activities once STRIVE funding ends.

Documentation: It was noted that written policies, rules and regulations and operational guidelines were either unavailable or inadequate for several of the sub-grantees. This finding was not surprising, as the absence of documented procedures is common in small organizations. However, given the increase in funding received through STRIVE, it is recommended that the sub-grantees make a serious effort towards addressing this concern.

Results: Interviews indicated that there was good work to benefit children at risk being implemented by the sub-grantees. The financial review team observed, however, that the sub-grantees were at different levels in both financial management and program implementation. There is evidence of a slow start up process that adversely impacted implementation and expenditures. There is also a need to build capacity of the sub-grantees and develop policies and procedures in personnel, financial management and procurement.

Challenges: The need to improve CRS/STRIVE's response time to payment and budget revisions and the need for a clear exchange rate and inflation policy were concerns raised by most of the sub-grantees interviewed.

Key recommendations for strengthening sub-grantee financial management systems include:

1. Ensuring that policies, rules and regulations and operational guidelines are documented
2. Improving internal controls through segregation of duties
3. Using CRS/STRIVE's capacity-building unit to improve sub-grantees' financial management capability. The review team recommends that financial management capacity be built within the entire sub-grantee organization--not only among those specifically funded by STRIVE.
4. Ensuring that recommendations made to each sub-grantee are addressed.

Catholic Relief Services

The mid-term financial review team assessed the financial status of CRS to determine whether:

- CRS has acceptable, properly documented financial management systems for controlling, accounting and safeguarding USAID resources both at CRS and sub-grantee level,

- CRS provided direction and capacitated P8 financial systems,
- On-going project implementation is cost effective
- CRS/STRIVE has the financial capacity to manage and absorb additional funds by “scaling-up/out interventions”.

Methodology: The review team interviewed CRS staff, randomly tested financial documents and reviewed documented policies and procedures to determine the status of management systems and policies. The focus areas were financial management systems; computerized accounting systems; auditing; procurement; administration; travel and per diem; and personnel. These systems were further broken down into smaller processes. For example, the financial management system was broken down into cash payments, payments, bank reconciliation, accounting, reporting and internal controls.

Conclusions: CRS has good, properly documented financial management systems that ensures proper use of program funds and effectively safeguards them.

Challenges: The major challenge emerging from the review was the transfer of financial management skills to sub-grantees.

Principle recommendations for strengthening CRS's financial management include:

1. CRS should capacitate the financial, personnel, administration and procurement systems of the P8 through skills transfer.
2. The time it takes CRS to respond to P8 requests for payment and budget reviews should be shortened.
3. CRS should work with USAID to formulate a clear exchange rate and inflation adjustment policy.
4. Excess pipeline be addressed immediately.
5. The disparity between the number of children reached and actual expenditures should be investigated.
6. CRS/STRIVE should conduct reviews to ground-truth the figures submitted by sub-grantees such as "number of children reached") to avoid double counting errors.
7. CRS/STRIVE should integrate the STRIVE unit at the sub-grantee level to avoid creating a “separate” entity.

Operations research

The STRIVE project design was centered on a rigorous operations research (OR) agenda that would enable the project to assess the impact, cost effectiveness, replicability and quality of various community-based, child-focused interventions. It was designed specifically to identify which interventions and combination of interventions had potential for application in new geographic areas or to reach larger numbers of children at risk. Operations research was intended to provide lessons and guide future programming not only for USAID, but also for others working on programs aimed at children at risk.

In spite of this intensive focus, most operations research activities did not begin until early 2003, almost one year into project implementation. CRS/STRIVE's original proposal to subcontract the operations research to a local firm did not materialize and STRIVE did not move rapidly to find a replacement or establish in-house expertise for this critical component. A baseline survey was finally completed in July 2002, but was inadequate to meet the research and monitoring requirements of STRIVE. A consultant was hired to reanalyze raw data and reorganize information according to STRIVE indicators. Although the resulting product was an improvement, the baseline survey document continues to be of little practical use for OR purposes.

In early 2003, CRS hired an experienced Operations Research Advisor who has worked hard to strengthen the OR component of the STRIVE. In recent months the Operations Research Unit has undertaken a number of noteworthy activities, including an operations research training workshop, the development of uniform data collection instruments for all sub-grantees, and updates to the original operations research work plan.

The operations research training workshop brought together OR staff from both CRS/STRIVE and the P8 sub-grantees. The workshop was instrumental in clarifying definitions and concepts of operations research and its methodologies and helped reaffirm the operations research objectives of the STRIVE project. The workshop forged, for the first time, a common understanding of the OR agenda, set priorities and outlined future steps.

The standardized research tools developed recently have clearly been useful to the P8 OR staff and have enhanced the ability of STRIVE to collect useful and pertinent data. Given the centrality of the OR agenda for the successful outcome of the STRIVE project, a review of the tools by OR specialists to ensure that they are sufficient to capture and provide the necessary information required, as set out in the original objectives of the project, may be useful. Costing of child-focused interventions is particularly fraught with conceptual, methodological and operational difficulties. Recent attempts by Chris Desmond and Geoff Gow in South Africa have illustrated some of these difficulties and may be of interest and use to STRIVE's Operations Research Unit.

As a result of recent OR Unit activities, all but one of the P8 sub-grantees now has a trained operations research manager on staff. Within all the sub-grantees, however, these OR managers are required to perform non-OR functions, including monitoring and evaluation and basic fieldwork.

Sub-grantees uniformly reported improvement in the quality and timeliness of support and guidance being received from CRS/STRIVE since the arrival of the new operations research advisor, and on the benefits they perceive emanating from the operations research program.

The first overarching theme/recommendation of this report was to re-establish operations research at the core of STRIVE. Key steps for implementing this recommendation and for strengthening STRIVE's operations research program include:

1. Convening an operations research tools review workshop, with external specialist assistance, to rigorously review existing STRIVE OR tools, methodologies and proposed analysis to ensure their adequacy for project objectives. Revise and/or adapt existing tools, as appropriate, or develop new ones, if required. USAID/Zimbabwe and USAID/Washington can provide assistance in identifying appropriate expertise.
2. Following the OR tools review workshop, reassess staffing needs, external technical assistance needs and other requirements. Identify additional funding needs for an expanded operations research agenda and submit a revised budget for OR activities to USAID.
3. Identifying and subcontracting a recognized local or international operations research organization to rapidly expand operations research activities. The Operations Research Advisor should manage the contractor(s) to ensure that what they are doing is consistent with the objectives of STRIVE and USAID.
4. Putting a mechanism in place to collect data and analyze the cost effectiveness and quality of different child support interventions, both individually and with regard to STRIVE's categories of (a) psychosocial support, (b) economic empowerment initiatives, (c) food security and nutrition interventions and (d) education assistance, as outlined in the cooperative agreement. STRIVE should subcontract an organization or engage the assistance of an individual(s) with expertise in cost effectiveness analysis. In addition, the Operations Research Advisor should participate in the forthcoming interagency costing meeting for children at risk programs to be held in July 2003 in South Africa.
5. Undertaking a similar, but scaled down, OR training workshop for senior management of the P8 sub-grantees, OR/M&E staff of the S8 sub-grantees, and non-OR staff of CRS/STRIVE.
6. Encouraging and providing financial support to sub-grantees for hiring additional staff dedicated to operations research.
7. Considering the extension of operations research to the S8 organizations to validate the assumption that larger organizations can scale up rapidly and more efficiently; ensuring that S8 monitoring and measurement tools and methods are consistent with and supportive of the P8 OR objectives.
8. Designing operations research questions to track community capacity building and/or empowerment allowing them to make their own decisions and manage their own programs.
9. Closely examining staffing needs at the central and sub-grantee level to address the operations research issues raised above. Since the various interventions require a variety of skills—some short-term and others long-term—adopt maximum flexibility in structuring human resource needs to make STRIVE a cutting edge program in programming and operations research for children at risk.
10. Requesting that STRIVE become one of the field test sites for the ten proposed indicators developed at a recent consultative meeting in Botswana on children at risk.¹⁶

Section 5: Sub-grantee programming

Intermediate Result 1: Psychosocial support (PSS) interventions piloted

¹⁶"Draft Report on the Technical Consultation on Indicators Development for Children Orphaned and Made Vulnerable by HIV/AIDS," Gaborone, Botswana, 2-4 April 2003.

Children living with HIV/AIDS have specific and special needs. STRIVE funding has enabled sub-grantee organizations to expand existing PSS services and to provide additional PSS interventions to these children and their communities. Home based care volunteers are now providing counseling services to children living in AIDS-affected families; child galas provide children with an opportunity to demonstrate their skills to the community; and *Speak Out Workshops* give children a forum to voice their concerns to community members. Through STRIVE funding, more children have been able to attend community camps and a greater number of teachers and peer counselors have received training in counseling.

Successful implementation of PSS activities, however, faces several challenges. Of primary importance is the lack of a common understanding of the term “psychosocial support” not only at CRS/STRIVE, but also internationally, nationally, within STRIVE sub-grantee organizations and in the communities receiving STRIVE assistance. This has made it difficult to obtain meaningful baseline data, to design appropriate interventions, and to measure the efficacy of these interventions. As a result, the focus has been on the number of children receiving services and the number of PSS interventions, rather than on qualitative changes in the child’s life and behavior.

STRIVE’s definition of PSS as a separate intermediate result has led to sub-grantees’ implementing stand-alone PSS interventions, mainly replications of successful models such as camps, leadership training and counseling, rather than creatively weaving PSS into all aspects of their programs. Because sub-grantees have not developed integrated plans that involve services to the child across key developmental stages of their lives, services tend to be disjointed and are unable to take advantage of synergies to increase their impact. Furthermore, few sub-grantee organizations have involved communities in “dialogues of discovery” to determine what communities did before and do now when children lose parents, how communities might define positive change in their children or why they think children misbehave.

Topics that are not being sufficiently addressed by current STRIVE PSS interventions include sex abuse and preparing a child for the death of a parent. Groups that may not be effectively reached by current interventions include HIV positive children and children living in infected families, children not in community care (street children), guardians and volunteers caring for orphans, vulnerable children and child-headed households.

It is recommended that STRIVE build capacity in the sub-grantees by:

1. Helping communities build children’s resilience in the face of multiple risk factors by strengthening the child’s problem-solving skills, daily living skills, and their ability to utilize external and internal resources.
2. Promoting the psychosocial well being of children, rather than placing emphasis on implementing psychosocial support activities. They should encourage the community to identify the components of children’s well being (their accomplishments), the threats to well-being (the impact of AIDS, social isolation) and what the family and community can do about these.
3. Strengthening the communities’ ability to provide continuity of care, beginning before a child is orphaned and extending well beyond the initial period of bereavement.

4. Working with communities to clarify the meaning of “psychosocial support.” Have communities identify a word or phrase (in the vernacular where possible) that summarizes their understanding of the term and adopt the resulting word/phrase and definition for use within STRIVE.
5. Involving the community in formulating and implementing interventions that address the well being of children.
6. Working with the Mildmay International group currently setting up operations in Zimbabwe and learn from their clinic and community PSS work with children in Uganda, particularly on how to communicate with children.

Intermediate Result 2: Food security interventions piloted

The SADC Food, Agriculture and Natural Resources Vulnerability Assessment Committee’s December 2002 report concluded that the number of Zimbabweans in need of food assistance was nearly 7.2 million people, an additional 480,000 people since the last assessment conducted in August 2002. The Famine Early Warning Systems Network’s February 24 Food Security Emergency report on Zimbabwe stated that food insecurity is expected to worsen, since the 2002/2003 grain harvest could be as much as 20 percent below last year’s poor performance. Zimbabweans in more than two-thirds of the country’s districts are expected to experience either moderate or extreme food insecurity during 2003/2004. The impact on vulnerable children of another poor harvest is likely to be severe.

The impact of the HIV/AIDS epidemic exposes individuals and communities to, and lowers the threshold at which, any additional shocks such as a complex food crisis and an increase in child vulnerability can be absorbed or tolerated. HIV/AIDS directly impacts the social and economic capacities of households and communities and, at the same time, socio-economic changes can directly affect--negatively or positively--the spread of HIV/AIDS. An understanding of the interrelationship between HIV/AIDS and food security in Zimbabwe is crucial for any effective response to the current crises, the longer-term recovery strategy and the national response to the orphan and vulnerable child crisis in the country.

STRIVE has attempted to address food security issues as they relate to children affected by AIDS by supporting sub-grantees promotion of drought tolerant crops and crop diversification, labor saving agricultural techniques, nutritional gardens, chief’s gardens and micro-nutrient-rich vegetables. Interventions, including irrigation drip kits, a seed fair with vouchers, community fields and horticultural gardens, were piloted. In addition, STRIVE increasingly assumed a direct role in providing supplementary feeding in primary schools and early childhood education centers.

A review of STRIVE’s food security interventions indicates that they have met with mixed success. Some community and chief’s gardens are successfully providing food for vulnerable children. Attempts to introduce seed fairs and irrigation drip kit pilots were less successful. Supplementary feeding programs are unsustainable for STRIVE and its sub-grantees as STRIVE does not have a comparative advantage in this area, particularly in view of the number of experienced groups involved in the large humanitarian effort underway in Zimbabwe.

It is recommended that STRIVE:

1. Review food security interventions and refocus on activities that directly benefit the vulnerable child.
2. Reorient its food security activities to focus on more measurable nutritional outcomes for children at risk, including nutrition support to vulnerable children in and out of school, vulnerable pre-school children, and community activities that provide additional food for vulnerable children.
3. Strengthen its food security and nutrition baseline by incorporating information from recent vulnerability assessments, district-level nutritional surveys and other related data.
4. Assist sub-grantees in establishing nutritional monitoring systems for vulnerable children in both school and non-school settings; provide linkages to organizations that can provide food relief, school feeding or other nutritional support. STRIVE should move away from the direct implementation of food relief and food security services.
5. Reduce agriculture-based food security activities.

Intermediate Result 3: Education assistance interventions piloted

It has been documented that education and keeping children in school are key elements in reducing the risk of HIV/AIDS among young people. STRIVE has the potential to catalyze programs that will keep Zimbabwe's children in school, and keep them alive and healthy through its Education Assistance interventions, particularly during the current period of material deprivation and emotional turmoil.

STRIVE's education programs were designed to 'increase access to quality education for children affected by AIDS, with a special focus on girls'.¹⁷ Recently, interventions have targeted all those broadly at risk. Funds are used to improve quality of local education: getting more children, especially girls, into school; providing books, furniture, other consumables and minor repairs to sub-grantee schools; and providing supplementary feeding. The principal direct benefit is to children at risk whose school-related costs are subsidized or completely assumed by STRIVE sub-grantees. Preliminary reports suggest girls' interests are well catered for.

In carrying out its education assistance program, STRIVE faces significant challenges. Within the wider operating environment, drought and hunger inhibit school attendance even when subsidies have been provided and increasing numbers of children at risk are in need of assistance. Inability to pay school fees and levies continues to prevent many vulnerable children from attending school, even though schools have been instructed by the GOZ not to exclude such children. Within the STRIVE project, delays in disbursing funds, variable management capacity at the sub-grantee level and difficult decisions to be made at the community level have hindered progress.

Effectiveness of education assistance interventions has been compromised by lack of linkages with other STRIVE-supported interventions, particularly food security/nutrition and

¹⁷ Education Assistance Implementation Strategy, February 2003

psychosocial support. HIV prevention programs, originally included in STRIVE's design, have not been implemented and constitute a major gap in STRIVE's education assistance package.

Until the Government of Zimbabwe abolishes fees and levies and open schools to all, CRS/STRIVE's education management and planning capacity needs strengthening:

1. Concentrate education assistance on subsidizing enrollment costs, linked to improved nutrition, care and counseling, and HIV/AIDS prevention programs.
2. Streamline selection of candidates for subsidies, transfer of resources between levels of the organization, and management of systems and processes at all levels.
3. Increase education staff at sub-grantee level and improve the skills of all education personnel with regard to HIV/AIDS and education, orphaning and children at risk, and community-based programming.
4. Assist sub-grantees in developing systems for continual monitoring of attendance to identify children dropping out of school either because of sickness at the household level or as a direct result of hunger/poverty.
5. Improve linkages within CRS/STRIVE, among its levels, and with other organizations. Better analysis of operations research feedback will improve both management and planning capacity.
6. Link the scholarship program with:
 - a revitalized HIV/AIDS prevention program delivered by selected teachers and paraprofessional peer health educator teams in sub-grantee schools;
 - programs that promote the psychosocial well being of children to reach children and young people in and out of school;
 - school nutrition programs – supervised or sub-contracted to specialists in humanitarian relief by STRIVE P8 and S8 sub-grantees – for all children in sub-grantee primary schools, or at least those in the hardest hit 'hotspots' within STRIVE's areas of operation.
7. Form strategic partnerships with groups such as Save the Children and USAID's ZAPA Project to advocate for education policy reforms.

Intermediate Result 4: Economic strengthening interventions piloted

CRS/STRIVE's economic strengthening intervention seeks to enhance household and community economic resources through community-based approaches. The assumption is that if household economic activities are strengthened, both households and communities will be better positioned to care for their children at risk. Economic strengthening activities under STRIVE are not funded by USAID (CRS is using its own funds) as technical provisions on the use of "child survival" funds exclude such activities.

Economic strengthening activities were launched much later than other STRIVE-assisted interventions. To date, the internal savings and lending (IS&L) scheme is the only household economic strengthening activity that has been initiated by STRIVE, and that was begun only two months prior to the mid-term review. No community safety net initiatives have been launched by STRIVE, although several are being undertaken by sub-grantees and communities without CRS/STRIVE support.

Two sub-grantees are currently implementing IS&L programs, with a third poised to begin soon. To provide technical services on the IS&L model to the STRIVE sub-grantees, CRS contracted with CARE International in Zimbabwe. CARE is the institution that developed the IS&L model and has extensive experience in using it in Zimbabwe.

Although the IS&L groups have only recently been launched, those participating in the schemes are both enthusiastic and clear about the potential benefits of participation. Because IS&Ls are a variation of traditional “merry-go-round” lending schemes, they have been readily accepted by communities and immediately become community owned and managed. The simplicity of the model means that groups often form spontaneously once the scheme is initiated.

Challenges facing the nascent IS&L program include: spontaneous replication may not include the same level of training and monitoring offered by STRIVE sub-grantees; the program could become dependent on the sub-grantee field officer; and STRIVE needs to ensure that CARE technical assistance successfully transfers skills to sub-grantee counterparts.

Key recommendations include:

1. STRIVE should wait (for at least six months) for results from the first three IS&L programs before replicating the model. Criteria for assessing results should include (a) an increase in economic resources (assets) at the household level and (b) evidence that any increase is benefiting vulnerable children and improving their welfare.
2. If the six-month results prove positive, CRS/STRIVE should present USAID with a well-documented and justified request for direct USAID funding for economic strengthening activities.
3. The operations research unit at STRIVE should use baseline information available to develop tools to track the impact of IS&L activities on vulnerable children.
4. Operations research should be designed around the IS&L initiative. Possibilities include:
 - Comparing results in an IS&L community versus a non-IS&L community
 - Tracking cash inflows versus seasonal, agriculture-related income fluctuations to identify the real incremental differences accruing from IS&L participation
 - Using teacher observation and records to track benefits to vulnerable children
 - Checking on the improved health care/nutritional status of children under five and relating this to whether the children are under the care of an IS&L member
 - Determining whether the gender of IS&L members related to the benefits received by vulnerable children in the household
5. STRIVE should ensure that sub-grantees develop trainers from within their IS&L schemes who can serve as trainers for new IS&L groups.

Section 6: Developing an adequate large-scale, national response to children at risk

STRIVE, along with many other partners in Zimbabwe, is doing much to address the needs of children at risk. However, an enormous gap clearly remains in meeting children’s material wants and their rights as human beings. Neither the size of the gap, the deficiencies in the collective

national response, nor the costs of implementing a truly adequate national response have been measured. Orphaning and vulnerability due to AIDS and its partners—poverty, trauma, hunger and disease—are massive long-term problems for communities, the nation and the world as a whole.

The operations research component of STRIVE is intended to provide information needed in order for USAID and its partners in government, non-government organizations and the international community to plan large-scale responses appropriate to the size of this challenge, and to broadly understand how to deliver integrated support services to vast numbers of disenfranchised children in Zimbabwe and elsewhere.

Closing the material and human rights gap for children affected by AIDS in Zimbabwe will require a variety of approaches, which include:

- Carrying out a collaborative national situation analysis
- Developing and implementing a collaborative national plan of action
- Forging strategic alliances with the GOZ, UNICEF and other organizations actively promoting children's well being
- Reviewing and revising national policies relevant to children's safety, well being, and development and revisiting Zimbabwe's commitments to international conventions
- Developing mechanisms, from national to community level, through which partners can exchange information and find ways to work together
- Scaling up individual programs to benefit more children
- Scaling out effective programmatic approaches by enabling more organizations to replicate them
- Monitoring and evaluating actions

STRIVE is a significant participant, but it cannot and should not be expected to close the gap for children at risk in Zimbabwe. Rather, STRIVE's role is to demonstrate, on a limited scale, how, through adequate collective and collaborative effort, the gap can be closed. To this end, Zimbabwe needs STRIVE to develop into an established program whose priorities include:

- Ensuring that resources are mobilized to meet children's basic physical needs
- Enabling children to attend school so that they are both educated and socialized, and can gain skills to better support themselves and others
- Strengthening the economic and other capacities of vulnerable households to protect and care for their children
- Mobilizing and strengthening community action to protect and promote the well-being of the most vulnerable children, including their psychosocial well-being
- Helping children and adolescents to avoid HIV infection.

Because resources will never be enough and the gap is so large, the principle of low-cost community-based action is undoubtedly the best strategy during the current phase of the epidemic in Zimbabwe. Although experience so far suggests that families and communities must be the first line of response to HIV/AIDS, little is being done within the STRIVE program of action to strengthen communities' own capacities to respond to HIV/AIDS and poverty.

STRIVE clearly needs to empower sub-grantees to mobilize, support, and extend community-owned, led and managed activities. This will require a strong shift in the support paradigm of current staff, but is both necessary and possible.

Recommendations for developing a sustainable, large-scale response to the needs of children at risk and their communities include:

1. Play an active leadership role in the national consultation on orphans and vulnerable children in June 2003 and, on an ongoing basis, help to mobilize an adequate collaborative national response to the country's most vulnerable children, using the operations research lessons of STRIVE.
2. Forge strategic alliances with both the GOZ and other agencies, such as UNICEF, to foster a coherent national and scaled up response to children
3. Adjust STRIVE's capacity-building programs to enable sub-grantees to design and implement community-appropriate approaches that measurably benefit vulnerable children at a low cost per child.
4. Organize a study visit to COPE and SCOPE-OVC programs in Malawi and Zambia, and collaborate with these and other organizations or programs in the region to develop a community mobilization network for information exchange and training.
5. Calculate, through the STRIVE Operations Research Unit, the cost per child beneficiary of selected interventions and gather quantitative and qualitative information on the respective results for children of these interventions.
6. Ensure that sub-grantees receive training in methods of involving children and adolescents effectively in decision-making and interventions.
7. Identify, through the STRIVE Operations Research Unit, with cooperation from USAID/Zimbabwe, aspects of USAID programming regulations and processes that hinder effective child-focussed programming at the community level, by community-based organizations and parents.
8. Diversify and expand the CRS funding base for STRIVE.

Section 7: Recommendations for USAID

Regarding STRIVE

The review team welcomes and fully endorses USAID's commitment to support a long-term scaled up program for children at risk in Zimbabwe. Given the deteriorating socio-economic, political and health situation and the increasing impact of HIV/AIDS on children, this decision is timely and necessary. To increase the range and effectiveness of its support to children at risk in Zimbabwe, the review team recommends that USAID continue its current support to STRIVE, extending the current pilot project through May 2005 to ensure the completion of the S8 scaling up and operational research activities. USAID should also consider providing additional funds to STRIVE, should they be required, to ensure that the operational research agenda findings are of the highest standard possible and that they are widely disseminated for comments and analysis. Specific proposals on how this could be done are included in Annex 4.

Team discussions with CRS/STRIVE staff and sub-grantees highlighted several concerns pertaining to USAID's role in supporting the STRIVE project, including:

- *Financial rules and regulations and their application:* Several sub-grantees felt that USAID's financial reporting requirements were creating tensions within their organization. One respected STRIVE sub-grantee had to set up a completely separate financial system for accounting for USAID funds. Other sub-grantees felt that the application of financial rules and regulations, along with reporting requirements, were applied in too rigorous a manner for community-based programs. The need for "finance with a human face" was highlighted. Sub-grantees observed that STRIVE staff were under enormous pressure to apply USAID rules rigorously without the flexibility appropriate to the deteriorating country environment.

Recommendation: The mid-term review team welcome's USAID's commitment to addressing these issues and is encouraged by the agreement of the USAID controller and CRS's financial and program staff to convene a meeting with representatives of both the P8 and S8 sub-grantees to discuss the issues raised by the partners, to agree on specific actions to apply the USAID rules and regulations in a more flexible and friendly manner appropriate to conditions (when possible) and to hold a training session with CRS/STRIVE staff on USAID financial regulations.

- *Staffing:* CRS/STRIVE staff reported that USAID/Zimbabwe staff were over-involved in day-to-day project management. The inevitable result of such involvement was a feeling of disempowerment among CRS/STRIVE staff. USAID responded that any "over involvement" resulted from concerns over staffing, management and financial delays. It might also be explained in part by the relative inexperience of both CRS/STRIVE and USAID staff, in particular with regard to applying and interpreting financial and management regulations. A compounding factor was the rapidly deteriorating country environment. It is to the credit of both STRIVE and USAID staff that this issue did not flare into the open.

Recommendation: USAID/Zimbabwe needs to address the perception of over-involvement. The hiring of a new STRIVE director presents a unique opportunity for initiating a "fresh" relationship. Increased decision-making authority for the CRS/STRIVE director will also enable him/her to be more responsive to USAID.

- *Achievements and outputs:* Both CRS/STRIVE staff and sub-grantees were concerned about the intense focus of USAID on coverage and results. CRS/STRIVE staff felt that the nature of the relationship changed once USAID/Zimbabwe began to emphasize, approximately one year into project implementation, the need to scale up interventions and show measurable "results." CRS/STRIVE staff felt this changed the "rules of the game" mid way through the project and required a major reorientation of the STRIVE pilot project--that the need to scale up took precedence over the initial objectives of the P8 and the core operations research agenda. The focus on showing and reporting on results/coverage added additional pressure. It is USAID's opinion that CRS/STRIVE was fully consulted in the decision to scale up and that CRS/STRIVE indicated that they were in favor of and ready to play a larger role in programming to meet the needs of children at risk.

Recommendation: The team has recommended that no further scale up occur during the pilot project. USAID/Zimbabwe should support STRIVE in consolidating its current program and ensuring that the operations research agenda produces the results required to move beyond a pilot effort.

- *Changing context:* USAID/Zimbabwe has, in CRS/STRIVE staff's opinion, been sensitive in its support for the project within the changing country environment, in particular regarding issues of hyperinflation, fuel shortages and staffing. It is clear, however, that as the situation in the country deteriorates further, even greater support will be required from USAID/Zimbabwe.

Recommendation: USAID/Zimbabwe will, to a large extent, address this issue through the tripartite meeting(s) on financial procedures mentioned above. In addition, USAID/Zimbabwe should convene a meeting of CRS/STRIVE and sub-grantee representatives to identify constraints due to the country context and develop strategies for addressing the constraints. USAID/Zimbabwe should furthermore encourage and facilitate meetings between CRS/STRIVE and other USAID partners to discuss coping strategies and develop joint responses to contextual issues.

For the longer-term

The review team believes that the procedural, programmatic and financial regulations of USAID as an organization are inappropriate if a large-scale response to the massive, long-term impacts of HIV/AIDS on children and families is to be mounted at the national, district and community levels. In a situation requiring innovation and creativity, USAID's complex regulations are telegraphed through STRIVE to its partners, slowing, limiting, and frustrating programmatic action.

To overcome these barriers, USAID/Zimbabwe should:

1. Make a substantial, long-term commitment to help develop an adequate, collective large-scale response to the impacts of HIV/AIDS on children and families.
2. Use the five-point strategic framework and the 12 programming principles in *Children on the Brink 2002* as foundational guidance and gear its program toward achievement of the UNGASS goals for orphans and vulnerable children.
3. Provide substantial support for programming by multiple lead organizations.
4. Work actively and play an advocacy role with UNICEF and the Government of Zimbabwe.
5. Participate in and support development of effective national to community level networks for stakeholder collaboration.
6. Support policy analysis and development.

Given the magnitude and severity of the situation of children at risk in Zimbabwe, compounded by the current food crisis, USAID/Zimbabwe should:

1. Consider expanding its partner base to scale up responses to children at risk beyond STRIVE through a variety of possible mechanisms.
2. Consider funding CARE to scale up its village saving and lending approach, which it developed and has the unique capacity to implement.
3. Ensure the CARE project has a strong operations research component concerning benefits to orphans and vulnerable children, which USAID/Washington could help to design.
4. Consider funding other organizations already working in Zimbabwe which have a distinct comparative advantage in providing assistance to vulnerable children.
5. Give serious consideration to widening its partner base through a buy-in to an existing global HIV/AIDS mechanism. The partner should be one that has extensive experience in programming for orphans and vulnerable children, including experience in the sub-region. By diversifying its partner base, USAID would be able to rapidly expand its activities and improve the quality of services provided to orphans and vulnerable children in Zimbabwe.
6. Because one implication of the above recommendation would be an increased management burden on USAID/Zimbabwe, the review team also recommends that USAID consider the implications of expanding its partner base for its management structure and address the staffing implications accordingly.

CONCLUSION

The STRIVE mid-term review team was deeply impressed by the STRIVE project—by its goals and objectives, by its accomplishments and by the people and communities involved in the project. With its unique operations research focus, the team believes that STRIVE has the potential to play a critical role in informing child-centered programs not only in Zimbabwe, but also globally. The recommendations contained in the body of this report, supplemented and further defined in the report annexes, are meant to help STRIVE to better fulfill that potential. The review team is encouraged and impressed by the rapidity with which CRS/STRIVE has moved to develop action steps for implementing key recommendations.

The team would like to conclude this report by reinforcing the message that STRIVE, while clearly a key player in reaching Zimbabwe's children, is not expected to "do it all." Forging strategic alliances with the Government of Zimbabwe, UNICEF, ZAPA, international PVOs and NGOs, and local NGOs and organizations involved in child-focused programming is essential for any large-scale response. Through such partnerships and collaborative efforts, STRIVE will be better able to ensure that the well being of Zimbabwe's children improves.

ANNEXES

Annex 1

Scope of Work: STRIVE Mid-Term Review, May 2003

Background

Zimbabwe, which is at the epicenter of the HIV/AIDS pandemic, has experienced a drastic decline in socio-economic indicators over the past 10 years. This decline is the result of a combination of political, environmental, and economic factors; current inflation is over 208%, 80% of the population live below poverty, 80% unemployment, over 6 million people (half of the population) face starvation, and a highly polarized national community. However, the most salient factor is the rising prevalence and incidence of HIV/AIDS. The following statistics depict the gravity of the situation:

- 34% of sexually active adults (15-49 years) are HIV-infected (UNAIDS, 2001);
- 2.3 million Zimbabweans are infected (UNAIDS, 2001);
- Life expectancy has fallen from 61 years to 39 (US Bureau of Census);
- There are an estimated 780,000 orphans in Zimbabwe; a number expected to increase to 1.1 million by 2005 (UNAIDS, 2001);
- There are an estimated 3,846 deaths due to AIDS each week in Zimbabwe (UNAIDS, 2001).

Children orphaned by HIV/AIDS and children affected by AIDS (CABA) are among the most vulnerable of Zimbabwean society. CABA face burdens of caring for an ailing parent and younger siblings, the loss of family income as parents become ill or die, and withdrawal from school to care and provide for other siblings. Children also experience psychological distress when caring for ailing parents and grieving for them when they die. Yet, children's psychosocial needs received little attention until recently.

Many extended families and communities are under unprecedented strain because of HIV/AIDS. However, there are hundreds of small, humble, yet powerful local initiatives where ordinary people are doing extraordinary things to care for and support children.

Increasingly, NGOs and donors are recognizing that these community initiatives —when taken collectively— produce the most significant and extensive response to CABA. With very little public funds invested in CABA, it is all the more urgent for local organizations and communities to enhance their capacity to respond to the impact of HIV/AIDS on children in an effective and sustainable manner. There is need for local organizations to scale-up their activities to match escalating numbers of CABA.

UNICEF/USAID recently hosted a Southern African regional conference in Namibia highlighting OVC/CABA issues. A delegation from Zimbabwe representing GOZ, USAID, UNICEF and civil society attended this event and presented the current situation of OVC/CABA in the country. As a result of that conference, the delegation committed to embarking on a national consensus building effort designed to catalyze action among all levels of Zimbabwean society to improve the care and support of OVC/CABA in Zimbabwe. CRS/STRIVE is a

member of the interim OVC steering committee that is charged with initiating the consultative process. The CRS/STRIVE mid term review will be linked to this effort in a number of ways:

- CRS/STRIVE will engage a consultant to conduct a brief update of Zimbabwe's situational analysis for OVC/CABA. The OVC steering committee will use the same information at the first National Stakeholders' workshop scheduled for mid June 2003.
- This same consultant will assist the OVC steering committee in the design and logistic arrangements for the National Stakeholders' workshop.
- CRS/STRIVE will be a key informant in the desk review that will proceed the National Stakeholders' workshop.
- CRS/STRIVE will invite key members of the steering committee to sit on an advisory committee that provide input to the mid term review (PAC)
- The National Stakeholders' workshop will be a key forum through which to disseminate information resulting from STRIVE activities in general and the mid term review specifically

For more information, the review team can refer to the two situational analyses on OVC/CABA conducted by USAID and UNICEF respectively; as well as USAID's OVC RFA document.

US Government Support for HIV/AIDS Programs in Zimbabwe

The USAID/Zimbabwe "HIV/AIDS Prevention and Mitigation" Strategic Objective is focused on the following components:

- Changing behavior and attitudes of individuals and communities through increased access to quality health services, including condoms and contraceptives, voluntary HIV counseling and testing (VCT), community-based HIV/AIDS education and VCT referral,
- Decreasing stigma and strengthening leadership through improved advocacy and policy,
- Enhancing the capacity of communities to assist orphans and other children affected by HIV/AIDS,
- Sustaining the condom and contraceptive supply in the public sector, as well as the social marketing sector,
- Supporting "post-test services" to provide VCT clients with long-term psychosocial support, counseling and referral to other support services,
- Expanded access to economic opportunities for HIV infected and affected households, and
- Supporting peer educators and increasing access to condoms at border sites for truckers and commercial sex workers under the Regional Corridors of Hope program.

The USAID/ Zimbabwe programs have focused on assisting Zimbabweans to mitigate the HIV/AIDS crisis since 1994. Given the high transmission and prevalence rates, efforts by Zimbabweans, donors and other partners have helped to ameliorate some of the effects of the HIV AIDS pandemic, but not succeeded in decreasing the transmission, hence the increase numbers in mortality. In 2000 USAID/ Zimbabwe updated its Health Strategic Plan and with increased funding, made a strategic decision to initiate additional programs which would further

assist Zimbabweans to mitigate the HIV/AIDS crisis, to include care and support to orphans and children made vulnerable by the AIDS pandemic.

In January and February 2000 USAID/Zimbabwe commissioned a team of experts to assess the impact of HIV/ AIDS and its effects on children affected by HIV/AIDS. The purpose of the assessment, was primarily to provide a foundation for USAID actions to enhance capacity at the regional and local levels, leading to possible interventions by USAID, such as increased support for community responses to children and families affected by the epidemic. Secondly the assessment also served to highlight unanswered questions about the impact of HIV/AIDS on Zimbabwean children. Examples included questions such as how the government of Zimbabwe (GOZ), donors, and others can coordinate and communicate about their efforts to mitigate the impact in children.

The key findings;

- The HIV/AIDS epidemic is leaving increasing numbers of vulnerable children in need of special care and protection.
- Children are affected by AIDS in many ways, from the burdens of caring for sick parents and younger siblings, to the absence of a mother who is caring for a family member in another household, to the loss of income and work as adults become ill or die, to the loss of capital expended on medications and funerals.
- In severely affected communities, HIV/AIDS has an impact on children, families and communities that is incremental.
- Continuous deaths among young adults lead to social and economic consequences that increase with the severity and duration of the epidemic.
- The effect of HIV/AIDS on children and families is compounded by the fact that many families live in communities that are already disadvantaged by poverty, poor infrastructure, and limited access to basic services.
- It is imperative for any initiative to link the provision of care and support activities to HIV prevention seen more clearly than with children affected by AIDS.
- Care programs are an ideal entry point for prevention programs and have the potential to be effective in preventing the future transmission of HIV.
- Strengthening the efforts of communities responding to children affected by AIDS is not only an investment in development—it is also an investment in the prevention of future HIV infection and an investment in the shrinking HIV epidemic.
- If USAID decided to do initiative on orphans, children affected by AIDS and other vulnerable children, its support should not undermine or kill community efforts but enhance them.

Given the assessment findings and the growing number of children USAID sent out an RFA soliciting for applications from organizations to implement sustained and replicable community programs to assist children affected by AIDS under Intermediate Result 3 “Enhanced Capacity At the Regional and Local Levels In Zimbabwe to Support Community Responses To Children Affected by HIV/ AIDS.”

The Centers For Disease Control and Prevention (CDC) works directly with its counterpart The Ministry of Health and Child Welfare (MOH) as well as The National AIDS Council (NAC) and other public and parastatal sector organizations to transfer applicable skills, strategies and assistance critical to a strengthened national response to the HIV/AIDS epidemic. However, given the political and economic conditions affecting the national health system, this facet of CDC's work has become increasingly complex. As CDC continues to work closely with this sector, its program of assistance also includes support to and collaborations with strategic partners. In addition, CDC's program of technical and financial assistance has been constructed to ensure complimentary with the assistance provided by USAID.

The CDC Zimbabwean program of assistance is focused on the following components:

- Supporting the implementation and expansion of the national Prevention of Mother to Child Transmission (PMTCT) of HIV infection program,
- Supporting the implementation of a behavior change program (Modeling and Reinforcement to Combat HIV/AIDS or MARCH) to prevent HIV infection among youth and **young** adults,
- Improving the quality of HIV/AIDS care with a special focus on biomedical interventions such as treatment of Opportunistic Infections (OIs) and preparation for the introduction of Anti-retroviral (ARV) treatment program,
- Supporting the implementation and institutionalization of strategic HIV/AIDS surveillance programs, and
- Strengthening monitoring and evaluation capacities.

The STRIVE Project

The 2000 USAID/Zimbabwe funded Situational Analysis study on the impact of HIV/AIDS on children resulted in the Mission's inclusion of support to programming around community responses to children affected by HIV/AIDS. In December 2001, USAID awarded a US\$2.5 million award to Catholic Relief Services/ Support to Replicable Innovative Village/ Community Level Efforts (CRS/ STRIVE) to implement a US\$3.5 million 2½ year pilot project to support children affected by HIV/AIDS. The pilot project is supporting innovative interventions, which allow resources to reach CABA quickly and efficiently. Ultimately, STRIVE intends that these pilots will scale up and out, to reach significant numbers of CABA. In order to do so, attention to techniques that result in cost effective processes will be extremely important.

CRS/STRIVE is working through local and international NGOs. STRIVE addresses sub-grantees' capacity to deliver quality services to CABA through a capacity building strategy. Similarly, STRIVE provides the financial resources that sub-grantees lack and which hamper their ability to scale-out and up activities to reach more CABA.

Currently the piloted interventions revolve around four results oriented "packages", which comprise STRIVE's intermediate result areas: 1) Psychosocial Support 2) Food Security 3) Educational Assistance with an emphasis on improving girls' access to education and 4) Economic Strengthening of household and community safety nets to support CABA. The following table provides an illustrative list of the activity packages:

Intermediate results	Examples of activity packages
Psychosocial Support	<ul style="list-style-type: none"> • Raising awareness within communities to support programming to meet emotional, physical, spiritual, mental and social needs of CABA, • Capacity building of network organizations and community volunteers in the coordination of PSS for CABA, • Establishment of community based counselling services, for CABA • Establishing support systems and widening social networks of trusted people to which CABA can turn for safety and counselling services, • Organising and supporting PSS camps and annual galas for peer socialisation, development of self-esteem, confidence building and life skills for CABA.
Food Security	<ul style="list-style-type: none"> • Enhance the capacity of communities to grow drought tolerant crops for food production, • Promote the use of community fields and gardens to enhance food security of especially vulnerable households (overlap with ES) • Encourage allocation of fields to CABA for nutritional crop production and promotion of permaculture, • Increasing access to inputs and market information for CABA guardians and to older CABA for production of cash crops
Educational Assistance	<ul style="list-style-type: none"> • Support and increase access to basic education for CABA through block grants and direct assistance with school fees and uniforms, • Resource mobilization activities • Community schools
Economic Strengthening	<ul style="list-style-type: none"> • Promotion of self-managed, internal savings and lending groups, • Facilitation of market linkages between producers and markets (overlap with food security) • Promotion of innovative community resource mobilization such as: fundraising, community gardens, identifying community assets, creating an inventory of skills and talents within communities.
Capacity Building	<ul style="list-style-type: none"> • Promotion of participatory self assessments of organizational capacity of sub-grantees, • Supporting gender audits of sub-grantees, • Supporting the development of sub-grantee capacity building action plans, • Coordinating master plan for technical assistance and other I.R. workshops for sub-grantees, and Coordinating the OVC-NGOs skills bank.

The focus of the STRIVE project's Operations Research agenda centers on the initial eight sub grantees' (the P8) interventions. This agenda began with a baseline situational analysis. A thorough M&E system built from STRIVE's Performance Management Plan (PMP) and regular monitoring visits by the OR unit staff facilitates the process of generating ongoing data showing progress on project indicators and operations research variables. The OR research variables are: 1) replicability; 2) cost effectiveness; 3) quality of care; and 4) impact.

The OR Unit carefully analyses and observes trends that emerge from the M&E and field monitoring visit process to detect practices that appear to contribute towards fulfilling project indicators. STRIVE sub-grantees are also piloting different combinations of interventions. In addition, they will carry out these combinations in different settlements; urban and rural sites of high-density suburbs, peri-urban informal, mining, communal, small-scale commercial and resettlement sites. Each of these combinations is a potential “model” representing the sum of “best practices” for that combination.

The OR Unit will document these emerging “best practices” as well as the combinations of intervention areas, which appear to achieve significant positive impact on the well-being of children and on community responses. The “best” practices and intervention combinations will form the core of follow on support promoting future projects. The major thrust of this future support will be to scale up programming in support of community initiatives so that community members and caregivers are better able to support and care for children.

In addition to the M&E system, stand-alone studies (e.g. case studies or focus group discussions using qualitative and participatory research methods) will fill information gaps and explore cross cutting issues of perceptions and behavior of community members, children, caregivers, etc. as they engage in activities to care and support CABA. Other potential areas for studies revolve around issues related to the effectiveness and/or sustainability of sub grantees’ activities. Finally, STRIVE may conduct studies to better understand the implications of Zimbabwe’s changing environment and its affect on CABA, caregivers and communities. Cross cutting issues currently identified by STRIVE during discussion with its sub grantees include:

- Identification of psychosocial support tools and activities (to measure psychosocial well being),
- Perceptions of volunteers and volunteerism and their role towards eliciting community participation, and their impact on cost effectiveness, scaling up and sustainability,
- Community and children’s perception and definition of vulnerability of children.

Purpose of the Mid-Term Review

Rather than conduct a formal external evaluation, this review is intended to be an evaluative process based on self-assessment, participatory and collaborative processes, including peer reviews by OVC experts within Zimbabwe and from neighboring countries.

- A mid term review of STRIVE activities was written into the original project design as a means of taking stock, learning lessons and for providing a means of mid-course correction. More specifically, the purpose of the participatory and collaborative mid-term review is to guide the STRIVE Project, CRS/ZW and USAID to:
- Assess the current status of the STRIVE Project, measured against its original objectives as laid out in the RFA/Project design document,
- Asses the relevance of the STRIVE project in meeting the needs of children affected by HIV/AIDS in the deteriorating environment,

- Assess and examine the capacity and ability of the STRIVE Project to adjust to Zimbabwe's rapidly changing socio-political and economic situation,
- Make recommendations to USAID and STRIVE on how to Better plan for future interventions taking into consideration the operating environment and lessons learned from the on going project.

The mid-term review will assist the STRIVE Project and key stakeholders to develop a clearer framework for meeting the care and support needs of OVC/CABA in Zimbabwe. This scope of work proposes a participatory and collaborative peer review.

The review process will involve the key stakeholders in the STRIVE project; USAID, CRS, key government ministries (MOESC, DSW, MOHCW), other donors, Unicef, STRIVE sub-grantees, and peer reviewers drawn from similar OVC/CABA programs in Africa and key other key informants. The review will examine the three distinct but inter-related components:

- A. Zimbabwe's operating environment (food insecurity, socio-economic and political situation, HIV/AIDS epidemic), including the OVC/CABA context within Zimbabwe.
- B. CRS/STRIVE, and
- C. Sub-grantees.

Work to be Accomplished

The following (5) five priority objectives will guide the steering committee and the peer review team to come up with concrete recommendations for STRIVE, CRS/ZW and USAID on future support and implementation of OVC/CABA programming in Zimbabwe.

Objectives

Objective 1: The Operating Environment in Zimbabwe

The STRIVE team together with a consultant will look at their operating environment and produce a document which puts the STRIVE operating environment into context¹⁸. This document will be compiled based on information obtained through

- a literature review of key OVC documents on Zimbabwe
- previous comments from CRS which outline their perception of the operating environment
- facts on OVC from USAID

This document will suggest how the situation in Zimbabwe might evolve in the next 6 and 12 months, and for these scenarios provide:

- concrete suggestions on how STRIVE will respond to the key issues or indicators
- what the possible mitigatory strategies will be, and
- describe the implications for STRIVE, CRS, USAID and other key stakeholders.

¹⁸ The OVC steering committee will use the same general information at the first National Stakeholders' workshop scheduled for mid June 2003

The review team will go through this document and be guided by it when they examine the following questions:

- What implication does the operating context have for (or how will it affect) STRIVE, CRS/ZW, and USAID's OVC strategy? What are the general implications for OVC programming in Zimbabwe?
- What might STRIVE, CRS/ZW and USAID have to do differently given Zimbabwe's changing environment? Could STRIVE, CRS/ZW and USAID play new/additional roles in OVC programming.

Objective 2: The STRIVE Project

The review team will:

- Assess adequacy of processes developed for:
 - ✓ Grant making—How adequate and efficient and effective is the grant making process?
 - ✓ Grants management—How adequate and sound/efficient are the financial systems?
 - ✓ Building capacity—Are the needs of the sub-grantees being met (TA, OD, data monitoring support, etc?)
 - ✓ Operations Research—Are OR objectives/questions still relevant? How can data be accurately collected? Is the information gathered so far being used to adjust as the project goes along? Will OR processes provide us at the end of pilot the results we want (tangible options for the future)?
 - ✓ Future Direction (Scaling up). How should the STRIVE project adjust to respond to the changing environment and other factors in Zimbabwe?

Objective 3: STRIVE Management Structure

The review team will:

- Assess the adequacy of the management and staffing structures and systems of CRS/STRIVE to meet the technical and financial support needs of sub-grantees currently and make recommendations for improvements.

Objective 4: Sub-grantee Programming

The review team will:

- Determine whether the interventions of the Pilot 8 (P8) STRIVE sub-grantees are moving towards what they intend to achieve as spelt out in the RFA and contract.
- Determine also whether the interventions of the Scale-Up 8 (S8+) STRIVE sub-grantees are moving towards what they intend to achieve?
- What is their implication for the Phase II scale-up?

Stakeholders and Review Team Composition and Roles

A. Stakeholders – “Review Think Tank”

A steering committee of Stakeholders called the “Review Think Tank” will provide advice on what the mid-term review should focus on and how it should be conducted. The Review Think Tank will be drawn from key stakeholders and will provide a mechanism to lend authority and validation to the mid-term review process and to the outcome of this process.

1. They should discuss scope of work, including the criterion used to assess the various objectives.
2. They should validate the 6 and 12-month scenarios developed in light of the changing operating environment.
3. They should provide a means of gaining information on the big picture regarding OVC/CABA in Zimbabwe.

Composition:

This will have a membership of around 10 professionals drawn from key stakeholder organisations and experts on OVC/CABA programming. This committee will be comprised of professionals drawn from CRS (Backson Muchini & Kyle Jemison), USAID (Victoria James & Patrick Osewe), UNICEF (Betty Mukiba, Myke Huijbregts), DSW (Mrs. Dhlembeu,), MOESC (Mrs. Chirewa, Mr. Clement Jumbe), MOHCW (Mrs. Dete), and leaders in children’s issues like Linda Dube, Greg Powell, Geoff Foster, Jonathan Brakash and Stefan Germann.

Roles:

- Meet at the beginning of the process for one day (Week of April 28) to gain comprehensive understanding of the Mid-Term Review process, and review the whole process of the review.
- Meet the review team at the beginning of the review May 5th.
- Attend presentation of preliminary findings May 22 to offer insight and reactions to findings and suggest what other information might be needed within the time remaining for the assessment.
- Convene to review the final draft on May 28th and recommend to STRIVE ways to disseminate information about project activities/findings

B. Assessment Review Team

In order to achieve the four (4) objectives of this Mid-Term Review, an Assessment Team will be assembled from key stakeholders, experts on OVC programming (including peer reviewers), an organizational development expert, a financial auditor, a technical writer, and a logistician.

Composition

The team will include the following people:

- **Peter McDermott** - Team leader (USAID/Washington); will provide leadership, coordinate and facilitate the team, focus on OR component, ensure that all key objectives for the review are answered and that the final report meets the requirements of SOW. He will be assisted by USAID staff as required. Victoria James will assist with interviews, meetings, background information, data collection etc.
- **Lynne Cogswell** - Organizational Development Consultant; will focus and lead the team on assessing CRS/STRIVE organizational and management systems and structures (human resources) as they relate to sub-grantees. Lynne will also provide an OD document to be included in final the Midterm Review document.
- **John Williamson** - Will look at issues of scaling up to meet the scope of the AIDS impact on OVC/CABA. Provide global perspective on OVC/CABA issues.
- **Mark Loudon** – Logistician;

As follows:

Before the review: Will provide logistical support before and during the review

- Develop a document which puts the STRIVE operating environment into context: This document will be compiled based on information obtained through a literature review of key OVC documents on Zimbabwe, previous comments from CRS which outline their perception of the operating environment, and facts on OVC from USAID.
- Assist Lynne Cogswell in developing a separate OD piece.
- Walk the STRIVE team through the OD piece and operating environment context piece.
- Develop an action plan for the review, produce a timetable of who needs to go where, and work with someone in USAID or CRS (who can negotiate the issues of payment and travel authorisation) to make the necessary arrangements. This includes setting up interviews, field visits, and all other review related appointments.

During the Review:

- Facilitating discussions among Review Team members to agree on procedures, content etc - both before and after their arrival;
- Assist with desk reviews, preparation of abstracts, preparation of questionnaires;
- Maintain a schedule of activities/appointments for FGD's, interviews, field trips etc (this should be done with the assistance of programme staff at USAID and CRS for contacts, introductions, payments etc);
- Work closely with regional peer reviewers (Stan, Pelucy, Brenda) to facilitate and document their findings;
- Support Tanya where necessary (for example reporting on interviews/FGD's/field visits, taking photographs, compiling data);
- Preparing and /or helping Peter or Tanya to prepare presentations to update the Steering Committee on progress.

Stefan Germann, Geoff Foster;

- In addition to their role as members of the think tank will provide consultancy services to the team and team leader on key issues of scaling-up.

Brenda Yamba, Stanley Phiri, Pelucy Ntambirweki and Perry- Regional Peer reviewers;

- will focus on general programming and management quality issues bringing their experiences from similar OVC/CABA programmes in Africa.

Tanya Himelfarb - Technical Writer;

- will write-up the mid-term review draft and final report with input from all the review teammembers and deputize the Team Leader.

Rita Sykes and Molly Saurombe (USAID/ZW) and Arthur Jani (CRS-STRIVE) - Financial Reviewers;

- will focus on financial systems of CRS/ZW/ STRIVE and at sub-grantee levels to determine compliance with 22 CFR 226, OMB Circulars and Standard Provisions, and general financial management issues.

Responsibilities and Tasks

The review team will:

- Review the operating environment for the STRIVE Project.
- Review the Scope of Work and an action plan to implement it¹⁹.
- Review reference documents and other relevant documentation.
- Conduct interviews and focus group discussions with CRS/ STRIVE sub-grantees, selected members of sub-grantee communities, other donors, USAID key partners and key stakeholders (to include Department of Social Welfare, MOHCW, MOESC).
- Conduct field visits to CRS/ STRIVE sub-grantees.
- Review management structure of CRS/ STRIVE and financial systems of CRS and STRIVE sub-grantees.
- Prepare middle and end of assessment debrief to USAID, the CRS/ STRIVE teams, other donors and key stakeholders on their findings and recommendations. USAID, CRS/ STRIVE and key stakeholders will provide comments at the presentations, which the assessment team will incorporate in the draft report.
- The technical writer will be responsible for preparing the final report²⁰.

Methodology

The review team will use participatory methods, have interviews with key informants, and do some desk reviews in assessing some documentation in order to collect information for the mid-term review for STRIVE. In order for this mid-term review to be a learning experience for all key stakeholders, the review team will periodically debrief key staff from CRS/ZW, USAID and

¹⁹ The team will review the Scope of Work and action plan with the USAID and CRS/ZW STRIVE before conducting the assessment.

²⁰ The technical writer will work under the direction of the Team Leader,

other key stakeholders from government and donor/NGO community. Key methods will be as follows:

- Participatory methodologies using Focus Group Discussions²¹ (FGDs)
- Individual interviews with key informants and
- Review of key secondary information
- Work closely with peer review steering committee
- Hold discussions with the donor community
- Involve children as much as feasible

Review Target Groups

The following key project stakeholders will be targeted as sources of information:

- Key government ministries and departments e.g. National AIDS Council, the Ministry of Education, Sports and Culture, the Ministry of Health and Child Welfare and the Department of Social Welfare.
- Other donors, like SIDA, DFID, OXFAM, UNAIDS, CDC, UNICEF,
- STRIVE staff,
- USAID staff,
- STRIVE sub-grantees,
- Children, and families affected by HIV/AIDS
- OVC/CABA
- Community leaders and
- USAID key partners – Futures Group, Advance Africa, PSI, PACT, DAI/LEAD, & ZNFPC.
- Private Sector - Anglo-American Corporation, TA Holdings

Period of Performance

The dates for the mid-term review are April 28²² – 28, 2003. Illustrative timing of major events by week follows below. The day-to-day schedule for the period of performance to follow.

Prior to Review

Review statement of work, develop action plan, set up appointments, interviews and meetings.

Review operating environment of STRIVE document.

STRIVE team self-assessment

²¹ Review team will be responsible for final development of tools used for FGDs in collaboration with CRS/ZW STRIVE staff.

²² Core review team will begin May 5

Week 1

STRIVE team presented and walked through self-assessment document.

Review additional documents, conduct interviews and field visits, and debrief CRS and USAID.

Meeting of PAC to gain comprehensive understanding of the Mid-Term Review process

Meeting of Review team

Begin interviews and field visits

Week 2 Continue with interviews and field visits (where necessary), and debrief CRS/STRIVE and USAID.

Week 3 Meeting of stakeholders on preliminary findings

Prepare draft report and present to stakeholders.

Week 4 Incorporate comments from stakeholders into final report

Complete final report

Convene to review final report

A more comprehensive schedule for the STRIVE Midterm Review will be forwarded to all participants and stakeholders once more specific arrangements have been determined.

Output - Deliverables

a) Before Review by CRS/ STRIVE

- Document describing the Operating Environment of the STRIVE Project. This document should:
 - ✓ Summarise the current situation in Zimbabwe in terms of the principal political, socio-economic and key child development indicators that define the operating environment.
 - ✓ Identify and elaborate on strategic programming, which allows CRS and USAID to bring value-added support to OVC/CABA programming in Zimbabwe.
- Document containing the outcome of the STRIVE staff self-assessment (following the objectives for this review).

b) After Review

- Report on the Mid-Term Review of the STRIVE Project. This report will cover the key objectives of this assessment, having a section on each objective and providing concrete

recommendations for addressing key issues within the program. The sections will also include;

- ✓ management quality assessment (management structure) will focus on:
 - o key human resource and administrative systems that have contributed to quality of the STRIVE Project in setting trends towards meeting its strategic objectives and intermediate results.
 - o identifying trends and describing what to build on and lessons learnt.
 - o providing for a plan for addressing weaknesses in human resource performance systems and in management and administrative systems in a follow-on phase.
- ✓ program quality assessment (programming processes) will focus on:
 - o key programming processes that have influenced the quality of the STRIVE Project in setting trends towards meeting strategic objectives and intermediate results of STRIVE.
 - o providing for a plan for addressing weaknesses in programming strategies, interventions and processes in a scale-up phase.

- ✓ Each section will provide concrete recommendations on how the project should proceed in the next six and twelve months.

Reference Documents To Reviewed Before Arrival (Information on CD)

- Situational Analysis Document (USAID 1999 and UNICEF)
- Baseline Survey (CRS/STRIVE 2002)
- Collection of P8 & S8 technical proposals
- Technical Proposal (CRS/ STRIVE)
- PMP (CRS/ STRIVE 2002 and USAID 2002)
- Annual Work Plan (CRS/ STRIVE)
- USAID HIV/AIDS Crisis Mitigated Design Document
- CRS/ STRIVE Sub-grantees Technical Proposals and Budgets
- Zimbabwe Orphans Policy (DSW)
- Operating Environment of the STRIVE Project

Logistics

- CRS/STRIVE will handle all contractual arrangements with consultants and peer reviewers coming from the region. USAID will arrange travel logistics from the U.S. to Harare for USAID/ WASH. USAID will also pay for any in-country air travel.
- Scheduling of meetings: A consultant logistician will handle appointments of the review team with sub-grantees, government ministries, other donors and key informants based in and out of Harare.
- A consultant logistician will also arrange for air transportation for field visits by the review team.
- Meeting room/place: CRS/ZW conference room and hotel meeting facilities.

- Transport: CRS/ZW will provide vehicle transportation for field visits; team can use taxis for appointments in Harare.

Illustrative questions per assessment objectives²³

Objectives	Illustrative questions
Assess the Operating Environment for STRIVE (before review).	<ul style="list-style-type: none"> • What is the current situation for OVC/CABA in Zimbabwe? • What are the key indicators for this situation? • How is the current situation affecting the work of STRIVE? • What are the possible mitigatory strategies of dealing with the challenges faced in this environment? • What are the implications of these strategies for STRIVE, CRS, USAID and key stakeholders in OVC programming in Zimbabwe? • What are three possible scenarios in which this current situation can evolve to? And in each scenario: what are the key indicators, what are the possible mitigatory strategies, and what are the implications for STRIVE, CRS, USAID and other key stakeholders?
Assess the adequacy of the current management systems and structure of CRS/STRIVE to meet the technical and financial support needs of sub-grantees and other core players.	<ul style="list-style-type: none"> • Is the current management structure at CRS adequate in meeting the programming needs for sub-grantees and OVC/CABA in Zimbabwe? • What is required for the current STRIVE management structure to adequately support sub grantees. • How prepared is it in managing a scale-up phase? • What is required of CRS, USAID and other key stakeholders involved in programming around OVC/CABA for maximum impact?
Assess adequacy of processes followed in: <ul style="list-style-type: none"> ✓ Awarding grants, ✓ Building capacity, ✓ Operation Research, ✓ Scaling up (CRS / sub-grantee levels) 	<ul style="list-style-type: none"> • Is the current grant making process adequate for meeting the needs of sub-grantees, OVC and communities? • Is the current capacity building strategy adequate in addressing the capacity of sub-grantees? • How can STRIVE, CRS and USAID continue to learn from OVC programming in a scale-up phase? • Is the current programming strategy of working through partners adequate in meeting the needs of CABA/OVC in Zimbabwe?

²³ Assessment team will review this list with USAID and CRS in order to refine, add or subtract questions.

Objectives	Illustrative questions
<p>Determine whether the strategies used by STRIVE effectively address the needs of CABA.</p>	<ul style="list-style-type: none"> • Are the current interventions in the CRS/ STRIVE project addressing the needs of children affected by HIV/AIDS? • What are the strengths and weaknesses of the strategies used in grant making, scaling-up, building capacity of sub-grantees, etc.? • Does funding meet the guidelines of the Child Survival and Health Program Fund? • Is the STRIVE management structure adequate to respond to the needs of implementing partners to date? • Did resources (technical, human and financial) reach the intended beneficiaries in an efficient manner that did not undermine community ownership? • What were the roles of community members, CABA and their families in determining project activities and in carrying them out? • What was the process used to engage community level actors? How inclusive was it? • Did the process lead (or is it likely to lead) to broad community involvement? • How did CRS/STRIVE sub grantees define CABA and vulnerability in implementing interventions addressing the needs of beneficiaries? Were there any differences? • How relevant are the original objectives for STRIVE given the changing environment? • Are there interventions left out the current agreement that should be included in the scale up phase? • What is required for CRS/STRIVE and current sub grantees to cost effectively scale up identified best practices on a nationwide scale? • Can sub-grantees and communities scale up their current interventions? Why or why not? • Should CRS/ STRIVE consider teaming up with other partners in phase 2 scale up? • How can CRS/ STRIVE involve diverse faith based organizations in the scale up phase? • What is required of CRS, USAID and other key stakeholders involved in programming around children for reaching out to the greatest numbers of OVC/CABA in Zimbabwe?

Annex 2 CRS/STRIVE Mid-term Review, April-May 2003 Overview of Operating Environment (#2)

By Mark Loudon

INTRODUCTION

This report is designed to assist CRS/STRIVE staff and members of the mid-term Review Team to make decisions on future policies and actions for STRIVE, its beneficiaries and donor.

This report is divided in three parts:

- Sections 1-6 which summarise current data on development issues such as HIV/AIDS and orphaning from a range of sources (quoted in the footnotes and bibliography), and
- Section 7 which discusses possible scenarios for the future, and the implications of each scenario for STRIVE and its partners. Note that this section is simply intended to stimulate discussion, not to persuade anyone to a particular point of view.
- Sections 8 and 9 which offer some concluding remarks and list the key documents referred to.

1. DEVELOPMENT INDICATORS

These are standard indicators used to assess the development status of a country, extracted from the UNAIDS Epidemiological Fact Sheet on HIV/AIDS and STIs, 2002 Update:

Indicator	Year	Estimate
Total population	2001	12,852,000
Population aged 15-49	2001	5,972,000
Urban Population	2000	35%
GNI per capita	1999	US\$530
GNI per capita growth rate	1999	-2.6%
Per capita expenditure on health	1997	US\$49
Govt budget spent on health	1998	17.0%
Total adult literacy rate	1997	86%
Male primary school enrolment ratio	1996	114.8
Female primary school enrolment ratio	1996	111.3
Male secondary school enrolment ratio	1996	52.4
Female secondary school enrolment ratio	1996	44.6
Crude birth rate (per 1,000 pop)	1995-2000	37
Crude death rate (per 1,000 pop)	1995-2000	18
Maternal mortality rate (per 100,000 live	1995	610

Indicator	Year	Estimate
births)		
Life expectancy at birth	1995-2000	43 years
Total fertility rate	1995-2000	5.0
Infant mortality rate (per 1,000 live births)	1995-2000	65
Under 5 mortality rate	1995-2000	108

2. HIV/AIDS

UNAIDS, working closely with Government and research institutions, estimates as follows²⁴:

- Number of adults and children living with HIV/AIDS by end 2001 = 2,300,000²⁵ made up as follows:
 - adults (15-49) 2,000,000 Adult rate 33.7%
 - women (15-49) 1,200,000
 - children (0-15) 240,000
- Estimated number of deaths due to AIDS during 2001 = 200,000²⁶ ie: 3,850 per week

3. ORPHANS AND VULNERABLE CHILDREN (OVC)

Zimbabwe shares with Zambia, Malawi, Lesotho and Rwanda the dubious honour of having the world's highest proportion of orphaned children (from all causes). The best available estimates²⁷ suggest that in these four countries between 17-18% of all children under the age of 15 had lost one or both parents by 2001.

In Zimbabwe this amounts to just over a million orphans, out of a total child population of around 5.8 million. However Zimbabwe is unique in that 77% or 780,000 of her orphans have lost one or both parents to AIDS. The next highest proportion of AIDS orphans is in Zambia, at 65.4%.

Orphan trends

Illustration 1 (overleaf) reflects data for Zimbabwe from Children on the Brink 2002. It has been projected²⁸ that by 2005, Zimbabwe will be one of only four countries in the world where more than one out of every five children will be orphaned (by all causes). The others are Botswana, Lesotho and Swaziland. Unfortunately, Zimbabwe is expected to maintain its lead in terms of AIDS orphans, with 85.7% of orphans having lost one or both parents to AIDS, followed by Botswana at 84.0% and Swaziland at 75.9%.

It is important to note that these data were collected in 2000. Since then poverty has increased sharply. As discussed later in this report, the accelerated decline during 2002 must have

²⁴ UNAIDS Epidemiological Fact Sheet on HIV/AIDS and Sexually Transmitted Infections, 2002 Update

²⁵ Range of uncertainty 1,800,000 – 2,700,000

²⁶ Range of uncertainty 155,000 – 242,000

²⁷ By UNAIDS, UNICEF and USAID in Children on the Brink 2002, published July 2002. Similar figures were used by a Zimbabwean delegation to the Regional Workshop on OVC in November 2002.

²⁸ Ibid.

implications for the rate of orphaning – which means the orphan data, frightening though they are, are almost certainly optimistic.

Vulnerable children

In addition to orphans Zimbabwe is believed to have 240,000 children living with HIV/AIDS; 600,000 internally displaced children; 150,000 children living with disabilities; 12,000 children living on and off the streets; 5,000 children in institutions; and 26% of children aged 10-14 engaged in child labour²⁹.

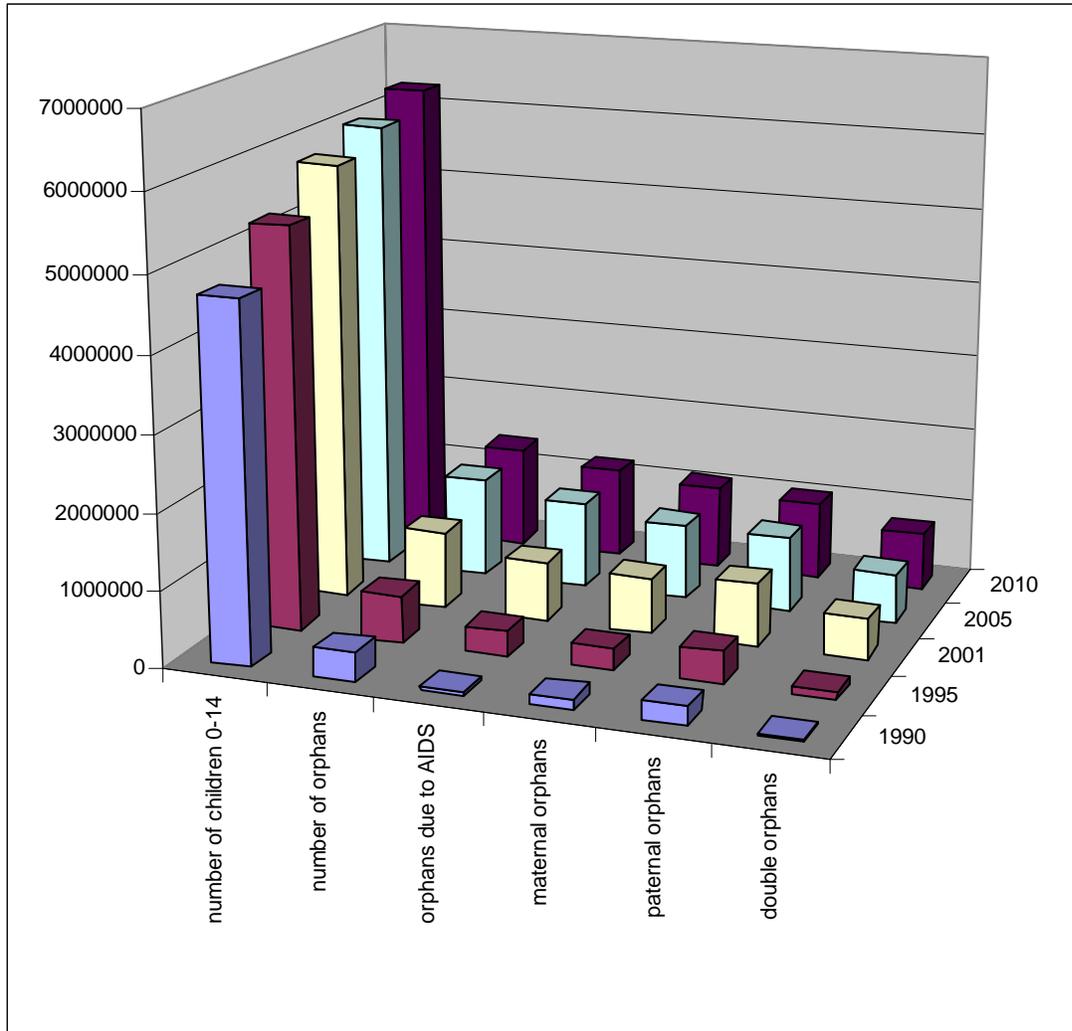


Illustration 1: orphan data for Zimbabwe from Children on the Brink 2002.

²⁹ Presentation by Zimbabwean delegation at the Regional Workshop on OVC in Windhoek in November 2002, except children living with HIV/AIDS which is from UNAIDS figures quoted earlier.

4. POLICY

The Government of Zimbabwe has developed two relevant policies³⁰:

The National Orphan Care Policy (adopted by Cabinet in May 1999) represents a commitment to national and community support to OVC, including allocation of resources to enhance access to education and health services. Implementation is led and coordinated by the Child Welfare Forum in partnership with local authorities and NGOs. Whilst the policy is being implemented, it lacks concrete indicators and a timeframe. [copy?]

The National HIV/AIDS Policy was developed in 1999 and guides present and future responses to the epidemic in Zimbabwe by all stakeholders. The Policy encourages a multi-sectoral approach and contains guiding principles and strategies for many aspects of the fight against HIV/AIDS.

It also includes a component on care and support programmes for OVC in relation to issues such as child abuse, stigma and counselling.

UNGASS goals

Zimbabwe sent a delegation to the Eastern and Southern Africa Regional Workshop on OVC in Windhoek in November 2002. This workshop was designed to help 20 countries in the region prepare action plans to fulfil their commitment to the goals of the UN General Assembly Special Session (UNGASS) on HIV/AIDS in June 2001, as they relate to OVC. Clauses 65-67 of the Declaration of Commitment provide that by 2003 member countries will develop, and by 2005 they will (fully) implement a range of national policies and strategies to support and protect OVC.

At the conclusion of the workshop the Zimbabwean delegation, which included government, NGO and donor representation, presented an action plan covering the following activities:

- Review the National Orphan Care policy based on a participatory situation analysis (of OVC) leading to a concrete National Action Plan, to be finalised by 2003 and implemented by 2005;
- Establish coordination mechanisms and partnerships for OVC interventions;
- Build consensus and commitment among all OVC stakeholders through advocacy;
- Exchange experience, positive practice and lessons learned through regional linkages;
- Scale up response at all levels for OVC;
- Review the legal framework with regard to child-friendly services and protection;
- Build consensus on OVC programme indicators.

³⁰ The Situation of Orphans and other Vulnerable Children in Zimbabwe – A Country Report for the Eastern and Southern Africa Regional Workshop on Orphans and other Vulnerable Children, GoZ, UNICEF and others, November 2002.

An ad-hoc committee is working under the leadership of the Ministry of Public Services, Labour and Social Services to convene a national meeting of OVC stakeholders in June, which should produce the basic outline of a National Action Plan.

As part of this process, the Futures Group has agreed (within the USAID-funded Zimbabwe AIDS Policy and Advocacy Project) to develop a national inventory of OVC-related organisations and services.

5. LEGISLATION³¹

Zimbabwe has a well-developed legal framework for the protection of children's rights – including vulnerable children. The Government is a signatory to the CRC and to the African Charter on the Rights and Welfare of the Child. Relevant statutes include the Children's Protection and Adoption Act, the Children's Protection and Adoption Amendment Act, the Education Act, the Guardianship of Minors Act, and the Sexual Offences Act.

While these instruments apply to all children, they are not specific to OVC. In addition, more effort is needed to interpret and implement these laws, and children need to be empowered to claim their own rights, particularly on issues relevant to orphanhood such as inheritance.

6. CHILD CARE AND PROTECTION PROGRAMMES³²

Government has adopted a decentralised approach to care and support for vulnerable children through Community Capacity Development programmes. Orphan care programmes are coordinated through Child Welfare Forums at district and at central level. Programmes targeting the most vulnerable children include:

- The Basic Education Assistance Module (BEAM) is a form of social protection that Government provides to 690,000 vulnerable children through a tuition fee, levy and examination-fee assistance module.
- In addition to BEAM, Government provides social assistance of Z\$1,500 per month for 935,000 vulnerable families to assist with basic living costs.
- An AIDS Levy on employees of 3% was introduced to support the National HIV/AIDS Policy. The National AIDS Council administers the National AIDS Trust Fund which supports programmes for persons affected by HIV/AIDS, especially OVC.
- Other OVC programmes are implemented in partnership with CBOs and NGOs. There are well over 100 local and international NGO's working specifically for OVC in Zimbabwe. More than half of these NGOs work specifically in the context of HIV/AIDS. Programming within these organisations includes child rights and advocacy; child abuse; OVC (eg: home-based care, skills training, VCT, material and psycho-social support, will writing projects); ECCD; children with disabilities; and children living on and off the streets:

³¹ Extracted from The Situation of Orphans and other Vulnerable Children in Zimbabwe – A Country Report for the Eastern and Southern Africa Regional Workshop on Orphans and other Vulnerable Children, GoZ, UNICEF and others, November 2002.

³² Ibid.

7. SCENARIOS

The value of scenario planning

Scenarios are essentially a set of educated guesses about the future. The accuracy of the scenarios depends both on the quality of data used in formulating these guesses and the (un)predictability of the situation. Traditionally scenarios are divided into optimistic, pessimistic and neutral viewpoints. Management decides which is the most likely, and plans accordingly. However there are two facts which suggest a modification to this approach. Firstly, the situation in Zimbabwe is so volatile and politically charged that a detailed discussion of what might happen would be, at best, wild conjecture. Secondly STRIVE is working for large numbers of children whose lives are being shaped by the situation in which they find themselves and who, in their turn, will play a significant role in shaping the future of this country.

It is therefore not necessary or useful, for this exercise at least, to predict which scenario is most likely. It is only required that we agree each scenario is, at least theoretically, “possible”, and that there is no other “possible” scenario which should be included. **Once there is agreement that these scenarios are broadly representative of what is possible, it makes sense to plan for the most pessimistic scenario, using the argument that one should “hope for the best, but plan for the worst”.**

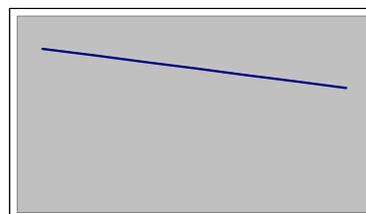
It is important not to see this approach as any kind of moral judgement on the future of Zimbabwe – the same approach would be indicated wherever one sets out to protect the rights and values of the next generation. The stakes are simply too high to gamble the future of our children on our hopes, no matter how optimistic we may be. Note that the following scenarios avoid statistics which could lead to a sterile debate on detail, when this is essentially a “big-picture” exercise.

Defining the scenarios

STRIVE exists to support and evaluate community-level projects which, in turn, aim to protect the rights of orphans and other vulnerable children. The vulnerability of children, and the ability of communities to protect those children, is directly related to the socio-economic situation and to the state of the HIV/AIDS epidemic.

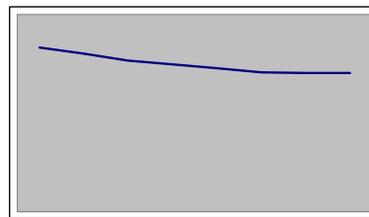
All sources agree there is a “basket of factors” influencing the socio-economic situation, starting with the weather and the HIV/AIDS epidemic, extending through political and policy developments, and culminating with external factors – such as the behaviour of neighbouring states toward Zimbabwe and the commitment of donors.

There seems to be consensus that, at present, these factors are making Zimbabwe weaker. All that is required for the country to slip further into crisis is that nothing changes. Thus, the “neutral view” is not that living conditions will remain the

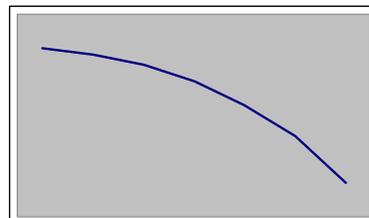


same, but rather that thing will continue to get worse at the same rate (first curve).

The “optimistic view” is that some factors will change for the better (like good rainfalls or political reform). Positive change does not necessarily mean that Zimbabwe will return to what it was a few years ago – it could simply mean that the rate of decline slows down or stops (second curve) so that living conditions for the average person get no worse.



The “pessimistic view” is that the negative factors will become stronger – possibly by reinforcing each other (like hunger and HIV/AIDS) – which means the rate of decline will accelerate (third curve).



A worrying possibility is that the rate of decline in Zimbabwe is already accelerating, as in the third curve. If this is true, it means that positive change is needed simply to achieve a straight-line decline (the first curve) and that much more profound change is needed to halt the decline (the second curve), let alone reverse it. It also means that the pessimistic scenario shown above could in fact be neutral, requiring no change in influencing factors.

The status quo.

It is a matter of record that the economy of Zimbabwe is in decline, with negative growth and triple-digit inflation. Drought, unemployment and other factors have contributed to widespread hunger, necessitating the distribution of food-aid to hundreds of thousands of Zimbabweans. Late rains may not be enough to resolve maize shortages during 2003.

Foreign debt servicing has fallen into arrears, undermining the Government’s ability to raise further loans abroad, and an acute shortage of foreign currency is affecting Zimbabwe’s ability to import essential commodities such as food, fuel and agricultural inputs. The absence of these commodities has dire implications for the economic future of the country.

As regards the future, there seem to be no data to suggest that the above trends are changing for the better. Long-range weather predictions suggest erratic rainfall particularly in the south and east of the country. Shortages of seed and fertilizer, and a reduction in the national herd, will contribute to a continued decline in food production.

The International Monetary Fund and World Bank believe the Government’s policy of tighter foreign exchange controls and fixing prices will not improve the economic situation and could, in the medium term, result in even more business bankruptcies and unemployment.

A number of factors are negatively impacting on the ability and willingness of bi-lateral and multi-lateral agencies to support development and humanitarian relief programmes in Zimbabwe. These include concerns about the human-rights record of the Government and priorities elsewhere, such as the Horn of Africa and the Middle East. Debates about the acceptability of genetically-modified grain are also complicating the delivery of food aid.

Underpinning the decline of the economy, and weakening Zimbabwe's ability to recover is the HIV/AIDS epidemic (described earlier in this report) which is seriously affecting the ability of households to produce food or generate income, and is undermining commercial production and consumption in all sectors. The epidemic also weakens the ability of Government and non-government agencies to deliver essential services such as schooling and health-care.

It is almost impossible to overstate the effect which HIV/AIDS has on a nation and, unfortunately, Zimbabwe's epidemic ranks with the worst in the world. The enormity of the situation is masked by stigma, denial, and the fact that AIDS has no symptoms of its own but renders the body vulnerable to other infections, while it makes society vulnerable to socio-economic decline.

In its turn, socio-economic decline and poverty are thought to contribute to the spread of HIV. One reference says that, over the past year, Zimbabwe has had the fastest rate of economic decline of any nation not at war, which raises the horrifying possibility that the epidemic in Zimbabwe may have gained renewed momentum during this period.

The implications for children are dire. General vulnerability due to poverty, displacement and denial of essential services such as schooling and health care will increase. Orphaning as a result of AIDS, but also through starvation and violent death, will also increase. Grandmothers, who are often the last layer of the family safety net, are particularly vulnerable to poverty and a lack of health care services, which means that more children will find themselves in child-headed households or living off the streets.

Scenario one: continuation of status quo

In the absence of positive change, things will get worse in Zimbabwe. How much worse depends on whether the country is currently on a straight-line decline or an accelerating decline (as described earlier).

In this "neutral" scenario the level of hunger will continue to increase from year to year, although there will be seasonal fluctuations. It should be borne in mind that access to food is not only a function of the crop size, but also of the cost and the availability of staple foods. This means factors other than the weather are impacting on food security.

By the first quarter of 2004 it seems likely that as many or more people will be dependent on food-aid. However food handouts cannot provide complete nutrition to all who need it. Hunger and malnutrition will increase. And with increasing hunger, people who are HIV-positive will progress more rapidly to AIDS and death.

HIV/AIDS will lead to growing rates of absenteeism in the workplace, as workers fall ill and when they stay home to care for sick relatives or attend funerals. This will increasingly affect all business sectors (and therefore employment and income levels) as well as the delivery of services by Government and NGOs. The social safety net provided by these institutions, along with communities and families, will therefore get progressively weaker as more and more people who were helpers and income providers instead need help and support themselves.

The Zimbabwean dollar has already lost much of its value, and this trend seems set to continue. Eventually only movable assets – livestock, vehicles, food, furniture etc – and foreign currencies will have value, and people will increasingly barter goods rather than exchange them for cash. Inflation and poverty will together conspire to deprive families of their assets, including productive assets like agricultural implements, which they need to survive and, eventually, recover.

Continuing shortages of foreign exchange will impact on all aspects of life, further increasing unemployment and making essential imported commodities such as fuel, drugs and spare parts increasingly expensive and/or difficult to find. The number of skilled Zimbabweans leaving the country will grow, contributing to the decline of institutions such as schools and hospitals, and to the withering of infrastructure such as telephones, electricity and roads.

Unskilled and unemployed people will also leave the country, of course, some as illegal immigrants to neighbouring states, while others will turn to crime. At the same time the army, immigration services, police, courts and prisons will be weakened by emigration, HIV/AIDS and potentially the inability of Government to pay their salaries. Among other consequences, this could lead to increased corruption, smuggling and human trafficking, while alternative judicial systems such as “people’s courts” and vigilante groups may emerge.

Implications for STRIVE

STRIVE and its partners will be increasingly stretched as the number of children needing protection grows. Indeed, STRIVE is already being scaled up – both in number of employees and in the number and size of its partner (sub-beneficiary) organisations – and it is likely that these partners are also going through rapid growth in the demand for their services, and probably in the range of services they offer and the number of staff and volunteers they employ.

However scaling up presents its own challenges. STRIVE staff are distracted from their core business of supporting partners at the very time that partners need them most, while STRIVE recruits and trains additional personnel. Partners will be similarly distracted from serving their clients – children and their caregivers – and their situation may be compounded rather than helped by too many interventions by STRIVE and others.

Clearly it falls within STRIVE's capacity-building mandate to help its partners through this process of growth. However, this task presents its own set of challenges. Firstly, it will be difficult (but not impossible) to manage the growth of STRIVE and to support the growth of its beneficiary organisations at the same time. Secondly, too much “help” can distract a partner (particularly a community-based organisation) from its core business, which means their clients can suffer. This effect needs to be carefully considered and, if possible, measured.

Organisations going through rapid expansion, like STRIVE and its partners, are prone to losing touch with their strategic goals as they grapple with day-to-day challenges, and are particularly vulnerable to poor internal and external communication. This can place stress on staff-management relations and on key relationships with donors, government and other stakeholders.

In the business world, times of rapid growth and change are recognised as being so risky and the challenges posed are seen to be so unique that special “change management” personnel are sometimes brought in to oversee the process.

Effective planning is very difficult in a fast-changing environment such as Zimbabwe. A common mistake is to plan for current needs rather than for anticipated needs. For example it may be short-sighted to plan for the number of OVC currently in a particular village, and to design interventions which rely on existing skills and commitment in that community. Instead one should anticipate growth in the number of OVC, and changes in the resources likely to be found in that community, and plan accordingly. Failure to do so means that interventions will always be too little, too late – if they succeed at all.

Working in a changing situation also presents challenges in measuring the results of one’s interventions. Outcomes need to be measured against a moving baseline (plotting the situation expected without the intervention, against the situation with the intervention in place). This baseline needs to be continuously reviewed and updated to reflect changing circumstances, if the results of the intervention are to be considered authoritative.

Of course the growing number of OVC will not be the only challenge facing STRIVE and its partners. It would be naïve to believe that our people are in some way immune to the socio-economic and health issues which are attacking the nation. As skilled and experienced people become harder to find in Zimbabwe, it will be harder to keep our key people, and harder to replace them when they leave. Burn-out will be a growing problem, as will illness and competing family priorities. STRIVE should therefore anticipate the loss of personnel at ever-increasing rates, and plan for their replacement at short notice, without losing the continuity of its services.

Scenario two: positive change

Various factors could result in an improvement in the economic situation in Zimbabwe such as an improved harvest, good rainfalls in the second half of 2003 and political developments leading to stronger economic performance, a re-engagement by donors and a return of the IMF and World Bank.

Already the Famine Early Warning Systems Network has announced the current harvest could be 160% better than the 2001/2 season, and that the expected 1.3 million tons of maize may be almost enough to feed the country. However a full report on food security by the UN will only be available in May. Obviously an improved harvest would do much to alleviate short-term hunger, but deeper structural problems are likely to inhibit a full recovery of the agricultural sector for many years.

The positive effects of policy reform will also take time to unfold, although improved access to foreign exchange would mean fuel and basic foodstuffs could become available almost immediately. However, as we have seen in the past weeks, Government does not have the resources to subsidize these commodities and rising prices will place them beyond the means of most consumers.

Recovery in employment through business expansion will take longer still and, unfortunately, will continue to be undermined by the HIV/AIDS epidemic.

In general, as discussed above, to plan for an optimistic scenario is an indulgence which we cannot afford – not because such a scenario is impossible (as recent positive developments have illustrated) but because to do so would mean gambling with the future of our children.

Scenario three: accelerated decline

This scenario differs from the “neutral” scenario mainly in relation to the speed of decline. In most respects the same things will happen, but they will happen sooner.

But there are differences. In an accelerated decline scenario we are more likely to witness catastrophic collapse of programs and institutions – such as food-security and agricultural support programs, hospitals and schools, and the criminal justice system. This in turn could lead to social unrest and the displacement of people, both within Zimbabwe and across her borders.

In extreme circumstances foreign governments may close their embassies and withdraw funding of social programs, while private donor agencies and humanitarian relief organisations may be influenced by considerations of safety to withdraw. At a certain point, even domestic agencies may have difficulty moving around and interacting with people working at grass-roots level.

Implications for STRIVE

There is perhaps little point in anticipating a scenario in which STRIVE ceases to function. However, long before this situation is reached (if it ever is) STRIVE and its partners will need to operate in very different and creative ways, if we do not want to abandon Zimbabwe’s children to their fate.

In an environment where state authority breaks down, and survival depends on black markets and crime, gangsters or warlords often emerge to fill power vacuums. In such circumstances STRIVE should be alert to changes in the social dynamics within partner communities, and the “rules” in terms of which community-level organisations operate. For STRIVE personnel to move safely and engage constructively in those communities will require careful negotiations.

If circumstances become more extreme externally, they are likely to become more extreme internally as well. The occasional loss of a staff member to another agency, another country or to serious illness could turn into a steady exodus. Planning for this eventuality will be expensive and onerous, but the cost should be measured against the importance of STRIVE's work to the future of Zimbabwe.

For example an internship program – in which all staff members have “understudies” – would place enormous strain on STRIVE’s budget and infrastructure but may be the only way to ensure continuity under extreme conditions. Alternatively, producing detailed written reports of all activities would place a major burden on staff and seriously affect productivity, but would enable a replacement to rapidly pick up where the previous incumbent left off.

Perhaps the most challenging task will be to help STRIVE's partners (sub-grantees) to operate in uncertain and potentially dangerous conditions, while facing a massive growth in demand for their services. One approach may be to work with each partner to develop a survival strategy, looking at their unique circumstances and resources. Another would be to establish a mobile support unit, which could offer temporary support to partner programs which are faced with unforeseen gaps in people or skills.

8. CONCLUSION

About the only thing we can be sure about in Zimbabwe is that nothing is certain. This makes effective planning a very challenging exercise.

Fortunately in one area at least, STRIVE has a key advantage. As we have found, the fact that the program is funded in US dollars means that the weaker the Zimbabwean dollar, the more money we have to spend. However, this also means that if the slide of the local currency is halted, the resources available to STRIVE will be fixed – even though the level of need is likely to continue to grow.

Ultimately most decisions – about policies, funding, people and relationships – are likely to come down to a single question: “how far should we go?” Answering this question, in turn, has as much to do with how important we perceive STRIVE's work to be, as it does with our expectations of the future. The more important our work, the more conservative our planning must be.

Clearly this is a decision which needs to be taken by the STRIVE team, with the advice and support of their key stakeholders – including the Reference Group and Review Team members from the mid-term review. It is hoped that this document is able to stimulate this process.

9. MAIN REFERENCES

- Epidemiological Fact Sheet on HIV/AIDS and Sexually Transmitted Infections, 2002 Update; UNAIDS
- Children on the Brink 2002; UNAIDS, UNICEF and USAID, July 2002.
- The Situation of Orphans and other Vulnerable Children in Zimbabwe – A Country Report for the Eastern and Southern Africa Regional Workshop on Orphans and other Vulnerable Children; Government of Zimbabwe, UNICEF and others; November 2002.
- Presentation by Zimbabwean delegation at the Eastern and Southern Africa Regional Workshop on Orphans and other Vulnerable Children; November 2002.

ANNEX 3 CATHOLIC RELIEF SERVICES (CRS) STRIVE PROGRAM EFFECTIVENESS

PREPARED BY LYNNE COGSWELL, ORGANIZATIONAL DEVELOPMENT
SPECIALIST (EXCEPT ADDITION ON S8 MEETING)

EXECUTIVE SUMMARY

A. Findings

- Planning seems to be very fractured resulting in “reaction” not “pro-action.”
- STRIVE vision; strategic thinking and project direction seem to be unclear.
- Present management structures do not appear to be conducive to effective management, delegation, or decision-making.
- Lines of authority, roles and responsibilities, while clearly laid out, do not appear to be adhered to or respected.
- Over-involvement from USAID in STRIVE’s day-to-day activities and management has apparently hindered its ability to manage its work.
- Administrative systems appear to be sound, but insufficient staff is in place.
- The present Director is stepping down, though he will remain until he is replaced.
- Roles and responsibilities of PDM staff and the overall purpose of the PDM Unit appear to be constantly evolving, causing confusion among Units and partners alike.
- Outsourcing seems to be inadequately used; staff appears to want to take on many service delivery tasks themselves.
- Linkages and relationships at all levels seem to be tenuous. STRIVE does not appear to have clarified whether it should and needs to formalize its linkages at all levels.
- Information is often not effectively shared nor passed along and in some cases has been withheld. Communication flow seems to be hindering quality responsiveness.

B. Conclusions

- Strategic program planning is fragmented and insufficient and needs to be undertaken anew to strengthen STRIVE’s vision and provide clear direction for the short- and long-term.
- Management systems are inefficient and require overhauling and adherence and respect for lines of authority has been abused.
- A new Director is urgently needed.
- The PDM Unit needs to define its role and structure, and clearly communicate this to staff.
- Core staff needs reinforced skills in planning, program management and supervision and a solid grounding in HIV/AIDS and OVC issues.
- The staff complement is sufficient, except for administrative needs, to handle STRIVE’s present activities. It would not be sufficient to handle any growth or scale up.
- Outsourcing has great potential for STRIVE staff, especially in its ability to allow STRIVE to effectively “facilitate” for its partners.

- STRIVE needs to define its desired “linkages mandate” and clearly determine the implications of not doing so.
- Communication systems need to be clearly established and followed.

C. Priority Recommendations

- Hire a seasoned, experienced Director immediately—someone who is a solid manager and strategic thinker.
- Restore STRIVE’s vision and revise present strategic program plan and timeline.
- Separate and simplify management structures of STRIVE within CRS.
- Institute decision-making autonomy of STRIVE from CRS.
- Reinforce adherence and respect for lines of authority.
- Engage the present Director in an appropriate capacity, i.e. Senior OVC Technical Advisor/Quality Assurance.

I. BACKGROUND

In May 2003, a multi-disciplinary team conducted a mid-term review of the program effectiveness of the Catholic Relief Services' (CRS) Support to Replicable, Innovative, Village/Community Level Efforts (STRIVE) for Children Affected by HIV/AIDS (CABA) in Zimbabwe, and to make clear recommendations on how to move forward. This report looks specifically at the effectiveness of the STRIVE program's ability to carry out its goals and objectives. Its goal is to improve the care and support of vulnerable children in Zimbabwe with specific program objectives comprising:

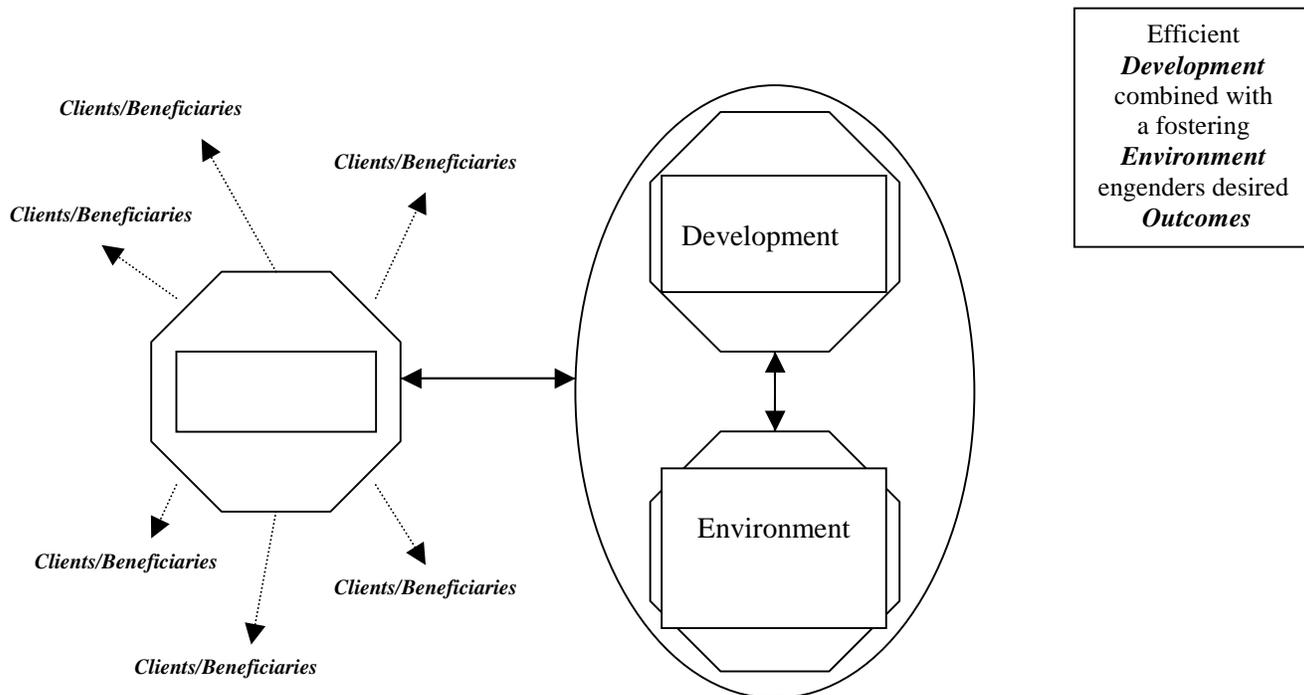
1. Support and develop appropriate, effective and sustainable community-based approaches to support for CABA in ZM through participatory learning and action.
2. Improve the organizational capacity of at least eight local organizations to deliver high quality care, support, and prevention activities to benefit children affected by HIV/AIDS and their families.
3. Increase access to quality education of children affected by AIDS, with a special focus on girls.

II. INTRODUCTION TO EFFECTIVENESS

The ultimate goal of most organizations or programs is a combination of achieving an identifiable mission and maintaining its own existence. This is becoming increasingly more difficult as the economic, political, social, and physical environments become more turbulent in Zimbabwe.

Organizational or program effectiveness is an interconnected process comprising development, environment, and outcomes, with the first two areas working conjointly to meet an organization/program's mission and deliver the promised services to its stakeholders moving it towards its goals and objectives. Figure 1 (next page) demonstrates the interconnectedness of the three areas of effectiveness:

Figure 1: Three Areas of Effectiveness



Depending on an organization/programs’ internal and external operating environment, it is also often necessary to look at leadership/vision and change management within the organization. More specifically, each of these five areas has certain issues or elements to be examined:

1. **Development** comprises the systems, structures, plans, and resources (human resource and financial) necessary to run an organization.
2. **Environment** encompasses the environment in which an organization functions.
3. **Outcomes** are the essence of organizational work. They are the reasons, rationale, purpose, and mission, for which an organization does its work—to make a change or to have a positive impact. The environment and structures of an organization affect its organizational outcomes.
4. **Leadership and Vision** go hand-in-hand and are essential to an effective organization. As the needs of an organization change, so do the skills and qualities needed for its leadership.
5. **Change Management** is the ability to manage change and is critical to the long-term success of an organization. Change can be internal, e.g. new policies, new leadership. It can be external, e.g. competitive pressure, funding pressure. Effective organizations learn how to adapt and succeed whatever the source of change.

There are four levels of effectiveness – basic (0-50), intermediate (51-75), advanced (76-90), and ideal (91-100). The level of effectiveness is important in understanding and gauging an organization/program’s overall effectiveness. Programs or organizations are not expected to excel in every aspect of all areas. Though all are capable of implementing services regardless of their effectiveness level, the key assumption is that “**a more effective organization or program can improve the impact it has and increase the quality of its services.**” In the short-term, most organizations/programs are able to provide sufficient services. However, in the long-run,

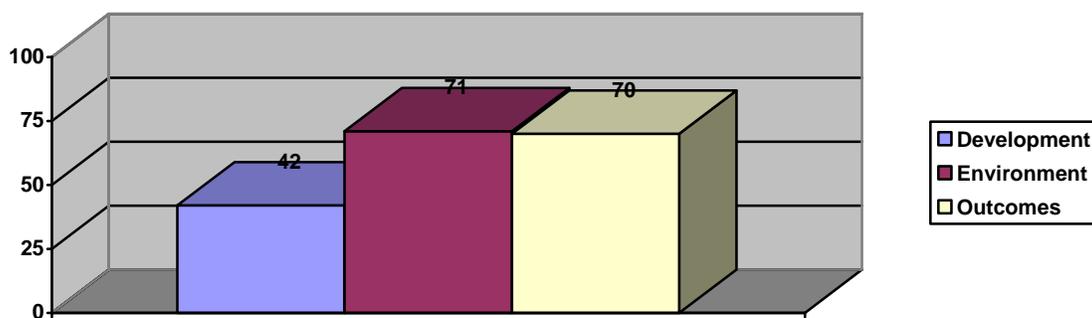
these services and their ultimate outcomes can be greatly improved and expanded by (1) implementing tools and processes that aid in effectiveness; (2) encouraging an environment that facilitates and nurtures effectiveness; and (3) promoting client feedback and program/services adaptation to assure desired impact.

This report examines each of the five areas cited above as they relate to STRIVE as a program within CRS. A combination of quantitative tools and qualitative methods (SWOT assessment - strengths/weaknesses/opportunities/threats, interviews, observations) were used to gather substantive information, each type reinforcing and validating the other. While data has been collected primarily from STRIVE staff, key CRS staff were also interviewed. Based on these findings, specific recommendations have been made (see Section VII). For purposes of this report, STRIVE will refer in all cases to CRS/STRIVE program staff in Harare. Also this assessment is unique in that, while it looked at STRIVE, STRIVE is a program within CRS and could not be looked at in isolation from CRS. Therefore, CRS was also examined organizationally, to the extent that it impacts on STRIVE’s ability to achieve its goals and objectives.

III. OVERVIEW OF STRIVE EFFECTIVENESS

Figure 2 below reflects how STRIVE staff views its effectiveness in each of the five areas. As can be seen, according to staff, all areas but one—development—have reached a level of intermediate effectiveness. While intermediate effectiveness does not preclude STRIVE from improving in these areas, the real work appears to be needed in the Program Development area, which is at “basic level” of effectiveness (42). STRIVE appears to have fostered a reasonably positive program environment (71) with a continued focus on its program outcomes (70).

I. Figure 2: Overview of STRIVE Overall Program Effectiveness



IV. KEY FINDINGS

STRIVE has continued to carry out activities under extreme growth pressures and in spite of the detrimental operating environment. It is important to note that STRIVE’s self-image is very

positive (except in the area of program management) as can be seen by the way STRIVE staff described themselves:

“We are facilitators/helpers/midwives, intermediaries, explorers/pioneers, torchbearers, responsible/responsive, empowering, keeping children at the heart, and a “Big Bus slightly out of control.”

Unfortunately, the apparent benefits of using CRS to carry out this cooperative agreement have not materialized to the extent anticipated. The reported benefits of selecting CRS for this work included:

- Already established partner relationships for a faster start-up time;
- Partners already familiar with CRS financial and management policies;
- CRS’s understanding of the Zimbabwean environment thus allowing for quick adaptation and facilitation of events; and
- Experts on staff to assist with programming, systems structuring and technical advice from the CRS country office, regional office, and home office.

The quantitative summary of STRIVE’s levels of effectiveness in each area detailed in Figure 2 has been substantiated by qualitative information. The need for improvement in Program Development was also quite evident from the feedback received. The following provides more detail on the Program Development elements that need attention if STRIVE is to improve its effectiveness. It also provides some insight into Environmental and Outcome issue that require consideration.

A. Development

Development assesses eight elements – Technology, Contacts/Relationships, Management, Administrative Systems, Planning, Communication, Assets, and Staffing/Human Resources. All but one (Technology/51) fell below 50 into a “basic” level of effectiveness. All of these elements impact on STRIVE’s ability to carry out its activities. The seven elements that reportedly are at a “basic level” have been discussed in detail below. Figure 3 below delineates the effectiveness score of each of the elements of concern as seen by the STRIVE staff.

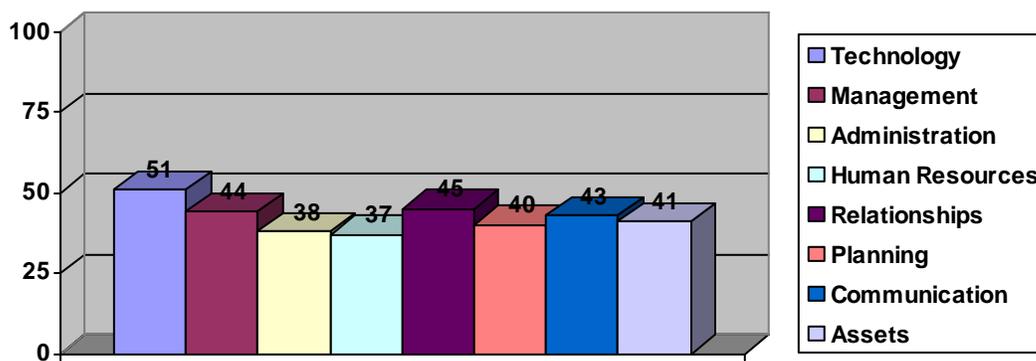


Figure 3: Details of STRIVE Program Development Effectiveness

Management Systems

To what extent does the STRIVE management structure and systems allow it to respond to and support its implementing partners?

STRIVE has been working to rectify and improve its management systems and has made some significant changes, e.g. changes in procurement and administration. However, based not only on quantitative results, but qualitative results as well, the management systems and structures presently in place are insufficient. STRIVE's ability to effectively identify, respond, and meet the needs of its implementing partners/sub-grantees has been greatly hampered as a result. Responsiveness and timeliness of responses are heavily tied to the management systems presently in place and they are suffering as a result. There appear to be several reasons for the inefficiencies:

- Final decision-making is too centralized in CRS and insufficient decision-making autonomy rests within STRIVE itself.
- STRIVE program management structures are too dependent on management structures within CRS.
- CRS management systems are too onerous and cumbersome to perform necessary STRIVE management functions in a timely and responsive manner.
- Lines of authority, roles and responsibilities, while clearly laid out, are not adhered to or respected.
- Over-involvement from USAID in STRIVE's day-to-day activities and management has reportedly been evident. Though the apparent rationale for this over-involvement might be understandable, its effect on STRIVE program management has hindered its ability to manage its work.

Administration Systems

To what extent does the STRIVE administrative structure and systems enable it to support and respond to the needs of its implementing partners?

Administration systems within STRIVE and within CRS are, for the most part, in place. CRS and STRIVE have also been working steadily to improve and to modify their administrative processes and structures and much progress has been made, as noted by staff.

The challenge for the present seems to be that more staff is needed to carry out the processes and procedures established, both within CRS and within STRIVE. The systems and procedures themselves, however, appear to be sound.

Human Resources and Staffing

To what extent does STRIVE staffing and human resources impact on its ability to effectively carry out its goal and objectives?

STRIVE staff is highly skilled, professional, and committed to its work. There have been substantial delays, however, in getting qualified staff on board and this has significantly impeded the progress of activities, especially in the first year. While staffing and human resources for the most part are now in place, there are a couple of notable challenges facing STRIVE if it wishes to move effectively forward:

- **Director** – It is unanimously acknowledged that his vision, his commitment, and his understanding of the CABA/OVC/AIDS issues are practically unparalleled among CRS and STRIVE staff. It also appears that while there is a lot of discussion about his ability to management the project adequately, it is unclear whether he was actually ever given an opportunity to do so. The result is that the STRIVE project has been inadequately managed. The present management structures do not appear to have been conducive to effective management, delegation, or decision-making, resulting in minimal strategic thinking and unclear project direction. The present Director will be stepping down from the Director seat as soon as a new Director has been hired, but he will continue in a consultative role with STRIVE. He will act as a “caretaker” of the project until his replacement is found. While there has been some talk of creating a Deputy Director position and hiring from within CRS to fill this position, it seems premature to make this staffing decision before a new Director comes on board.
- **Unit Staff** – Most staff presently seem to be the “right people in the right place” and human resources seem to be sufficiently under control.
- **Project Development and Management (PDM) Unit** – Though staff seems to be qualified and experienced, roles and responsibilities remain unclear. The overall purpose of the Unit appears to have been constantly evolving, thus causing confusion among Units and partners alike.
- **Psychosocial Support (PSS) Unit** – The PSS has no full-time staff person in place. It is felt by staff that outsourcing might not be the best way to ensure that the physical, emotional, and social needs of children are incorporated into all activities carried out and to ensure that it is seen as an integral part and not a separate entity.
- **Capacity** – Across the board, core staff skills in planning, community strengthening, program management and supervision appear to need reinforcement. The staff also appears to need a solid grounding in HIV/AIDS, and orphans and vulnerable children’s issues.
- **Sub-contracting** – Sub-contracting seems to be inadequately used even though funds are available for this purpose. While the CB/G Unit is in the process of creating a “skills bank,” this is not up and running yet. Staff appears to want to take on all tasks themselves, when many other sources are available to help them get the job done, e.g. local consultant, local NGOs, partner staff with specific expertise, etc.

Relationships

How has STRIVE built relationships to facilitate its work and that of its partners?

While it is generally agreed that relationships, contacts, linkages, and networking with government agencies and international and local non-governmental organizations (NGOs) at all levels is an important part of what STRIVE should be doing no clear, formal process for

ensuring that these linkages are put in place has been established. To date, most of what has transpired has been based on personal connections and personal past experience and it is done because people “feel” it needs to happen. A strategic risk is inherent if single individuals maintain an organizational asset, i.e. that the asset could leave with the individual. STRIVE has not clarified whether it is necessary to formalize its linkages at the national level, at the USAID level, within CRS, or whether it should and needs to encourage and enable linkages at the implementing partner/sub-grantee level. It has not clearly defined its desired “mandate” in this area, nor has it clearly determined the implications of not doing so.

Planning

To what extent does STRIVE have the necessary strategic program planning in place to guide its work?

Strategic planning has been very fractured resulting in “reaction” not “pro-action” within the organization. STRIVE developed its original program plan and timeline for the proposal in 2001. This plan does not appear to have been revised in light of the new directions STRIVE is taking, or wants to take, and in light of the rapidly changing external operating environment. While it is evident that numerous plans are in place, e.g. Annual Work Plan, Performance Management Plan, they do not seem to have kept staff attention directed on its vision and its main project focus, operations research. None of the plans provides a “strategic program plan” that brings staff together in this vision for STRIVE. Staff seems to have lost sight of the big picture and STRIVE’s view appears to be getting narrowing and narrower as they scramble to “put out fires” and react to events, instead of planning for them. Planning is not focused on short-term deliverables or on the long-term planning necessary to move from pilot to program. Management planning seems to be insufficient as well. STRIVE does not appear to have sufficiently regrouped during this first 18-months and taken stock of where it is and where it needs to go in this first phase (Note here that the team was aware that a retreat was held in 11/2002, but it seems to have been insufficient or unable to get things back on track.)

Communication

To what extent has communication had an impact on STRIVE?

Communication flow appears to be a serious challenge for STRIVE. Information is often not effectively shared nor passed on to partners, and apparently in some cases has been withheld. There is often confusion about who to ask or who to recommend one ask for information. There is also an apparent concern among staff about what information they should be handling and what they should pass on to an appropriate unit. The staff expressed concern that they are sometimes ill equipped in any area other than their own and, as a result, they are often unsure how to handle questions that come up in the field. All levels have expressed their concerns about communication challenges and while there was insufficient time to track communication systems, it seems that reporting is unclear and requirements are not followed, that structured mechanisms are insufficient, and that regular staff meetings are infrequent.

What organizational assets has STRIVE put in place to ensure the long-term capacity impact desired?

STRIVE also appears to have neglected its own organizational assets, i.e. those systems that do not leave with individuals, but are developed and remain in place in the organization itself. For example, there has been little or no guideline development for the Units. Though assessment, reporting, and research tools are being regularly developed, for the most part it appears that no operations/conduct manuals have been developed to go with these tools. If one core staff member were to leave tomorrow, it apparently would be very difficult for someone else to take up the work without a significant time delay.

V. Environment and Outcomes

STRIVE’s relatively positive organizational environment and its continued focus on outcomes have been most impressive, especially given the other program development challenges it has faced. While the following environmental and outcomes findings do not have any specific recommendations attached, they could be fundamental in carrying out the Program Development recommendations presented, i.e. how decisions are made, what is carried out and how they are carried out. As can be seen in Figure 4, for the major areas of concern at the time of this mid-term review, STRIVE appears to be at an intermediate level of effectiveness. Though quantitatively, they indicated that they felt the necessary elements were in place for growth and change (64), they qualitatively reflected that they were unsure if they were actually equipped at present to grow. Furthermore, though quantitatively they reported that their leadership and

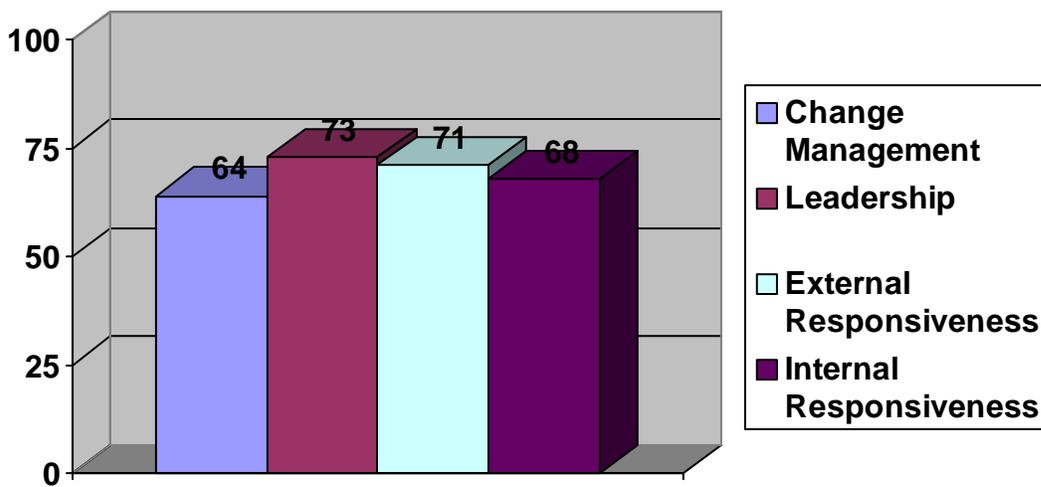


Figure 4: Details of STRIVE Environment and Outcomes Effectiveness

vision were high (73), many indicated qualitatively that these were severely hampered by the Program Development issues. With external and internal responsiveness, though staff quantitatively viewed these at an intermediate level of effectiveness (71/68), qualitative feedback belied this perception.

Change Management

Staff felt that several elements were in place for effective change management to take place, i.e. resources, technology, administrative structures. Other elements still needed to be sorted out, e.g. management structures, outstanding staffing issues, communication, and planning. Furthermore, with the recent growth within both CRS and STRIVE, staff are worried about more growth and more change without proper documentation of past activities and without a clear picture and plan of where they were going as an organization and as a program. They did not feel as if they had been involved or consulted in the change decision-making process, but rather they were being asked their opinions just to “rubber stamp” the decision after the fact. They indicated that they felt “participatory decision making” was talked about, but seldom actually used.

Leadership

STRIVE staff has defined an effective leader as one who is inspiring, focused, authoritative, influential, proactive, efficient, and aware. An effective leader is a team leader and player, planner, motivator, communicator, team builder, and visionary. Furthermore, they felt that an effective leader encourages, delegates and supports. While they reported that several of these “ideals” were represented in the present Director, they also expressed the opinion that major ones such as being proactive, strategic thinking, strong management, planning and communicating were not strong points.

Responsiveness – Externally and Internally

Again, problems with external and internal responsiveness were repeatedly brought up as an impediment to carrying out activities. Some reported that it was often non-existent or very belated. They felt that cumbersome management structures, inadequate communication systems, unclear staff members roles and responsibilities, and lack of decision-making ability further reduced responsiveness.

VI. SUMMARY OF MEETING WITH S8

On Thursday 22 May members of the review team met with senior representatives of six of the scale-out eight (S8) sub-grantees [FOST, ITDG, Africare, Scripture Union, Child Protection Society, Uzumba Orphans Trust].

In general the group described:

- Serious delays in fund allocation and decision-making (appears to have affected all sub-grantees);
- Bureaucratic, unyielding attitudes, particularly in finance and administration;
- The imposition of CRS's ideas/programs over sub-grantees';
- The doctrine that STRIVE-related activities must be separate from other activities;
- Over-involvement in day-to-day operation (ie: "micromanagement");
- Short duration of STRIVE project is unrealistic, given objectives and operating environment;
- Over-emphasis on quantitative results at the expense of quality services.

There was a concern that many of these problems emanated from the programming and financial requirements imposed on CRS/STRIVE by USAID.

Some of the comments included:

- "At our first meeting on grants management they began with a long list of what is disallowed."
- "It's almost like CRS's approach is 'no you can't', rather than 'let's figure it out'."
- "They disallowed expenses which were clearly allowable because of a technicality."
- "Let us make day-to-day decisions about who we employ, and how we implement our programs."
- "The community agrees to something, then STRIVE says 'no you can't do it like that'."
- "We already have a vision of our own – it's important to merge the vision of STRIVE and [our organization]."
- "The crux is flexibility – or lack of it – we need a relationship built on trust, or else they are adding more pressure in an already challenging environment."
- "The role of STRIVE could be to broaden the areas of expertise of their partners."
- "USAID needs to take a long-term view on quantifiable results."
- "Judge the results, not the process."
- "We know more about our work than STRIVE. We need more of their help, but less of their instructions. They need to work with us, not the other way around."
- "The financial tail is wagging the program dog."
- "Exponential growth is difficult at our level – that needs macro-intervention at policy level."
- "We are going too fast – we're not building on our culture. CRS/STRIVE should lay a foundation over the next 18 months to ensure sustainability of the program."
- "Trust us to do it!"

Overall there appeared to be consensus that the relationship between CRS/STRIVE and their sub-grantees should be characterised by trust, flexibility, respect and honouring commitments.

VII. CONCLUSIONS

STRIVE staff and STRIVE programming are most unique in their vision, their strong commitment to children in Zimbabwe, and their integrated, holistic approach. To bring this

uniqueness to fruition, i.e. reach as many children as possible in the best possible ways, however, STRIVE will need to focus its efforts, reduce its present programmatic fragmentation, re-establish its clear path and get back on track. STRIVE needs to model the behaviour it expects. STRIVE's first 18 months can be summarized as follows:

STRIVE has continued to carry out activities under extreme growth pressures and in spite of detrimental operating environment changes and its positive self-image is clearly evident.

- STRIVE decision-making is too centralized in CRS.
- Management structures of STRIVE within CRS are too interdependent and cumbersome.
- Adherence and respect for lines of authority have been abused.
- Management structures of STRIVE within CRS are too interdependent and cumbersome.
- Involvement of USAID in day-to-day activities has been disproportionate.
- Administrative systems have been developed and implemented. Sufficient administrative staff now needs to be put in place.
- STRIVE staff is highly skilled, professional, and committed to its work.
- A new Director needs to be hired immediately.
- The present Director is a valuable individual asset to STRIVE.
- The staffing and expertise of the Capacity Building/Gender and the Educational Assistance Units are very solid.
- The rationale for both the Economic Strengthening and Food Security Units is unclear.
- The Grants Management and Operation Research Units have recently fully established themselves and appear to be well founded and sufficient.
- The PDM Unit needs to define its role and structure and communicate this to staff.
- The role and direction of the Psychosocial Support Unit is unclear.
- Outsourcing has great potential for STRIVE staff, especially in its ability to allow STRIVE to effectively “facilitate” for its partners, but this potential has not yet been sufficiently tapped.
- Linkages and relationships at all levels are tenuous.
- Strategic program planning is fragmented and insufficient and needs to be undertaken anew to strengthen STRIVE's vision.
- Communication flow is hindering quality responsiveness and needs to be tracked and delineated.
- Organizational assets are not being developed and are essential to STRIVE's long-term functioning.
- The positive program environment and the focus on outcomes are presently constant and need to be nurtured and maintained.

VIII. RECOMMENDATIONS

These recommendations are intended to assist STRIVE in overcoming some of its program development challenges and ensuring that the positive Environmental and Outcomes aspects are maintained. They are intended to make STRIVE more flexible, more responsive, more timely, more professional, and more effective in the delivering of its “services.” Specific recommendations have been broken down in Table 1 below to assist STRIVE in determining what they might/should consider doing and how they might do it. They have been presented by

order of “Date” as some recommendations need to be carried out before other recommendations. The shaded recommendations indicate those recommendations that are essential to the survival of STRIVE and the effectiveness of its activities and program. Some attempt has been made to detail possible action steps when sufficient information has been available to do so. As well some recommendations clearly have budgetary implications and these have been indicated with (\$).

Table 1: Program Recommendations

Area	Specific Recommendations	Possible Action Steps	Responsible	Date
Human Resources – DIRECTOR (\$)	<ul style="list-style-type: none"> Hire a seasoned, experienced Director immediately. <i>if this does not appear to be immediately possible,</i> Consider hiring an “interim” Acting Director for 12 month who can straighten issues out and recruit for a permanent Director. <i>The new Director should be allowed to do his/her own initial assessment and adjust any of the following recommendations accordingly.</i> 	<ul style="list-style-type: none"> Rewrite the “job description” for the new Director to be sure that it accurately reflects the position, the roles, and the responsibilities of a Director (present description looks more like a Deputy Director job description or a Chief Operating Officer description than a Director’s.) Ensure that the person hired has first and foremost a very solid track record as a Manager, especially with USAID projects, and as a strategic planner. 	CRS with STRIVE staff and USAID input	31-07-2003
Management	<ul style="list-style-type: none"> Untangle/disconnect and simplify management structures of STRIVE within CRS 	<ul style="list-style-type: none"> Detail what this would mean and what would be necessary Request necessary approval from Home Office 	CRS Country Representative	31-07-2003
Administrative Systems (\$)	<p>Hire the following staff to complement the present administrative structure:</p> <ul style="list-style-type: none"> Two administrative staff in STRIVE to support units One staff in CRS Administrative Unit to support STRIVE One staff in CRS Operations Unit to support STRIVE 	<p>Prepare job descriptions</p> <ul style="list-style-type: none"> Follow CRS Hiring Procedures Recruit 	CRS and STRIVE	30-07-2003
Management	<ul style="list-style-type: none"> Institute decision making autonomy 	<ul style="list-style-type: none"> Detail what this would mean and what would be required Request necessary approval from Home Office 	CRS Country Representative	31-07-2003
Management	<ul style="list-style-type: none"> Reinforce adherence and respect for lines of authority 	<ul style="list-style-type: none"> Eliminate double standards Discuss with all staff what “adherence” means Minimize exceptions Articulate ALL lines of authority to staff 	New STRIVE Director, CRS Heads of Department & Country Representative	IMMEDIATELY
Management	<ul style="list-style-type: none"> Minimize involvement of USAID in day-to-day activities 	<ul style="list-style-type: none"> Detail when and where involvement is appropriate and required Clarify expectations of all involved 	New STRIVE Director, CRS Country Representative, USAID	31-07-2003

<i>Area</i>	<i>Specific Recommendations</i>	<i>Possible Action Steps</i>	<i>Responsible</i>	<i>Date</i>
Human Resources – Staffing (\$)	<ul style="list-style-type: none"> Engage the present Director in an appropriate capacity 	<ul style="list-style-type: none"> Detail possible roles/involvement and discuss together Consider something like Senior OVC Technical Advisor/Quality Assurance 	New STRIVE Director	31-07-2003
Planning	<ul style="list-style-type: none"> Revisit and revise present STRIVE strategic program plan and timeline 	<ul style="list-style-type: none"> Collect all necessary documentation to show “chain of events” Include visioning to bring staff back together 	New STRIVE Director with STRIVE staff	31-08-2003
Development General (\$)	<ul style="list-style-type: none"> Hire a local OD consultant SHORT-TERM (6-8 months) to work on an ongoing basis with STRIVE and the new Director. 	<ul style="list-style-type: none"> Develop a scope of work for this consultant. Contact Veronica Chakaredza 	New STRIVE Director	31-08-2003
Development General (\$)	<ul style="list-style-type: none"> Conduct a facilitated discussion around the issues raised in the SWOT and from the mid-term review in-depth interviews (as posted at STRIVE) 	<ul style="list-style-type: none"> Include in scope of work for OD consultant 	OD Consultant	30-09-2003
Communication (\$)	<ul style="list-style-type: none"> Conduct a communication audit and develop a communication plan 	<ul style="list-style-type: none"> Develop TOR Recruit consultant 	PDM PM	31-08-2003
Human Resources – Individual Skills Building (\$)	<ul style="list-style-type: none"> Carry out a Project Management and Supervision workshop all core staff 	<ul style="list-style-type: none"> Include delegation, team building, performance evaluation, motivation, empowerment, time management Cover content as well OVCs, HIV/AIDS Recruit consultant 	CB/G PM (not for conducting but for organizing)	31-08-2003
Environment – Responsiveness (\$)	<ul style="list-style-type: none"> Conduct regular teambuilding activities with an outside facilitator 	<ul style="list-style-type: none"> Develop SOW Recruit 	CB/G PM	31-08-2003
Relationships (\$)	<ul style="list-style-type: none"> Hire a STRIVE Harare staff member as “Linkages Coordinator” whose main/sole responsibility it is to develop STRIVE’s linkages policy and implement it/see that it is implemented as an ongoing activity 	<ul style="list-style-type: none"> Detail a clear job description. Decide to whom this person will report Recruit 	New STRIVE Director, STRIVE PMs	31-08-2003
Relationships	<ul style="list-style-type: none"> Develop a clear and comprehensive “linkages” policy 	<ul style="list-style-type: none"> Define the role STRIVE will play at the national level and in conjunction with their partners, i.e. what STRIVE expects its partners to do and how STRIVE will help 	New STRIVE Director, PMs, CRS Country Representative	30-09-2003

<i>Area</i>	<i>Specific Recommendations</i>	<i>Possible Action Steps</i>	<i>Responsible</i>	<i>Date</i>
Human Resources – Individual Skills Building	<ul style="list-style-type: none"> Carefully re-examine the function and set-up of the PDM Unit. 	<ul style="list-style-type: none"> Consider “creative” restructuring, e.g. Child Well-being Units which encompasses the intervention areas instead of compartmentalized Units focused on the intervention areas or Child-Welling Project Officers (see attached Creative Thoughts) 	New STRIVE Director, PDM PM with PDM staff	31-09-2003
Human Resources – Unit Structure	<ul style="list-style-type: none"> Clearly define the role and direction of the Psychosocial Support Unit 	<ul style="list-style-type: none"> Discuss true integration of PSS See Creative Thought in Recommendations 	New STRIVE Director and all staff	31-09-2003
Human Resources – Staff Skills (\$)	<ul style="list-style-type: none"> Update all job descriptions based on revised “strategic program plan” 	<ul style="list-style-type: none"> Conduct an individual staff skills assessment Develop a skills matrix Design CB program to staff as needed 	Outsource?	31-10-2003
Human Resources – Outsourcing (\$)	<ul style="list-style-type: none"> Maximize use of outsourcing 	<ul style="list-style-type: none"> Detail budget for outsourcing Determine appropriate places/functions/jobs to outsource Develop appropriate SOWs Recruit 	Unit Heads and PMs	30-11-2003
Organizational Assets	<ul style="list-style-type: none"> Develop long-term organizational assets 	<ul style="list-style-type: none"> Detail of list of “assets” required Assign development of each “asset” to appropriate PM/staff and set specific deadline Review and revise manuals/guidelines developed Finalize and share with staff Make sure copies are easily accessible 	New STRIVE Director, PMs/Heads	28/02/2004
Focus	<ul style="list-style-type: none"> Consider thinking in terms of “facilitating services” 	<ul style="list-style-type: none"> Develop a “facilitation” menu (feasible and realistic based on what actually provide now) Discuss and detail what facilitation means in terms of roles and work with partners Organize a “quality services” CB activity for staff 	New STRIVE Director and all staff	31-12-2003

ANNEX 4 OPERATIONS RESEARCH

Introduction

The HIV/AIDS epidemic is leaving an increasing number of vulnerable children in need of special care and protection. More than 100 community-based organizations to assist children affected by AIDS have been established in Zimbabwe. Community groups are working in rural, urban and commercial farm sectors. Their response is focused on all vulnerable children, and most activities provide support for the entire community, not just members of one church or community.

The type of community organizations that have established programs to support children affected by AIDS, and the ways in which the programs have been established, are diverse. Many are church groups and tend to have a religious mandate and existing interest in supporting widows and orphans as part of their compassionate ministry. Volunteers have occasionally established programs based on community need. Some groups have been assisted by nongovernmental organizations or volunteer staff working with denominational umbrella organizations such as the Methodist Church.

Traditional leaders with existing cultural interest in providing for the poor in their communities have revived or extended traditional mechanisms of support to orphans, sometimes with help from the Department of Social Welfare and UNICEF. Some community groups who have been involved in providing home-based care for those living with AIDS have extended these programs to provide home visits and material support to household with orphans.

In view of the magnitude of the problem, in January 2000, USAID/Zimbabwe commissioned a study on children affected by AIDS. The study was intended to provide guidance and direction on the role a major donor like USAID could play in enhancing the communities' ability to support children affected by AIDS without undermining existing community efforts. Subsequently, USAID made a decision to provide a grant of \$2.5 million to Catholic Relief Services through a competitive process to support orphans for a period of about 30 months. Although USAID traditionally supports programs for five years, support for orphans is a new area for USAID and other donors. Thus, there was limited experience in Zimbabwe and elsewhere where USAID could draw upon in programming substantial resources in support of orphans within communities. A decision was therefore made to allocate part of the resources for operations research as a critical component of the intervention to provide lessons and guide future expansion in orphan programming.

In its submission to USAID, CRS proposed that it would track and document the impact of the pilot interventions through operations research to answer the following questions:

1. What is the impact of each intervention
2. How cost effective is each intervention in comparison with others
3. How replicable is each pilot intervention and what elements are unique to each pilot site

4. What is the quality of care being provided by various interventions.

For each of the above questions, research priorities were to be identified with sub-grantees to feed into the overall research agenda.

The STRIVE project design revolved around a rigorous operations research agenda that would enable the project to assess the impact, cost effectiveness, replicability and quality of various community-based OVC interventions. The results of the operations research were intended to provide lessons and guide future programming for not only USAID, but also for others working in Zimbabwe, in the area of children at risk.

In spite of this intensive focus on operations research, most operations research activities did not begin until almost one year into project implementation. CRS/STRIVE's original proposal to subcontract the operations research to a local firm did not materialize and STRIVE did not move rapidly to look for a replacement or to establish in-house expertise to implement this critical component. While a baseline survey was finally completed in July 2002, it was not adequate for all of STRIVE's requirements. In an effort to address gaps, a consultant was hired to reanalyze the raw data, and reorganize data and findings according to relevant STRIVE indicators. Although the resulting product was an improvement, the document continues to be difficult to use.

The Operations Research unit held a special workshop for OR officers in Bulawayo on the February, 25 2003³³. The main objective of the workshop was to review and discuss ways of improving the CABA Care and Support Form (CCS) used by partners to report to CRS/STRIVE on intermediate results, the monthly activity report, cost effectiveness tool. The new double counting elimination tool was also introduced at the workshop.

In early 2003, CRS hired an experienced operations research advisor who has worked hard to develop uniform data collection instruments to be used by all sub-grantees to standardize the information being collected. All but one of the P8 sub-grantees now has a trained operations research manager on staff, although these managers are universally required to perform several functions (operations research, monitoring and evaluation, field work). Sub-grantees uniformly reported improvement in the quality and timeliness of support and guidance being received from CRS/STRIVE since the arrival of the new operations research advisor, and on the benefits of the operations research program.

Accomplishments/Constraints and Challenges/Lessons Learned

The role and function of the CRS/Strive Operations Research is extremely well laid out in the May 2003 draft document "operations research strategy/agenda". It usefully places operations research within the context of the CRS/Strive OVC project and clearly details the many functions of OR within the project. Ultimately, the operations research unit is looking at four interrelated questions: the impact of interventions, their costs, their replicability and the quality of the care provided.

³³ The workshop report is available from the OR unit resource library.

There is clearly a great deal of expertise in Zimbabwe, notwithstanding the exodus of skilled people. Much of it residing within the UN, other NGOs, and the University. Many of the other NGO's, including members of the S8 have access to internal and external technical assistance, as does USAID. CRS/STRIVE should seek to network further and strengthen collaboration with other organizations and institutions in the area of operational research.

Much to the credit of the new OR officer, the operations research component of the project has come a long way in the last few months. A number of significant processes have been put in place to strengthen the OR agenda.

STRIVE Program Analysis Tool to Eliminate Double-Counting

There is a need for an effective and consistent mechanism or tool with which STRIVE can ensure that double counting of children reached will not occur. While the CCS form allowed for efficient collection of data on individual partner activities it could not eliminate double counting. Previously OR Officers would use the CCS form to simply add up the number of children participating in each activity regardless of previous participation or any other STRIVE activities. Therefore, a new STRIVE program analysis (SPA) tool was developed to eliminate the occurrence of double counting.

The SPA Tool is a multipurpose data collection tool developed by t in collaboration with its partners to better assess the number of children served and the range of services being provided. The SPA tool allows the capture of information on the number of children served by STRIVE and disaggregates those children into CABA and Non-CABA beneficiaries. This tool enables the counting of children served by each intermediate result area activity while ensuring an accurate count of children served by STRIVE.

The OR unit also reviewed and refined the partner quarterly report format and produced a schedule for reporting from the partners. The documents include the OR monthly reports, the SPA tool, the CCS form, the Cost Effectiveness (CEA) Tool, quarterly report, and annual report:

Field Visits

The OR unit visited a number of the P8 partners. During the visits, the head of the OR unit assisted OR officers with the newly developed SPA tool and discussed data collection issues. The OR unit also took the opportunity to discuss the upcoming STRIVE mid-term review being held in May 2003. Partner managers and teams were asked to make themselves available to answer questions, participate in focus groups, and take review team members for site visits.

CRS/STRIVE Database

The unit out-sourced expertise to design a database to integrate the CCS forms, SPA tool and the CEA tool. The database will enable the unit to record and store data from partners. It is designed in such a way that analysis of different variables can be done both at partner level and at CRS/STRIVE level. Using the database, one will be able to establish cost effectiveness of interventions as well as establish the number of children (CABA and non-CABA) receiving care and support through STRIVE. Most importantly the database will assist in assessing progress towards targets. The consultant is finalizing the database after which training will be conducted on use and management of the database.

CRS/STRIVE Quarterly Report Format

During the quarter the OR unit developed a CRS/STRIVE quarterly report format. This format was developed to assist the CRS/STRIVE IR units in producing more comprehensive reports. It is designed in such a way that all CRS/STRIVE units contribute towards the quarterly report. The OR unit has assumed the overall responsibility for producing the CRS/STRIVE quarterly report, effective this quarter.

OR Unit Consultative Meeting

In addition to the workshop held for partner OR Officers, the OR unit held a half-day consultative meeting for the CRS/STRIVE IR managers to discuss the process of determining best practices and to discuss ways the OR unit might assist the CRS/STRIVE units in measuring the impact of the interventions with which they are working.

Staff Recruitment

The OR unit conducted interviews for research and evaluation officers during the months of January and February. This process resulted in our engaging the services of a research and evaluation officer, Mr. Joseph Mafara for our Bulawayo hub-office and an OR officer, Ms. Jennifer Lentfer, who will be joining the OR unit here in Harare. Both new hires will begin their duties with STRIVE-CRS in April 2003.

Other OR Tools and Activities

Other partner research efforts include development of tools for a rapid impact assessment to measure progress in the area of psychosocial well-being at Masiye camp. In addition, the STRIVE team at Bethany carried out a needs assessment survey in January 2003. The Bethany project now has 650 registered volunteers and has established 22 CBO in 22 rural wards. Results of the Bethany survey reveal that 8200 vulnerable children are registered with the project. The survey further shows that vulnerable children in the wards covered by the survey were in need of school fees, uniforms, textbooks and food assistance. It is important to note that vulnerable children in that study were averaging only one meal per day at the time of enumeration.

Constraints and Challenges

- The process of having to recruit a complete staff for the OR Unit is affecting the effective discharge of the OR agenda. As the STRIVE project enters the last phase of the pilot, more staff is needed to document experiences in a timely manner. Several of those offered positions turned down the offers as a result of the packages being offered by CRS/ZW.
- The OR unit has not been able to get expected data from two partners namely, Bethany and DOMCCP. The Bethany OR Officer was relieved of his duties while the DOMCCP OR Officer and Project Manager resigned. The OR Unit could not get the CCS tool, SPA tool and the monthly reports from these partners. DOMCCP has replaced both the project manager and the OR officer while Bethany has not replaced the OR officer.

Trends and Lessons Learned

- CABA Forum have been successful in encouraging children's participation in STRIVE projects. CABA are included in these forums so that they articulate issues affecting CABA. For example, orphans and CABA headed households are coming first on the community priority registers in Chinhoyi due to CABA forums. In Chinhoyi, CABA headed households were allocated community gardens during this quarter through lobbying from similar structures.
- During this monitoring period, it emerged that communities are taking initiatives to assist CABA in their areas, demonstrating social capital that ensures sustainability of projects. For instance, Tsungirirai reported that there are teachers who are paying schools fees for selected CABA while Bulawayo made reference to a doctor who is offering free medical service to CABA.
- The OR unit learned that training on how to complete tools with partners is a process. Some OR officers have to be visited to elaborate on the completion of the tools despite having had training sessions, while some of them phoned the OR unit several times to get guidance on the completion of tools. Although the S8 will have a training workshop on M & E tools, a series of follow-ups will be done per partner to ensure that tools are being completed correctly and effectively.
- Monthly reports being shared between all OR Officers has resulted in a higher quality of report writing. Additionally, the OR unit plans to compile comprehensive reports from each partner based on the CCS forms and the SPA tool and share the reports with all other partners, so that partners will continue to share lessons learned and emerging trends.
- The SPA tool is proving to be very effective in eliminating double counting while providing a great deal of information on the quality of service being provided by partners. It has also helped partners to better understand the impact they are having on each child.
- In the long term the unit would recommend that partners replicate some of the lessons learnt from their peers. Most of the lessons learnt were from the P8. It is the vision of the OR unit to use these lessons to improve implementation of the S8.

Recommendations

A number of operations research related issues repeatedly came up during the field visits to the project sites. First was how the implementing partners, the P8, understood operations research, and how it was distinct from on-going monitoring and evaluation. This issue also came to the fore in the morning session with the operations research staff. With much of the quantitative data used by the operations research unit captured through the performance monitoring plan, there is inevitably some confusion over the relationship between the two. As stated elsewhere, it may be helpful for CRS/Strive to undertake additional workshops with its partner organizations to clarify the distinctions.

A fundamental prerequisite for an effective operations research component is ensuring the adequacy of baseline data. Clearly there were problems with the baseline study. As stated by STRIVE themselves in a number of their documents it was only completed eight months into the project, certain elements were deemed unsatisfactory and needed to be repeated, the analysis of the data took more time and according to some STRIVE staff the results in some areas were less than satisfactory. CRS/Strive should be commended for reviewing the baseline data and for taking steps to rectify omissions and inconsistencies. Strive should go further, and in line with recommendations in the main report, contract for specialized expertise to ascertain the veracity and validity of the baseline data and whether it is of sufficient quality to provide the information needed to meet the objectives of the OR component. Particular attention should be given to the economic strengthening, nutrition and psychosocial elements.

An additional issue that was raised by partner P8 staff was the heavy demands on their time. In a number of instances the operations staff was also the monitoring and evaluation staff, as well as general program staff. Simply put, the OR staff are doing too many things with the potential to undermine the operational research agenda. CRS/STRIVE should examine the workload of the OR staff and ascertain if additional staffing is needed.

Recommendations:

1. Subcontract operations research expertise to assess the current operations research tools and strategy, develop a workplan and identify additional funding needs for an expanded operations research agenda. USAID/Zimbabwe and USAID/Washington can provide assistance in identifying appropriate expertise.
2. Identify and subcontract a recognized local or international operations research organization to rapidly expand operations research activities; the operations research advisor should manage the contractor(s) to ensure that what they are doing is consistent with the objectives of STRIVE and USAID.
3. Put in place a mechanism to collect data and conduct an analysis of the cost effectiveness of different child support interventions individually and according to the following categories (a) psychosocial support, (b) economic empowerment initiatives, (c) food security and nutrition

interventions and (d) education assistance, as outlined in the cooperative agreement. STRIVE should subcontract an organization with expertise in cost effectiveness analysis to assist.

4. Document and disseminate lessons learned from communities where successful interventions are being implemented.
5. Analyze the quality of various interventions to determine if quality is consistent with expectations, as outlined in the cooperative agreement.
6. Encourage and provide financial support to sub-grantees for hiring additional staff dedicated to operations research.
7. Consider extending operations research to the S8 organizations to validate the assumption that larger organizations can scale up rapidly and more efficiently.
8. Design operations research questions to track community capacity building and/or empowerment of communities to make their own decisions and manage their own programs.
9. Closely examine staffing needs at the central and sub-grantee level to address the operations research issues raised above. Since the various interventions require a variety of skills—some short-term and others long-term—adopt maximum flexibility in structuring human resource needs to make STRIVE a cutting edge program in programming and operations research for orphans and vulnerable children.
10. Request that STRIVE become one of the field test sites for the ten proposed indicators developed at a recent OVC consultative meeting in Botswana.³⁴

³⁴ "Draft Report on the Technical Consultation on Indicators Development for Children Orphaned and Made Vulnerable by HIV/AIDS," Gaborone, Botswana, 2-4 April 2003.

ANNEX 5 PSYCHOSOCIAL SUPPORT – THE WAY FORWARD

By Dr. Jonathan Brakarsh

Background

With projections of 1.5 million orphans in Zimbabwe by the year 2005 (USAID, UNICEF and UNAIDS, “Children on the Brink 2002”), one third of whom will be under the age of fifteen, it is imperative that Zimbabwean communities be given the opportunity, the resources, and the technical assistance to implement their own solutions to providing psychosocial support (PSS) to children at risk. This document will elaborate on ideas presented earlier and the steps that might be taken to move a community-owned psychosocial support initiative forward in the present country environment.

A Bottom Up Approach: Dialogue with the Community

Ultimately the community, not the STRIVE sub-grantee, must have the knowledge and resources to remain viable in the current harsh operating environment. The first step in ensuring that this is so is for the STRIVE sub-grantees to establish a dialogue with the communities in which they work to hear their concerns, their assessment of their resources, and their solutions. The saying “An elephant must carry its own trunk” describes the view of most communities; it is important that development work supports the community to maintain its autonomy.

Recommendation: CRS/ STRIVE should develop a strong community mobilization component which partners can implement. Jill Donahue of CRS, Gail Snettro of Save the Children USA and Stefan Germann of REPSSI would be excellent resources.

Recommendation: CRS/STRIVE should work with Mildmay International, which is currently setting up operations in Zimbabwe, to learn from their clinic and community PSS work with children in Uganda, particularly on how to communicate with children.

What is Psychosocial Support (“Building a Child”)?

Because of the differences regarding the meaning of “psychosocial support” among the international community, USAID, CRS/STRIVE, sub-grantee organizations and the community, many of the communities we visited did not feel they owned the PSS program, nor did they fully understand what they were supposed to be doing and why. This was also true of many STRIVE sub-grantees, although to a lesser extent.

Recommendation: Use the protocol (see below), “Dialogue of Discovery”, to help communities and sub-grantees to communicate and clarify issues related to psychosocial support (“building a child”). Have the community adopt a word or phrase in their language that would be more suitable than the abstract term “psychosocial support”. Psychosocial support should not be used

at the sub-grantee or community level as it is an abstract concept that impedes the progress of the community. For example, Masiye Camp does not use this term with its campers.

Protocol: “A Dialogue of Discovery”

Target- Sub-grantees should hold this workshop with the community. The community does it with the children. The partners do it on their own or with each other. The community and children share their information with the STRIVE sub-grantee. The STRIVE sub-grantees share their information with the community.

Action-

1. The facilitator asks and obtains answers from the group about the following questions:
What does a child need in the first months after his/her birth? When he/she is five years old? When he/she is fifteen years old? When he/she is twenty-one years old?
2. What does a child need (emotionally, socially, physically, spiritually, and intellectually) to begin as a baby and grow into an adult you would admire- someone who helps the community, who is kind to others, and who is happy?
3. How do you now take care of the emotional/social/spiritual/physical/and intellectual needs of the children you care for? For example, what do you do to make sure that a child feels like they belong to their peer group and to the community? When a child loses a parent what does he or she need? What kinds of things can family and community members do to help such a child recover?
4. Facilitator: This is what we are talking about, helping a child to grow into someone you admire – a person who helps the community, who is able to provide for him/herself, a person who is happy and has friends. What word or phrase can we use to describe what we give a child so that they can grow into an adult we are proud of?

The facilitator can discuss with the community that every way in which we raise a child positively helps to build that child. The way we raise our own children is often the best guide to help other children in need. The facilitator can remind the community that they have always helped their members who suffered difficult circumstances (death of parents, poverty, victims of violence and child sexual). The facilitator can make the point that community members are now being encouraged to find ways of continuing to do these things in these difficult times.

Recommendation: After this process has been completed, CRS/STRIVE and partners should arrange follow-up workshops to provide further information about “how to build a child.” Community leaders, teachers, nurses, guardians, and other key members of the community should be involved.

Since “psychosocial support” is a construct used by NGOs and academics it is useful to have a common definition for use in future communication on the professional and academic level. Caution needs to be given, however, that the construct of psychosocial support should only be used for NGO and academic communication. A sample definition of “psychosocial support” is

provided below. It is derived from conversations with the staff of REPSSI, other STRIVE partners, and the community. Future consultation with REPSSI and the results from the Dialogue of Discovery, provided above, will help clarify the definition further:

“Psychosocial support helps to provide for the physical, social, emotional, intellectual, and spiritual needs of the child. Communities have been doing this for hundreds of years (“Caring for your fellow man”). The goal of psychosocial support is to help children grow into adults who can be productive, have fulfilling social relationships, and contribute to the community.”

GAPS IN PSYCHOSOCIAL SUPPORT SERVICES

Figure One: Current Services Offered by STRIVE Partners for Orphans and Vulnerable Children and Those Who Interact with Them

Service	Provider of Service	Receiver of Service
Identifying/Counseling children in need at school	Teacher	Children/Youth
Supplementary feeding/PSS	ECEC feeding center staff	Preschool children
PSS/Counseling in camp setting	Staff of Masiye/Community Camps	Children and Youth
Kids Clubs	Staff of Kids Clubs	Children/ Youth
HBC counseling	HBC staff	Children whose parent is ill
Aunties: PSS/counseling at home	Volunteer/Auntie	Children and youth
Support groups for HIV+ guardians	STRIVE partner	Guardians
Speak Out Workshops	STRIVE partner, community	Children/Youth
Talent Identification	School, Community	Children/Youth
Therapeutic Recreation	Community	Children/Youth
Training in Counseling/PSS	STRIVE partner, Red Cross	Teachers, Aunties, HBC
Leadership Training	Masiye Camp	Kids Club Leaders
Life Skills Training	STRIVE partner, Youth Alive	Child-headed households, girls
Child Galas	STRIVE partner, Community	Children/Youth
Peer Counseling	Youth Alive	Youth
Play Centers	STRIVE partner, Community	Children/Youth
Social Clubs	School, Community	Children/Youth
Teen Parenting Workshops	STRIVE partner	Children who are heading households
Child Sex Abuse Workshops	STRIVE partner	Traditional Leadership
Homework Clubs	Community	Children/Youth

While the diversity of services listed above is commendable, few of them were the ideas of the community. As mentioned earlier, the majority of interventions follow the Masiye Camp model (Kids Clubs, Community Camps, Leadership training, and Life Skills training) or the CONNECT model of counseling (family counseling, HBC counseling, child sex abuse workshops, parenting workshops, bereavement counseling, and counseling in the schools). If the community’s knowledge were utilized could more sustainable services be developed, would the community feel like they owned the problem and the solution to a greater extent?

Partners need to have further dialogue with the community to define the difficulties their children face and to collaborate with the community to develop the appropriate interventions. Key questions to address might be: (to an adult) When you were growing up, what did the community do when a child lost one or both parents? What does the community do now? How can you improve on it? How do you recognize when there has been a positive change in a child's behavior? (This will help develop indicators and interventions.) What causes children to misbehave?

Children require a sense of hope, a need for empowerment, and vision for their own future. When children do not have this, they develop a sense of fatalism, a feeling that they have no control over what will happen in their lives. This sense of fatalism is a significant risk factor for HIV infection.

Recommendation: For CRS/STRIVE, its partners, and the community the emphasis of PSS interventions should be on building the child's resilience in the face of multiple risk factors. Resilience consists of problem solving skills, daily living skills, the ability to utilize external resources (volunteers, relatives), and internal resources (positive self-image, memories of coping with adversity). PSS interventions should strengthen these areas. Partners can help the community to recognize issues of vulnerable children. They can encourage the community to identify the components of children's resilience ("What makes children strong and able to handle difficult situations?"), the threats to resilience (impact of AIDS, orphaning, social isolation), and what the family and community can do about these. Coping, vulnerability and resilience are the guiding concepts. For vulnerable children, the ability to cope and be resilient in difficult situations is the primary vehicle for positive psychological development. To ignore this approach denies children their future survival.

Cultural Taboos

Given the dynamic, changing nature of culture there are many cultural taboos with which the community is grappling. However two areas of cultural taboo have been mentioned by partners as needing to change: child sexual abuse and preparation of the child for the death of their parents. Some partners are providing child sex abuse and bereavement training to volunteers in the community, but **all** partners need to mobilize the community around these two issues.

When various protective factors are removed, such as when the child loses one or both biological parents, the child may become more vulnerable to child sexual abuse. In a study done at the Family Support Trust, Harare Hospital (UNAIDS 1998), the longer a child is without both parents the greater likelihood that the child will be abused. Twice as many children were abused whose parents had died in the last three years compared to those children whose parents had died one year ago. Bereavement is a process that takes several years. Consequently, children should have access to ongoing emotional support, not just at the time of their parent's death. Also, most emotional support is given after the death of the parents rather than when the parents become critically ill. The distress associated with AIDS starts many years earlier when the child sees the health of the parents begin to decline and this is the time it should be addressed.

Children who are grieving or have been sexually abused can benefit from appropriate emotional support, rather than counseling. Counseling suggests a more specialized service that only people with a certain level of education can do. Family members need appropriate emotional support and understanding from those around them. They need opportunities to say what they feel, what they think about what has happened, and what they are worried about. Children and families need someone who knows how to listen and provide appropriate support.

Recommendation: The issues of grief and sexual abuse are so pervasive among children that STRIVE partners need to make training a high priority and urgently need to train relatives, teachers, pastors, and other community members in ways to help grieving or sexually abused children, such as the use of support groups and memory books/ boxes.

Gaps in Beneficiaries of Services

There are several groups of children that are receiving fewer services than others. These are the children who are beyond community care – especially those in children’s homes, street kids, children with AIDS and those living in infected families, and child-headed households that lack family and community support. Children in child headed households have special needs that all partners should address. These psychological and social needs are the loss of childhood, the absence of peer group contact because the child is busy taking care of their siblings, the lack of parenting skills, and the lack of hope for a future life (marriage, career, etc.). Importantly, an essential group that is often overlooked is those who care for children (guardians, volunteers).

Recommendation: Though Home Based Care programs offered by some of the partners have begun providing services to children with AIDS and those living in infected families, the strategy and delivery of services require further thought. The quality of staff is uneven across various communities. HBC staff from various partners and communities need to come together to develop a strategic plan for staff training and service implementation. HOSPAZ, the hospice association of Zimbabwe, can provide assistance. From an operations research perspective, if the implementation of service is not of high quality, it will be difficult to ascertain whether the intervention is useful.

Recommendation: Partners should provide support groups for those taking care of children (guardians, grandparents, child heads, etc.). Guardians who are HIV+ would benefit from their own group. The goal is for the community to take over the groups once they are established.

There is a lack of meaningful participation of children in most current planning and implementation activities being carried out by STRIVE partners. Consequently, there is a need to help STRIVE partners to learn how to promote worthwhile child participation in the stages of community needs analysis, planning, implementation and evaluation of services. Children and youth should be seen as a resource, not just as beneficiaries.

Recommendation: For partners, strengthen child participation as a strategy for PSS. When children lose a sense of control over their lives and a corresponding sense of worth, child participation gives some sense of control and hope for the future. Child participation can be linked to HIV prevention (a confident child with a positive vision of his/her future will not

engage in self destructive behavior), child development (children learn to master situations), and program development (helping to plan, participating in implementation and providing programmatic feedback to adults). Examples of child participation activities currently being conducted are the Speak Out Workshops and Children's Galas.

Children in the communities consistently rejected the idea of being referred to as "CABA" or "OVC". They simply wanted to be called "children". As a result of being labeled as "CABA" or "OVC" by STRIVE partners and the community, children felt stigmatized and consequently more alienated.

Recommendation: CRS/USAID/STRIVE should not refer to human beings as CABA or OVC in writing or verbally. Have Speak Out Workshops where children can speak about how they feel. Emphasis should be made on integrating these children into the community through sports, church, and school related activities. If this is not done, these children will be further alienated by becoming a distinct, well funded, group.

Recommendation: Currently, there is a need for an integrated service plan for all STRIVE partners. Few STRIVE partners have a PSS strategy that offers services to support the child's resilience throughout their lifespan. This can be accomplished by addressing the changing psychosocial needs of children as they develop (the psychological and social needs of a six year old are different than those of a sixteen year old) and by the distribution of these services across key aspects of their life (e.g. home, school). Continuity of care is important for CRS/STRIVE, its partners, and the community. Psychological distress related to HIV/AIDS begins a long time before a child is orphaned and bereavement issues continue for a long time after the child is orphaned. There needs to be the development of an integrated services plan. If comprehensive services are not provided for children, it is easier for them to slip through the cracks of support services and to become victimized and traumatized, to the extent that the positive effects of prior services will be undone.

DEVELOPMENTAL STAGES OF CHILDREN

What follows are some concepts and tools which partners and communities can use to understand how certain life events affect children and what needs to be done so that children can continue on the best possible path towards adulthood.

Erik Erikson outlines six psychosocial stages of development from birth to adulthood. It is a useful model of development because the stages are cross-cultural, having been based on research carried out among a number of diverse cultures internationally. In each stage, the item on the left side of each stage is what we are aspiring to have our children obtain. The community is trying to create appropriate conditions so that a child will emerge into adulthood with trust, autonomy, initiative, industry, a solid sense of identity, and the capacity for intimacy.

Figure Two: Erik Erikson’s Psychosocial Stages of Development

Age	Stage
0-1 years	TRUST VS. MISTRUST
1-3 years	AUTONOMY VS. SELF-DOUBT
3-5 years	INITIATIVE VS. GUILT
5-12 years	INDUSTRY VS. INFERIORITY
12-18 years	IDENTITY VS. ROLE CONFUSION
18-25 years	INTIMACY VS. ISOLATION

Superimposed upon these stages is a series of events likely to happen to a child who becomes orphaned in Zimbabwe. The challenge for STRIVE’s partners and communities is to develop a series of interventions that will lessen the impact of these events and allow the child to progress and develop through the psychosocial stages.

Figure Three:

A Time Line of Possible Events for A First-Born Child Who Becomes Orphaned

A	B			C	D	E		F
Birth	3	6	9	12	15			18 years

KEY TO EVENTS:

- A = Death of one parent
- B= Death of a sibling
- C= Death of second parent
- D = No school fees, child leaves school
- E= Parent of a child headed household
- F= Sexual abuse of the child

Figure Four: The Event, The Psychosocial Stage, and the Services Required

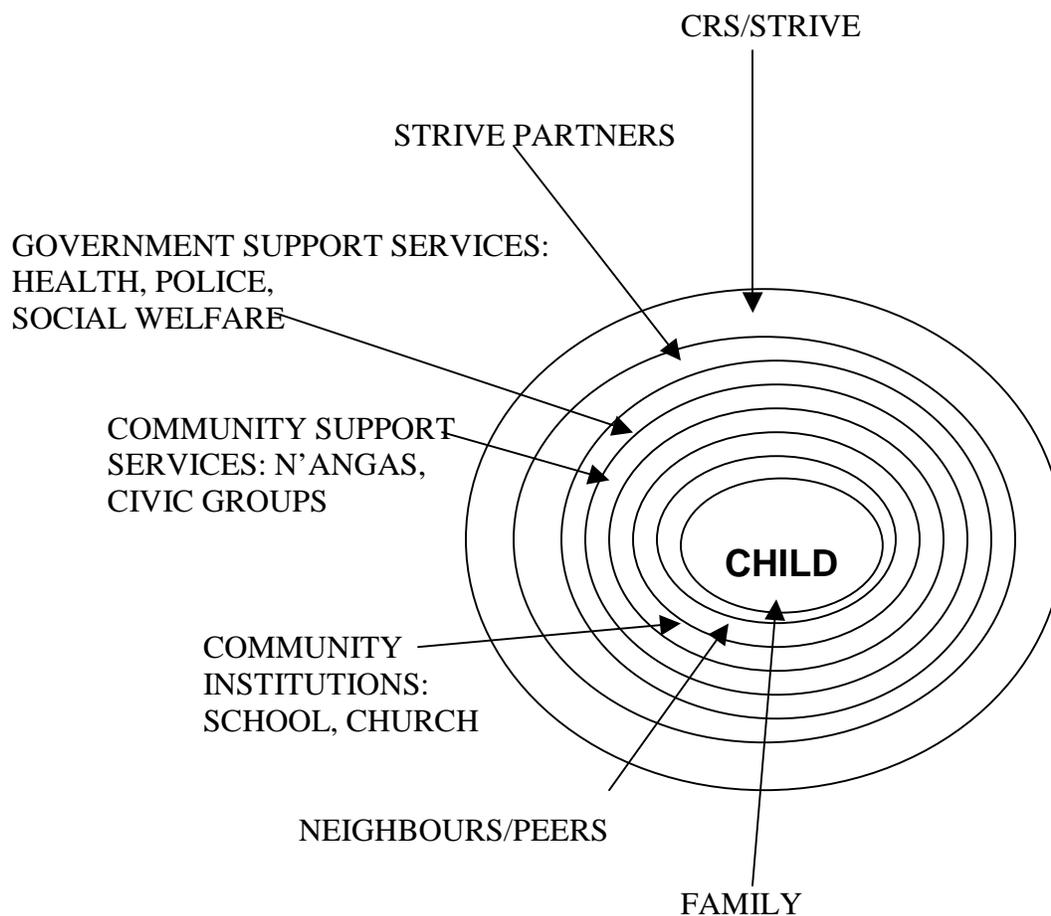
The Event	The Stage	Services Required
Death of the father	Trust	Bereavement support for the family, income generating program for the mother
Death of a sibling	Autonomy	PSS at ECEC , bereavement support for the family
Death of the mother	Identity	Counseling by teacher, HBC counseling for CHH family, life skills, income generation.

The Event	The Stage	Services Required
No school fees. Ejection from school.	Identity	Provide school fees and childcare, recreational opportunity for family, Kids Club
Becomes parent of a CHH	Identity	Teen parenting class, support group for CHH.
Sexual abuse	Intimacy	Referral to specialist for counseling, medical follow-up, peer support group.

This type of plan allows STRIVE and the partner organizations to plan and deliver services that will support the child until maturity and also support them in a variety of different settings, such as home and school.

SAFETY NETS

Figure Five: Safety Nets



In the present operating environment family and community safety nets can be strained to the breaking point. However there are many overt and covert safety nets that exist in a child's life. The use of both overt and covert safety nets needs to be maximized to ensure the positive psychological growth of the child. For example, one child described how Youth Alive meetings provided by her church were her psychological anchor during the difficult period when she lost both her parents in three years. Each of these levels is a potential safety net for the child. For example, traditional healers who are frequently used for curative purposes for AIDS and opportunistic infections could be offered training in counseling skills. The beleaguered government system can still provide important supports through police, teachers, local clinic services, social and health workers, and others.

Recommendation: For the partners, an important psychosocial support intervention should be to strengthen family, community, and governmental safety nets (see figure five above). This will allow communities to utilize existing structures of support at little or no cost. For example, peer groups are an important support in a child's life so use Kids Clubs to build solidarity among vulnerable children.

Recommendation: STRIVE should arrange technical support and training for its partners to enable them to apply these tools (psychosocial stages and services required, safety nets) in their program and develop appropriate skills among key people in the community.

PROVIDING PSYCHOSOCIAL SUPPORT SERVICES IN THE PRESENT OPERATING ENVIRONMENT

Because of rapid turnover of staff, displacement or death of community members, economic hardship and starvation, it is important that information be disseminated rapidly and to groups of people, so that if one person departs the others will have sufficient information to continue the work. The use of small groups of people who, if their membership falls too low, can be consolidated into other groups providing the same services might be one approach to respond to the attrition of volunteers.

In providing services, it is important to train individuals who are stable and have less chance of migration to urban centers or other areas. These would include the traditional leadership, traditional healers, guardians, senior teachers, grandparents, youth, nurses and police who live in the community. Another consideration is to find people who possess the appropriate personal skills but not the formal education that would make them more likely to be hired to work elsewhere.

Capacity building is of significant importance in this operating environment. There needs to be increased transfer of information and skills between partners as well as the horizontal transfer of knowledge and skills between and within community groups. If people are not being paid at least they can learn skills that might help them in the future. Be careful not to overstretch the volunteer network; be clear what is each person's limit.

The objective of psychosocial support is to produce children who can succeed in life. It is important to build upon resources that are available in the community to help achieve this. This may include teachers, grandparents, and youth. Partners can try using high cost services in some communities and low cost services in others and then assess the results and potential for scaling up different approaches.

There are ways in which many children can be reached. Schools and churches are an example. Train teachers in how to conduct a therapeutic classroom where they can put down their books and address the immediate needs of children. For example, in a class where students cannot pay attention because several of them have lost family members in the last month, the teacher can conduct a class on the topic of bereavement. The classroom should not ignore life but embrace it so that the children can learn and be strengthened by openly discussing issues that affect all of them.

Recommendation: To improve the impact of services, involve the community in formulating relevant activities to respond to psychosocial issues and have the partner and community assess the capacity (knowledge, manpower) and context (social, political, cultural) of the community to benefit from these activities.

Recommendation: Service impact can be further strengthened by improving referral networks with government agencies, improving transfer of skills between partners and within community groups, and to network best practices between the P8 and S8. For example, provide opportunities for information sharing within and between community groups. Have a morning each week where volunteers teach one another or bring in a more knowledgeable person.

In this operating environment, partners and communities face the challenge of how to generate hope and a sense of capacity in the face of enormous needs? What are some of the small or inexpensive interventions that make a difference? A beneficiary of CADEC assistance describes her experience: “Now that I have a uniform I feel that I belong, that I am like other children.” Her teacher informed the review team that she went from 25th to 2nd in class after receiving the uniform. A leader of a Village Action Committee spoke of the increasing number of orphans appearing on his doorstep and his fears that the community would soon run out of resources, leaving him unable to help them. I asked how if he ran out of resources he could still make a positive change in the lives of these children? He thought for a while and replied, “I could be nice to them and I could give them hope.” There are several studies that report that providing children with a caring environment provides them with a significant part of the support and security they need to live in a difficult environment.

Recommendation: Effective interventions do not have to be complicated or expensive. Have communities discuss “what can you do that would make a difference in the life of your children?” Three areas that benefit children immensely and that are simple and inexpensive to implement are social integration (e.g. taking a child to church or social clubs,; including a child in sports or cultural activities), giving children an opportunity to play, and listening to children (guardian to child; peer to peer). Partners can discuss these options with the community.

Recommendation: To streamline the delivery of services to as many children as possible, extend the provision of care and counseling services into schools. Build the capacity of teachers to provide social and emotional support to students. Encourage peer discussion groups on relevant topics (e.g. reproductive health, sex abuse, grief). Develop therapeutic classrooms where teachers can put down their books and stimulate discussion on topics immediately relevant to the emotional needs of their students in the classroom. Also, utilize faith-based organizations (FBO) for this purpose to target children who may not receive services in their school.

Recommendation: Research should be carried out by the partners to determine which community structures are viable for service delivery. Creating parallel structures – community care committees-may exhaust community resources. A quote from a workshop in Zambia on community mobilization may apply here: “There is a finite reserve of hope and energy in community based structures. Each failure causes attrition.”

OPERATIONS RESEARCH AND THE SEARCH FOR INDICATORS

There are several key questions for operations research to focus upon in the area of psychosocial support:

- What are the positive changes in the child’s behavior observed since the intervention began?
- Which interventions maximize the positive characteristics (e.g. child speaks to someone they trust; child plays with peers rather than withdraws) of the child to cope with multiple risk factors in their environment?
- Which interventions utilize the safety nets in which the child functions (see figure five above) and what are the changes observed in the child’s life since the intervention began? - What effect has the change in the child had upon those who interact with the child (teachers, caregivers, etc.)?

The final objective of STRIVE’s psychosocial component should be that the child is better able to respond (coping) to multiple risk factors (vulnerability) and to continue their holistic (social, physical, emotional, physical, and spiritual) development (resilience). Key respondents when assessing the effectiveness of any psychosocial support intervention would be the child, the teacher, peers, the guardian and those who interact on a regular basis with the child (e.g. those who are part of the child’s safety nets).

Following below are some possible indicators of adequate coping collected from the community and current literature. This is a representative list only, and by no means exhaustive. Indicators have been taken from the following references: *Basic Indicators for Psychosocial Support for Children Affected by AIDS* (REPSSI); *UNAIDS Interagency Technical Consultation on Indicators Development for Children Orphaned and Made Vulnerable by HIV/AIDS* (UNAIDS 2003); and *Expanded Response Guide to Core Indicators for Monitoring and Reporting on HIV/AIDS Programs* (USAID 2002) and Garbarino, J., (1992) *Children in Danger*.

Recommendation: Communities should assist in the search for relevant PSS indicators. They can be asked “what are the characteristics of children about whom you are worried and those about whom they are not worried?”

Figure Six: Sample list of indicators

- attends social clubs (modeling club, etc.)
- attends church regularly
- plays on a sports team
- attends a support group (kids clubs, etc.)
- increased play with other children
- when upset child talks to someone they trust
- frequent or regular involvement in any activity (social, sports)
- positive relationships with others/ the child is liked or admired in some way (based on interviews with teachers, guardians, peers)
- attracts a high degree of care or warmth from caregivers
- no criminal record
- no abuse of illegal substances
- able to solve problems: takes active stance rather than withdrawal when faced with adversity
- child talks about upsetting, frightening, or angering experiences or shows them through play
- able to ask for help when needed
- the child smiles and laughs during the interview
- clothing is without tears (in CHH suggests life skills have been learned)
- not sexually active below twelve years of age
- no evidence of depression (depression index/RQC/SRQ)

NOTE: It may be better to create locally appropriate indices of worrisome behavior, rather than using a scale standardized in another cultural and economic environment]

INTEGRATING PSYCHOSOCIAL SUPPORT INTO THE OTHER IR AREAS

CRS/STRIVE is caught in a dilemma: if PSS doesn't stand alone it will be lost. But if PSS stands alone how will it be integrated into the other IR areas to which it is inextricably bound?

Recommendation: PSS should stand alone as an IR area, but intensive workshops should be held with all STRIVE staff to explore how PSS is integrally a part of the other IR areas. PSS activities should clearly delineate overlaps and collaboration with other IR areas.

The objective is to provide a holistic response to children's needs through community involvement. Psychosocial support attempts to touch upon all aspects of the child's life through diverse interventions so that the child can grow up to have fulfilling social relationships, contribute to the community, and feel positive and confident about their ability to cope with difficult circumstances.

ANNEX 6 FOOD SECURITY

By Peter McDermott

Background

In December 2002, the SADC Food, Agriculture and Natural Resources Vulnerability Assessment Committee concluded that the number of Zimbabweans in need of food assistance was nearly 7.2 million people, an additional 480,000 people since the last assessment conducted in August 2002. The assessment also revealed that there is a marked discrepancy between national import levels and availability of cereals at the community level.

The Famine Early Warning Systems Network's February 24, 2003 Food Security Emergency report on Zimbabwe stated that food insecurity is expected to worsen given that the 2002/2003 grain harvest could be as much as 20 percent below 2002's poor performance. In addition, deteriorating economic conditions, cattle deaths in Matebeleland South Province, and the outbreak of armyworms in parts of the country, have further exacerbated conditions. Zimbabweans in more than two-thirds of the districts are expected to experience either moderate or extreme food insecurity during 2003/2004.

The current drought/food crisis in Zimbabwe has once again brought to the fore the question of the role, utility and effectiveness of food security and food relief interventions. A major dynamic of the current crisis is the inter-relationship between food insecurity, household vulnerability due to the HIV/AIDS and the impact on orphans and other vulnerable children.

There is clearly a significant interrelationship between HIV/AIDS and food insecurity. However the interrelationship is poorly understood. The impact of HIV/AIDS epidemic exposes individuals and communities to, and lowers the threshold at which, additional shocks such as a complex food crisis and an increase in child vulnerability can be absorbed or tolerated particularly by vulnerable communities. Characterized as a bi-directional relationship, HIV/AIDS impacts directly on the social and economic capacities of households and communities while, at the same time, socio-economic changes can directly effect negatively or positively the spread of HIV/AIDS.

An understanding of the interrelationship between HIV/AIDS and food security in Zimbabwe is crucial for any effective response to the current crises, the longer term recovery strategy and the national response to the orphan and vulnerable child crisis in the country.

There is growing concern that the response to the food crisis has taken precedence over rigorous analysis of the inter-relationship between food and nutritional deprivation and HIV/AIDS vulnerability, particularly as they relate to orphans and vulnerable children. The latest vulnerability assessment surveys incorporate HIV/AIDS in a more direct and explicit manner, but it is not clear how the information gathered informs CRS/STRIVE priorities, policies, and targeting. Nor is it clear how the food and nutrition information collected at district level by the

national authorities, United Nations, NGOs and others is informing STRIVE's baseline data and program implementation.

The May 7, 2003 SADC "Impact of HIV/AIDS on Food Security" report clearly identifies many of the threats to vulnerable households in Zimbabwe, detailing the increased vulnerability by age of household head, the impact of chronic illness, as well as the impact of caring for orphans and vulnerable children on consumption, food production and other outcomes. This report, along with the provincial and district vulnerability analyses undertaken by the national food and nutrition committee, should be used to update the STRIVE baseline.

STRIVE objectives, intermediate results, baseline, key results and activities

The intermediate result for food security (IR 2) is "food security interventions piloted." This result is measured by the number of interventions piloted and the number of (vulnerable?) children benefiting. The supporting activities are:

- IR – 2.1: Availability of food to CABA increased
- IR – 2.2: Access to food for CABA increased
- IR – 2.3: Nutritional status of CABA improved

In the September 2002 "Agricultural Strategy" paper, a fourth CRS/STRIVE project objective is listed: "to ensure food security among the affected and targeted people and communities". It is not clear whether or not this is a formal additional objective to the three objectives set out in the main project documents. The "Agricultural Strategy" paper also expands significantly STRIVE's agriculture-focused activities to include the promotion of drought tolerant crops; the development and promotion of agricultural production techniques/technologies to reduce labor; and activities to increase yields, improve soil structure, conserve soil and identify crops high in minerals and vitamins. Though of enormous value in strengthening household food production and strengthening drought recovery, these activities expand the focus of STRIVE's orphans and vulnerable children project significantly beyond those that may be permissible under the child survival guidelines for the use of funds for HIV/AIDS.

Other strategies put forward in the paper include the provision of food to schools and for children under five.

Baseline data

The baseline data for food security is less than comprehensive. The baseline looks at access through meals per day and light chews, anthropometric measurements, and self reported adequacy of food by children. There is a need to supplement the baseline with other available information from other existing sources within Zimbabwe

Access to food: Overall the findings show no major or significant results, as measured through meals per day. Most children, regardless of their status, had two meals a day. Secondly, large numbers of both vulnerable children and non-vulnerable children reported having three meals a day, with smaller numbers having one meal a day. There was no difference between the two

groups when it came to light chews. There was a significant difference on self reporting on adequacy of food, with 23 percent of vulnerable children reporting they had adequate food, and 50 percent of non-vulnerable children reporting so.

Anthropometric measurements: The anthropometric measures do not show high levels of malnutrition, either height for age or weight for height.

Source and storage of food: There is minimal difference between vulnerable and non-vulnerable child households regarding their source of food. The findings regarding the storage of food were mixed across districts, and between vulnerable child and non-vulnerable child households.

Discussion

There is no doubt that the current political, economic, food and HIV/AIDS crises in Zimbabwe are having a significant negative impact on children, families and communities. While it is recognized that CRS/STRIVE has an important role to play in assisting vulnerable children and strengthening community responses, this does not mean that STRIVE should fall into the trap of undertaking direct implementation actions itself, in particular in the area of food security. Nor should STRIVE assume food security roles and responsibilities for which it may not have the experience or expertise, or in areas where there are other partners within Zimbabwe that have a greater comparative advantage.

The relevance and appropriateness of undertaking food security pilot activities that may fail, due to inexperience, poor planning or poor implementation, in the current environment is questionable at best. STRIVE should reexamine its pilot activities and determine if they are essential actions that are likely to provide either direct and immediate benefits to households looking after vulnerable children or measurable benefits to vulnerable children themselves within the lifespan of the project.

STRIVE should seek to reposition itself further as an intermediary agency between other NGOs in Zimbabwe with food security and food distribution experience and its P8 and S8 partners. STRIVE should review and update its strategic program plan and food security strategy to reflect these recommendations

Interventions should only be promoted where there is evidence to support their introduction. There is a common assumption that all districts in which STRIVE sub-grantees carry out activities are food insecure and that all children, in particular vulnerable children, are in need of food assistance. The evidence, including that from recent vulnerability and nutrition surveys as well as STRIVE's own baseline data, does not fully support this. Nor is there evidence that supports the planning assumption that more vulnerable children, including orphans, are dropping out of school than non-vulnerable children because of hunger.

Given the food crisis, there is an urgent need to strengthen nutrition surveillance and growth monitoring as well as develop methods of ascertaining the nutritional status of non-school-attending children in STRIVE sub-grantee districts.

Recommendations

- 5.1 STRIVE should reconsider its role in food security, reexamine its pilot activities and amend the intermediate results and indicators accordingly. It should concentrate its activities in two areas: operations research and nutrition outcomes for vulnerable children. STRIVE should strategically move back from assuming a direct implementation role and move further towards a facilitation role. For instance, STRIVE should seek to ensure that nutrition, food relief distribution and food security services are provided to its partners but it should not assume the responsibility of providing all these services directly itself.

The Strive Director and Food Security Officer should (in full consultation with USAID), review its food security activities focusing on operations research and strengthening nutritional outcomes for vulnerable children. The intermediate results and indicators should be amended, a new work plan developed and partners informed. These actions should be completed by the end of August 2003.

- 5.2 STRIVE should review and reformulate its strategy and operational research agenda for food security, focusing more intensively on nutritional outcomes for vulnerable children and reducing disparity between vulnerable and non-vulnerable households and children.

The STRIVE Director, Food Security Officer and the Operations Research Advisor should review the current food security strategy and research agenda and refocus it more on nutritional outcomes for vulnerable children. This should be completed by end July 2003.

- 5.3 STRIVE should strengthen its partnerships with others more experienced in nutrition, food security and food distribution activities in Zimbabwe. STRIVE should strengthen its facilitation role, acting as an intermediary to ensure that these partners undertake nutrition, food security and food distribution activities in STRIVE sub-grantee districts, where appropriate.

The Strive Food Security Officer should identify potential partners. A list of partners, and letters/memorandum of understanding between them and STRIVE detailing areas of assistance should be completed by end July 2003.

- 5.4 The provision of food assistance to children attending schools has been shown to be valuable in increasing enrollment and attendance. STRIVE should prepare a specific strategy for school feeding focusing on the criteria for its provision, the criteria for its closure, the costs and benefits of such a program, evidence for its provision, targeting criteria and how the STRIVE program would complement and fit within the national emergency program.

The STRIVE Director and Food Security Officer should hold discussions with the national education and emergency food authorities to seek agreement on the desirability and appropriateness of expanding the school feeding program in STRIVE-assisted partner

districts. STRIVE should supplement its baseline data from other available sources to determine the needs and identify most vulnerable groups. This should be done within the next three months, by the end of August 2003.

- 5.5 STRIVE should reexamine its staffing and organizational management structures in light of the above changes and provide a new outline of the new roles and responsibilities of the staff and the Food Security Unit. STRIVE should reconsider renaming its food security unit to reflect its increased focus on nutrition outcomes for vulnerable children. STRIVE should also review the linkages between its food security activities and the activities undertaken under the economic strengthening.

Following the above discussion, the a revised organizational chart, job descriptions, key results plan and work plan for the period through May 2004 should be completed. This action should take place by end of August 2003 and be shared with USAID and STRIVE sub-grantees.

- 5.6 The STRIVE Director, Food Security Officer and the Operations Research Advisor should convene a meeting with both its P8 and S8 partners to inform them of the new STRIVE food and nutrition strategy and discuss its implications.
- 5.7 STRIVE should work more closely with the national food and nutrition commission, the United Nations humanitarian response unit and United Nations agencies such as World Food Programme to compile food and nutrition data to supplement the STRIVE baseline data. STRIVE should also negotiate with these same organizations and units to ensure that food security and food relief are provided in partner districts which fulfill the criteria for such assistance.
- 5.8 The STRIVE Food Security Officer should liaise closely with World Food Programme and other United Nations agencies and entities to obtain nutrition and vulnerability data to supplement its baseline. This should be an ongoing activity, and the baseline should be updated on a periodic basis.

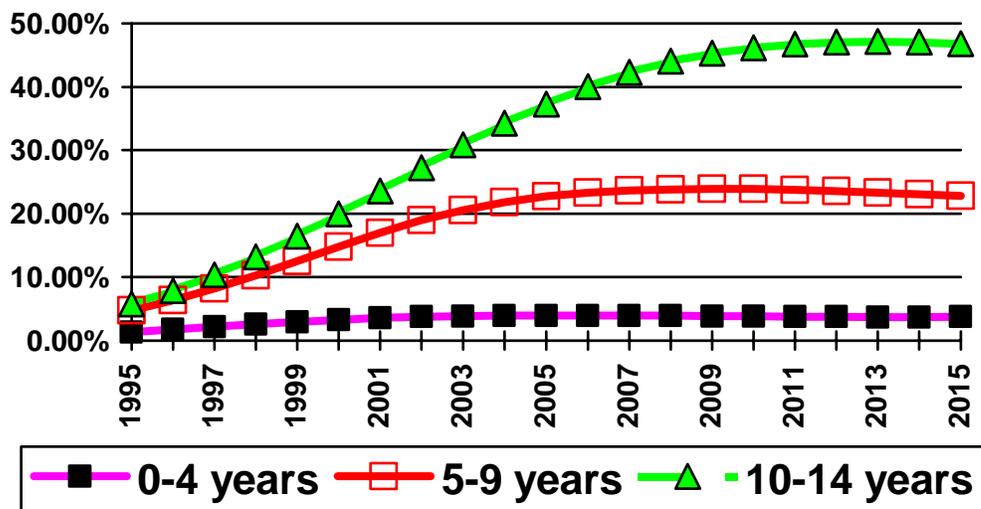
ANNEX 7 EDUCATION ASSISTANCE PROGRAMME

By Carol Coombe

I. CONTEXT

It has been estimated that there are now 1 million orphans in Zimbabwe, largely concentrated in school-going ages (HEAT). 23% of those 10-14 are already maternal orphans, and this proportion is expected to rise to 50% by the end of the decade.

Figure 1 : Projected percentage of children orphaned by AIDS by age group³⁵



Zimbabwe, like other countries in the region, hoped to stem the tide of rising HIV prevalence through life skills programmes in primary and secondary schools, but a recent survey indicated limited sensitisation of educators, and generally low levels of awareness of basic facts about HIV/AIDS and associated sexually transmitted infections among both educators and learners (HEAT).

A recent review of the impact of HIV/AIDS on the education sector in Zimbabwe has highlighted the most pressing concerns about child wellbeing:

Children's Needs. Basic needs of learners (food and clothing, for example) are generally regarded as children's most pressing problems, and underlie many higher-level psychosocial difficulties. Orphanhood is exacerbating pre-existing challenges to education posed by poverty

³⁵ HEAT, p 20.

and other vulnerabilities of children. Schools are evidently not yet responding adequately to the needs of orphans and other children at risk.

Orphaning. The total number of children who will be orphaned by AIDS is projected to rise to over 1.3 million by 2010. The levels of maternal orphanhood in the 10-14 year age group could exceed 40% within the decade, with levels over 20% among 5-9 year olds. A sizeable proportion of the school age population affected by the epidemic already tends to drop out of school, or attend erratically, concentrate poorly, and suffer from emotional and behavioural disturbances.

Enrollments. HIV/AIDS impacts on fertility are expected to slow the growth in the number of children requiring education. This may partly explain the current decline in primary school enrolment, as younger age groups are affected first. A relatively small percentage of children will be ill with HIV/AIDS during their schooling years. HIV/AIDS threatens to worsen pre-existing inequalities in education access and quality, as schools in disadvantaged areas are likely to be the most vulnerable. Some already have a high concentration of orphan scholars.

Prevention. HIV/AIDS prevention among pupils and students is a critical determinant of access to, and the quality of education. A third or more of the investment in education will be lost if HIV/AIDS infection rates continue at current levels. Levels of knowledge about HIV/AIDS and behaviour change remain too low – among both educators and learners – to produce anything approaching an AIDS-free generation. Unsupported orphans and vulnerable children, particularly girls, are at high risk of HIV infection.

II. EDUCATION ASSISTANCE PROGRAMME ACHIEVEMENTS

Now there is no other way but just to help each other.
Chairman of the Board, Batsiranai.

CRS/STRIVE's education programmes have been designed to 'increase the access to quality education for children affected by AIDS, with a special focus on girls'.³⁶ The focus of subgrantee interventions has shifted, like other STRIVE programmes, away from AIDS-affected children, towards all those broadly at risk, although at least one sub-grantee targets only AIDS-affected children while another specifically includes children born 'out of wedlock'.

Education assistance funds are used principally for improving the quality of local education provision: getting more children into school, especially girls; providing books, furniture, other consumables and minor repairs to partner schools. The principal direct benefit is to children at risk whose school-related costs (fees, levies, uniforms, examination fees for the most part) are subsidised or completely assumed by STRIVE partners.

The Archdiocese of Bulawayo, for example, reports that in nine wards it subsidises 1,138 children at primary school and another 912 in secondary school (more girls than boys) each term. CADEC, in five sub-parishes of Murombedzi, reports single-year subsidies were given to 493

³⁶ CRS/STRIVE, *Education Assistance Implementation Strategy*, February 2003

pupils (70% girls) in six primary schools, and 173 students (54% girls) in three secondary schools out of an estimated enumerated total of 3,167 vulnerable children in eight sub-parishes. RUDO/STRIVE in three wards of Gutu provides fee support for 355 primary pupils (64% girls) and 150 secondary students (53% girls); uniforms for 545 learners (50% girls). Resource exchanges will provide further subsidies for at least 500 more children at both levels. The period of subsidy is not known.

Education subsidies started in earnest early in 2003. Consolidated and accurate reports are not yet available on the extent of the education assistance programme in all subgrantees: expenditure on fees, levies, uniforms, resource exchanges for direct assistance and block grants; periods for which subsidy is available to children; and the numbers of children benefiting, except for Tsungirirai (Norton) which subsidises education costs (using various budgets) for 423 pupils and students (uniforms for 333), providing a 'quality' education at an estimated unit cost of USD46 per year guaranteed for the full cycle.

It is only possible to say at this early point that the enrolment of children at risk in primary and secondary partner schools seems to be rising, at least for the current financial year. Subgrantees have been creative in subsidising children: resources like furniture and textbooks are exchanged for guaranteed enrolment of numbers of children either for one year or to the end of the learning cycle. The concept of resource exchange has the potential to improve the quality of education for all scholars in partner schools who benefit from the new resources.

CRS/STRIVE has provided capacity building for subgrantees in the form of clinics and workshops, and draft guidelines on selection of children and schools, establishment of education assistance committees, and types of support, for example. Subgrantees have established – with varying degrees of success – Education Assistance Committees tasked with selection and monitoring of assisted children. Six more subgrantees with education support capacity have been selected, and will enhance STRIVE's education support. Subgrantee reports suggest that girls' interests have been well catered for.

Finally, there have been proposals that CRS/STRIVE should be more closely allied to Government's BEAM (Basic Education Assistance Module) programme. MOESC launched the Basic Education Assistance Module (BEAM) in 2001 to respond to the needs of pupils and students. The programme aims principally to pay levies and other explicitly school-related expenses of orphans and other vulnerable children. In general, BEAM seems to be effective in meeting key needs of affected learners in many schools, despite some 'teething problems'. Challenges to the greater success of BEAM have been identified by a recent review of its operations (HEAT): varying levels of implementation between districts and regions; inefficient procedures for selecting candidates and disbursing assistance; lack of sensitivity to levels of need in various districts and schools and to crises among children between annual selections; lack of transparent selection criteria and review mechanisms; limited benefits for secondary and special needs learners; failure to take account of boarding costs; limited or no coverage of priority needs of vulnerable children (food, clothing, accommodation, particularly with end of Social Dimensions Fund support); lack of clarity as to whether girls' needs are adequately covered.

STRIVE is well placed, during its pilot phase, and working in parallel to BEAM, to take account of such difficulties, and propose solutions for common problems. It is in fact already doing this.

III. CHALLENGES TO SUCCESS

Local Conditions

The exigencies of local conditions inhibit school attendance even where subsidies are provided:

Buhera is the poorest district in Manicaland with 91% poor/very poor. STRIVE interventions do help in alleviating poverty [but] people are more interested in drought relief programmes than HIV/AIDS. Volunteer motivation is at an all time low because of this drought. (Batsiranai STRIVE).

At CADEC/STRIVE (Chinhoyi/Murombedzi), it is reported that increasing numbers of children at risk are being identified and are in need of assistance. Because of hunger and the drought, some assisted children cannot attend school regularly. (It may be that some children are being registered who would not have been in school under most circumstances, and who would drop out sooner or later, as has been the case in Malawi following the move to universal free primary education.)

Planning and Budgeting

The Education Assistance Project Implementation Strategy (CRS/STRIVE, February 2003) provides no guidance as to which levels of education should be prioritised. Unless special directions have been given locally (Murombedzi's District Education Officer suggested all subsidies be provided at secondary level), nothing except age prevents children from selection for support at primary, secondary or higher education level. (In fact however, Gutu reports stress among students who have good matriculation results but have no access to resources for higher education.)

Within subgrantee budgets, numbers benefiting from subsidies could be improved if children were chosen for primary enrolment where the fee/levy plus uniform cost is approximately USD12.50, as opposed to USD24.00 for secondary students.³⁷ Under current circumstances, this might be an appropriate decision for communities to make but would unduly disadvantage secondary school students who would benefit from higher-level skills required in future by Zimbabwe's economy.

³⁷ Primary school fees are mandatory in urban areas, bringing total school enrolment cost for a child in Bulawayo for example, to Z\$2,000 per year, or approximately USD1.50. Primary uniforms are about USD3 and shoes USD8. At secondary schools, fees are USD4 per year, uniforms under USD8 and shoes USD12 – beyond the reach of many parents and guardians. Some committees have requested subsidies for two sets of uniforms on the grounds that this may be the only clothing owned by the child. On the other hand, were uniform requirements abolished by school development committees, tennis shoes and a dress or shirt and shorts would be vastly more economical for primary school children at least.

As the STRIVE system settles down and the next intake is selected, communities will need to decide, within the funds available to them:

1. levels at which to allocate subsidies;
2. whether to allocate funds for fees and levies only, for fees and uniforms, for uniforms only, for resource exchanges with or without uniforms; and
3. whether to subsidise one child for one year, or one child to completion of the primary or secondary cycle (through resource exchange agreements beyond the term of STRIVE's project cycle).³⁸

It is not possible to know the current proportion of funds allocated by STRIVE to primary and secondary education, nor is it possible to make a recommendation on this: communities, sometimes in consultation with government officials will need to make the ultimate decision. While uniforms are required – they are usually mandated by school development committees – it is clear that they should be abolished. Children who need them could be provided with basic clothing requirements and tennis shoes.

CRS/STRIVE will need to determine whether in fact it should encourage subgrantee partners to concentrate resources in so-called 'hotspots': areas of concentrated misery including drought, hunger, poverty and HIV prevalence, where children are particularly at risk.

The requirement that 90% of subsidised children be those affected by AIDS³⁹ seems to have been abandoned already in favour of a broader definition of children at risk and susceptible to infection because of their circumstances.

Financial Arrangements

Reported delays in disbursement by CRS/STRIVE may constrain timeous enrolment of large numbers of children.

The fact that adjustments in subgrantee Z\$ budgets have not been made against their USD value has in effect substantially cut the spending allocations of all subgrantees. This has the potential to cripple their anticipated support to children at risk, with clear implications for the usefulness of this pilot project.⁴⁰ If subgrantees are to be allocated in practice one half or less of their budget allocations in dollar terms, their success cannot be measured against the project's selected indicators, or their anticipated numerical targets.

Why subgrantees (in the P8 group) are underspending needs analysis and correction.

³⁸ Long-term subsidy, although efficient in other circumstances, is not recommended because of the impossibility of anticipating where or in what condition the child will be over the agreed term, the lack of guarantee to child or school as of December 2004, and inability to monitor long-term support.

³⁹ CRS/STRIVE, *Education Assistance Project Implementation Strategy*, February 2003, p 8.

⁴⁰ It is reported that P8 subgrantees are substantially underspending, but that S8s have had a fast start-up. If P8 subgrantees improve their management, and S8s continue to fast-track, the matter of underspending will be resolved and the calculation of budgets against the USD will be a substantial issue.

Recommendation: Regular and transparent calculation of USD budget equivalents during this period of hyperinflation, and rapid transfer of funds to subgrantees against disbursements are required to get and keep children in school, to get and retain qualified staff, and to ensure that subgrantees have some chance of meeting their targets. [this is a matter for finance to sort out]

Schools have been instructed by GOZ not to exclude children who cannot pay, but these regulations are not enforced (HEAT, Education Act 1996, et al). A strong argument can be made that Zimbabwe must now grasp the nettle, abolish fees and levies, and open schools to all willing candidates. It did not flinch from moving overnight to universal secondary education more than a decade ago. Analysis will illuminate the implications of such a decision, and put an end to educational ad hocism perpetuated by short-term projects like STRIVE.

Recommendation: Negotiations to abolish fees and levies in the primary education subsector should begin at once, to make it free, compulsory and universal, in keeping with Zimbabwe's commitment to international conventions, and its own Acts and regulations (including the Convention on the Rights of Children, the African Charter on the Rights and Welfare of the Child, and the Education Act.)

In the first instance, this is a matter to be taken up immediately with GOZ and MOESC by national and international community representatives. The cost to government and others of administering scholar support schemes through BEAM, STRIVE, SFCUK and local, national and international NGOs/CBOs/FBOs, and the social and economic cost of not educating all Zimbabwe's children, are likely to be much greater than providing free and universal schooling for all. Direct budget support to GOZ may be required, and financial systems put in place to make this possible.

Management and Staffing

Drought, fuel shortages and general economic decline are inhibiting volunteerism in some areas as preoccupation of potential caregivers and community leaders turns to hunger and the search for food.

Variable management capacity among subgrantees, as well as at CRS/STRIVE, leads to variable competence in enrolling children timeously.

Where there are no education-dedicated personnel at subgrantee level, education assistance programmes depend on allocation of sufficient time by generalist project and field officers. Time-on-task problems are aggravated by delays and difficulties in appointing, retaining and replacing staff (generalist or specialist), and by levels of staff turnover that are not likely to improve during the final stages of this pilot project.

Recommendation: Given prevailing conditions, concentrate education assistance programmes on subsidising pupils and students, with the goal of keeping as many as possible in school, linked with improved nutrition and psycho-social support. Reduce or abort additional planned educational interventions. Agree a creative plan of action in consultation with subgrantees.

CRS/STRIVE needs a revised 18 month plan of action. Education assistance staff can plan, in consultation with subgrantees and communities, to concentrate resources (financial, material and human) on keeping children in school and keeping them alive in the current emergency. Education assistance personnel can work closely with psychosocial support and nutrition/food security staff to link their programmes for greater effect in the coming school year (see below). Linked programmes should attempt to meet the educational, material, psychosocial and nutritional needs of individual children.

Recommendation: Streamline education assistance programmes with regard to transparent selection of candidates, transfer of resources from CRS/STRIVE to subgrantees and from subgrantees to partner schools, and planning and management at both CRS/STRIVE and subgrantee levels by improving staff capacity throughout STRIVE.

Education personnel can, now that most subgrantee generalist staff are in place, ensure that systems – selection of candidates, transfer of resources, planning and management – are as efficient as possible for the coming school year. An improved and extended capacity building programme can make this possible. If this is not done, inefficiencies will continue, as will community distress with regard to their perception of STRIVE’s shortcomings: this is a very visible programme in many struggling communities and must be transparent and effective.

Recommendation: Improve education assistance delivery by (1) increasing the number of education-dedicated staff at subgrantee level where appropriate; and (2) improving the skills of education staff at CRS/STRIVE headquarters and sub-offices, and in subgrantees in priority areas, including project planning and management, HIV and education, orphan programming, psychosocial support, and capacity building techniques.

Education assistance is reported to constitute at least 35% of the CRS/STRIVE budget. The programme must demonstrably justify this expenditure, and this will require increasing and upgrading staff at headquarters and subgrantee level. A request for additional education-dedicated field staff has already been made.

The revised plan of action (see above) should include proposals for staff skills building, particularly in substantive areas like HIV and education, what is known about orphaning and vulnerability among children, and care and counselling. All CRS/STRIVE education staff need to be cognisant of these issues, and nurses, doctors, psychologists, researchers and other educators, as well as the USAID-funded Mobile Task Team on the Impact of HIV on Education (based at the University of Natal, with members throughout the SADC region), can train staff appropriately.

Building staff capacity requires techniques that are not currently evident in CRS/STRIVE’s training interventions. A handbook on management and planning capacity building in education has been provided by the mission; it shows how to complement or replace workshops with seminars, technical assistance (short-term expert support), and other expertise from outside CRS/STRIVE to improve staff skills.

Recommendation: Manage education assistance programmes by (1) improving linkages within between CRS and STRIVE, within CRS/STRIVE and between subgrantee and local counterparts; (2) expanding research and information dissemination internally and externally; (3) ensuring OR feedback to education personnel; (4) improving analysis of OR information, and (5) developing a high-quality, professionally edited publications programme including newsletter, training guides, management resource materials inter alia.

CRS/STRIVE is a pilot project, and learning from substantive, delivery and outcome issues is an important factor for managing better. Improved staff skills in planning and management is necessary at headquarters and subgrantee levels, and wherever possible at community level. Improved management must be informed by improved communication throughout the programme – and to others who are interested in its outcomes – through better research and dissemination of findings to the local, national and international community, and a professional publications programme. University and other researchers can be contracted for research purposes, and editorial and publications specialists for editorial purposes. Dissemination would have to be done by CRS/STRIVE in consultation with its contracted editorial staff. Thirty years of evidence suggests that any pilot project that does not disseminate its findings internally and externally is by and large a waste of time and money.

IV. ENHANCING EDUCATION ASSISTANCE

Linked Prevention Programmes

High levels of HIV infection fundamentally challenge the mandate of the education sector. Unless prevention is more effective, over one third of learners will become infected during or soon after their education. Most of these will die of AIDS before they reach the age of 40. This is not only a social and human disaster, but also a waste of investment in education that far exceeds other system inefficiencies. More than any other sector, education has opportunities to influence levels of HIV infection among young people, through its direct contact with them in schools and non-formal education.

MOESC introduced HIV/lifeskills training in schools in 1992, and it became compulsory and formally timetabled from Grade 4 to the end of secondary school in 1993. MOESC has established a secretariat to drive the HIV/AIDS and lifeskills programme. In-service training programmes for teachers, supplemented by workshops for school managers, are ongoing. Ministry initiatives have been complemented by initiatives by development partners such as STRIVE, NGOs and communities, as well as pre-service programmes in teacher training colleges.

Lifeskills are taught extensively, although because it is non-examinable and is not prioritised in practice. Where it is taught, it is apparently taught inadequately given that prevalence among 15-19 year olds is 10% higher than the preceding age group. There are evidently significant gaps in basic learner knowledge: 90% of Form 3 students recently surveyed had been taught about HIV

at school, but 60% needed more knowledge, and 50% got at least one answer on a basic facts questionnaire wrong (HEAT). There are indications that knowledge of sexually transmitted infections among young people is inadequate to protect them against HIV infection by this well-established route. Teachers interviewed admit that they are uncomfortable teaching lifeskills, and talking about HIV and AIDS with students, or even amongst themselves.

Recent focus group discussions with educators showed that many are ignorant about HIV/AIDS, its aetiology and its implications. Less accessible rural areas seem to be particularly problematic because of limited penetration of HIV/AIDS messages. Denial, fatalism and lack of hope, and feelings of inability to manage risk were widespread.

There is significant field evidence in Zimbabwe, and models from other countries (including The Gambia, South Africa and Zambia) that peer health teams can pick up where teachers leave off. Respondents during the mission's interviews consistently promoted the concept that youth are better than teachers and other adults at HIV care, counselling and training techniques.

Recommendation: STRIVE was originally designed to include an HIV prevention component. This must now be initiated and implemented with energy.

Work with partner schools and subsidised scholars to develop a STRIVE HIV/AIDS prevention programme. Train selected teachers (3-4 per school) to achieve broad coverage. Masiye Camp, which is tending towards training leaders, may be of assistance in training educators for CRS/STRIVE.

Identify doctors, nurses and social workers who can provide paraprofessional training for peer health educator teams (preferably composed of subsidised students) who can work in and out of school to help other children and young people to understand the complications of HIV and AIDS (including the aetiology of the disease, helping chronically and terminally ill patients, universal precautions, basic counselling techniques, and the rights of the child). Encourage HIV-trained educators and peer health educators to work together as much as possible. Sensitise headteachers of partner schools.

Linked Nutrition Programmes

Orphans' vulnerabilities cannot, for practical purposes, be separated from those of other children in poverty. In a recent survey, 37% of student respondents reported that they or other children in the household have gone hungry; the proportion was only slightly higher among double orphans. One child reported:

Last month, we went for several nights without food because my parents had to spend money on taking care of my elder brother who is very sick. They had to hire transport to take him to the hospital and buy special foods to stop him from vomiting. They also had to buy a coffin for his baby who died two weeks ago. I am always hungry but I can't complain because there are so many other problems that

must be dealt with first, I cannot trouble my parents; they are doing the best they can (Grade 6 scholar).

Under present circumstances it is not sufficient to provide food supplements only to subsidised scholars, or to so-called ‘CABA children’ who have been enrolled. In hotspot areas particularly, the majority of children will be hungry by November, when May’s generally meagre harvest has been used up, and before new garden crops are consumable. Typical seasonal exigencies have been exacerbated by drought, land reallocations, decimation of the commercial farming sector and the concomitant unemployment of an estimated 600,000 farm workers, and the death of significant numbers of subsistence farmers.

Recommendation: As part of the education programme, establish – or ensure that others have established – food supplement schemes, either wet feeding or dry rations, for all children in partner primary schools in all STRIVE locales, or at least in the hardest hit areas, defined as hotspots where risk is highest.

CRS/STRIVE should as much as possible not engage directly in school feeding, but should attempt to link others in their geographical areas to do so. Only when there is no partner with whom to work should CRS/STRIVE provide wet or dry rations.

Linked Care and Counselling Programmes

STRIVE’s definition of psychosocial support has been opaque, and difficult for CRS/STRIVE officials and subgrantees to operationalise. This review seeks to define practicable understandings of the care, counselling, psychological and social needs of children at risk in an environment characterised by loss, deprivation, grief and silence. It has also considered the socialisation needs of orphans, for whom schooling is only an inadequate substitute for lost parents and communities, their support and their skills.

Constructing a practical meaning for psycho-social support should enable STRIVE partners to find ways of installing some of its elements in its prevention programmes, and in the training of selected educators and peer health educators, to reach as many children and youth as possible, in and out of school.

Recommendation: Supplement enhanced enrolments and nutrition for all primary pupils with an adjusted PSS/care and counselling programme associated with the proposed STRIVE prevention programme. Design such a programme using selected educators and peer health teams.

This proposal is dealt with in more detail in the sections on psychosocial support.

ANNEX 8 ECONOMIC STRENGTHENING

By Petronella Chigara

I. Introduction

CRS/STRIVE's economic strengthening interventions seek to enhance the economic capacities of households and communities to meet the needs of orphans and vulnerable children through community based approaches. The major underlying assumption is that if households' economic activities are strengthened or enhanced, the households and communities will be better prepared to mitigate the effects of increased burdens of children at risk. The household and family (immediate and extended) are the institutions most directly affected by HIV/AIDS and/or orphaning. These are also the primary structures on which children's well being depend. Once a household's or family's resources (social or economic) are depleted, they tend to seek assistance from the community. Thus, strengthening households' economic resources is one way of ensuring that households are better able to deal with the effects of HIV/AIDS. Studies⁴¹ in Uganda and Kenya have indicated that households affected by HIV/AIDS deplete their economic resources and end up disposing of even their productive assets--a situation that results in utter destitution.

According to the CRS Strategic Plan for 2003 – 2008, the basis for economic strengthening is "strong community mobilisation and empowerment." CRS/Zimbabwe recognises that there are several ways to enhance household economic resources, but seeks generally 'low tech' tools that enhance community empowerment rather than "high tech," sophisticated micro-finance interventions. Economic strengthening was designed with two sub components: household economic safety nets and community safety nets. Originally a number of initiatives were supposed to be piloted under each of the two sub-components. However, to date, CRS/STRIVE has only pilot tested one activity under household economic safety nets: the Internal Savings and Lending mechanism (IS&L). The 2002-03 Annual Workplan indicates that other economic strengthening activities (agro marketing, community gardens) were supposed to be piloted by STRIVE's Agriculture and Food Security Unit as food security interventions before being considered as income generating mechanisms.

II. Economic strengthening in the microfinance context

Microfinance in Zimbabwe is generally urban focused, with very few non-governmental organizations operating or reaching out to rural areas. Several constraints hamper institutionalised interventions into rural areas, especially low population densities which affect

⁴¹ *MSA study in Kenya and Uganda — Responding To A Silent Economic Crisis Among Microfinance Clients by Jill Donahue, Kamau Kabbucho and Sylvia Osinde September 2001*
The UWESO Savings and Credit Scheme USCS Uganda a Case study on UWESO by Pelucy Ntambirweki.

volumes and operating costs. Successful microfinance is generally a high volume, low margin business. Thus expansion into low density and shallow economies delays institutional financial sustainability. CRS/Zimbabwe recognises that the microfinance industry in Zimbabwe has not yet developed products suited to communities affected by HIV/AIDS or communities with high numbers of children at risk. The Zimbabwe Association of Microfinance Institutions (ZAMFI) has been working with its members to develop such products or services. CRS/Zimbabwe, through its economic strengthening team, is collaborating with ZAMFI in that respect.

Apart from the HIV/AIDS pandemic, microfinance in Zimbabwe is battling to manage operations in a highly inflationary environment. Experiences from other countries, including Bolivia, indicate that microfinance is a hard currency-based business, a situation that is far from reality in Zimbabwe. For the clients or households, disposable incomes are eroding fast, thus reducing the market for entrepreneurs. Economic transactions are reduced to basic necessities for life, hence only petty trading makes business sense, especially in rural areas. Given the shortages of basic commodities, the high transport costs and high operating costs of doing business for the local market, becoming an entrepreneur in Zimbabwe is becoming more and more challenging. The USAID-funded LEAD project has been investigating the possibilities of microfinance institutions innovating around products that inherently hedge against inflation. Discussions around ensuring that the savings from microfinance clients are invested in non – liquid instruments or assets such as oxen, agricultural equipment or inputs, which can be liquidated when the lumpsum is needed, have been mooted.

Given these odds, it should be noted that the small groups engaged in IS&L have better chances of surviving given:

- the informal nature of the operations where there are no overheads for the group
- the high turnover businesses that the group members are involved in (petty trading)
- the ability of group members to be responsive, flexible and deal in very short term loans.

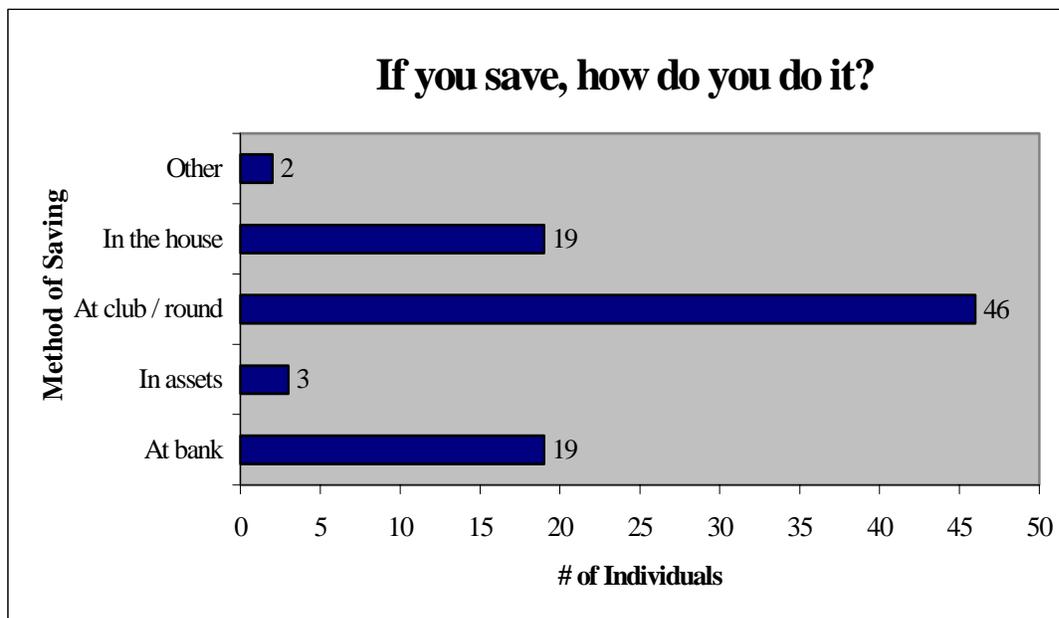
Over the past five years CARE International in Zimbabwe has experimented with a “low tech” microfinance mechanism adapted from CARE’s experiences in Niger. The CARE program, called *Kupfuma Ishungu*, has been implemented in parts of Midlands and Manicaland provinces and recently received funding to expand into other districts of the same provinces. It is basically a rural mechanism that trains groups in mobilising funds and on-lending to group members. The mechanism is a variation of traditional merry-go-rounds. The slight difference is that instead of collecting cash and giving it to one member, the cash collected is lent out to members who pay it back with interest. At the end of a cycle, the members share the end-of-cycle accumulated cash from savings and compounded interest, enabling each member to access lump sums. The lump sum cash payments are timed to coincide with the needs of group members e.g. school opening times or crop seasons. The lump sums, according to a CARE evaluation, have been used to pay school fees, buy agricultural inputs etc.

Some of the groups in *Kupfuma Ishungu* have begun investing their savings into commodities such as sugar, soap and paraffin. These commodities are then sold and members receive larger lump sums. Obviously these initiatives can be widened to include options such as livestock,

agricultural equipment or inputs. CRS/STRIVE can play an important role in innovating around hedging against inflation.

The interest rates charged in the *Kupfuma Ishungu* program is quite high--20 – 30% per month--and is positive given the official inflation rate of 269%. At question, however, is how long interest rates can keep pace with inflation. However, given the alternatives that the group members have, the savings and credit model is still a better alternative than most.

Figure 1 – Where do people save



According to CRS's draft economic strengthening baseline report; ‘.....the majority or fifty-three percent (53%) save at a club/merry-go-round, while smaller portions (21%) save at the bank or in their homes. It can be concluded that the target group is more likely to save, when supported or pressured by peers. When saving requires individual efforts such as saving at the bank, in the home, or through household assets, the target group is less likely to participate in savings activities.’ Thus if households are seeking ways in which their cash can be stored safely for future use e.g. school fees then the IS&L is an improvement on the merry –go-rounds.

III. Findings

Three of CRS/STRIVE's P8 sub-grantees have agreed to take on economic strengthening activities, specifically a savings and credit model called Internal Savings and Lending (IS&L) similar to CARE's *Kupfuma Ishungu*. One sub-grantee has not yet begun implementation; the other two had been under implementation just over a month at the time of the mid-term review.

Delays in implementing the IS&L program, according to CRS/STRIVE staff, were due to the following:

- The concept of internal lending and savings was new to most stakeholders and therefore took time to design within CRS.
- Although some sub-grantees were already implementing similar activities, the fact that the IS&L innovation presented a set of different ways of doing things meant the sub-grantees needed time to understand the different approach and own it before the program could be implemented.
- Selection and appointment of CARE as a technical service provider took time as the contractual arrangements between CRS and CARE had to be worked out.
- The proposal with CARE had to go through the Project Approval Committee and be approved internally
- Staff turnover in CRS/STRIVE at a crucial time, just before launching the economic strengthening fieldwork, caused a disruption.

IV. Current Activities

The Internal Lending and Savings activity (IS&L), commonly referred to as “*Kufusha mari*” (preserving and storing money safely for future consumption⁴²), is the single economic strengthening activity being implemented by CRS/STRIVE. As has already been indicated, the model mirrors CARE’s *Kupfuma Ishungu* savings and credit model. Under the CRS/STRIVE program, self-selected groups of 6-8 have been formed. The groups develop their own constitutions and sets of rules for savings, loans and individual goals. Goals are timed so that cash payouts of lump sum coincide with specific needs, such as payment of school fees or the purchase of farm inputs. Members interviewed during the review demonstrated enthusiasm and excitement about doing something on their own, indicating that they had really benefited from the training provided by the Field Officers: “*Chatinoda ruzivo – nyange nanhasi tinoda kudzidza.*”⁴³ Field Officers provide initial training (½ day training for 5 days) and monitor group activities, providing further training or advisory services when necessary. Monitoring is more intense at the beginning, but is gradually reduced to half yearly visits.

Since CARE is the organisation that developed an IS&L model and has unique experience and expertise, CRS/STRIVE contracted CARE International in Zimbabwe as a technical service provider to the CRS/STRIVE sub-grantees. Each CRS/STRIVE sub-grantee implementing an IS&L program has a CARE-seconded field officer mentoring the sub-grantee Field Officer. CARE’s role is to impart skills to the sub-grantee field officer such that by the time the program ends the sub-grantee has in-house skills to continue implementing the IS&L program. The review team was impressed by the enthusiasm of both the CARE-seconded staff and the sub-grantee staff. Although it is too early to judge the imparted skills, the strong team-work observed was encouraging.

⁴² Literally the term refers to the process of making biltong , which traditionally was a way of preserving meat or vegetables from the wet season to dry seasons when vegetables would be hard to find.

⁴³ "What we want is knowledge and even today we just want to learn from you."

Currently ES is not a "centre stage" activity for CRS STRIVE, yet it is the single most powerful tool in community mobilisation and empowerment and offers strong possibilities of long-term sustainability.

V. Potential benefits/Impact

Even though economic strengthening activities had just been launched, the groups participating (for less than a month) were very enthusiastic about the IS&L program and clearly understood its potential benefits:

- ✓ Community owned and managed mechanism
- ✓ Not dependent on external funding
- ✓ Knowledge and skills imparted by a field officer - "tiri kuda ruzivo" (we want knowledge)
- ✓ Ability to use cash productively in the same community
- ✓ Access to savings and lending facility within their proximity
- ✓ Ability to engage in businesses (mostly petty trading) that benefits the community
- ✓ Loans are repaid with interest

Experiences in Zimbabwe and elsewhere (UWESO in Uganda, CARE in Niger) demonstrate that there is potential impact on household assets or incomes through economic strengthening interventions. A USAID-funded study by Caroline Barnes of Horizons International on Zambuko Trust (a local microfinance institution) concluded that households participating in their microfinance program could smoothen incomes and better manage their financial resources. Access to credit enabled households to pursue income diversification strategies to smoothen household incomes.

The evaluation of the CARE/Zimbabwe *Kupfuma Ishungu* program also indicated positive impact/results which included the following:

- Returns on savings were positive.⁴⁴
- Evidence of enhanced personal pride and dignity – generally social status of group members enhanced.
- Household incomes increased. At the community level the program was dubbed the "programme that puts children through school". It should be noted that CARE was not running this as a school fees program or children's program and thus members of the community had no incentive for referring to school fees.

⁴⁴ These were returns as of July 2002. Given the rapid changes in Zimbabwe, the STRIVE Operations Research Unit needs to work out returns at the household level in order to track the household level impact.

VI. Expected spin offs of the IS&L mechanism

While CRS/STRIVE is aware of the need to innovate around the IS&L mechanism and pilot test other economic strengthening strategies, it is also cognisant of the fact that the innovations should be community driven. The following are some innovations that have evolved in mature IS&L programs:

- IS&L set up social funds, such as funeral funds or hospital funds for children at risk and their families.
- Groups set up apex organisations that manage funds and on – lend to groups.
- Groups form spontaneously once communities have developed the capacity to train new IS&L groups.
- Business development services are demanded by communities – backwards or forward linkages.
- Partners develop the capacity to replicate the mechanism outside of the direct, donor-funded program. The partners might expand geographically or contract their expertise to other interested entities for a fee.
- Group members might be trained to become trainers and then run courses for new groups for a fee – i.e. becoming a microenterprise activity.

VII. Challenges

- Although communities are enthusiastic about the IS&L mechanism, Zimbabwe's current macro-economic environment is challenging the viability of business activities that members may be engaged in.
- Funding constraints given that USAID is not supporting direct economic strengthening implementation. CRS is using USD 87,000 of its own funds to support program implementation.
- CRS/STRIVE sub-grantees might implement similar activities in their main program without giving due attention to training and monitoring. This could adversely affect the results of the pilot. For example in Gowakowa, DOMCCP is already mobilising communities and forming similar groups, but is not offering the same training or support offered through STRIVE.
- It is important to ensure that the IS&L mechanism is not field officer-dependent to the point where removal of the field officer would drastically affect program continuation. How can this be part of a sustainable strategy – exit strategy?
- The CARE technical assistance contract needs to be carefully managed to ensure that impartation of skills takes place.

VIII. Recommendations

1. CRS/STRIVE's Operations Research Unit should, in the next six months, use the baseline information available to develop tools for tracking the number of children at risk benefiting from the IS&L program. Unless such tools are developed, it may be impossible to demonstrate that IS&L is having an impact on children at risk.

2. CRS/STRIVE's Operations Research Unit should track the benefit of IS&L on vulnerable children with regards to gender of caregiver. The hypothesis (proven within microfinance experiences) that increased access to economic resources or income by women generally benefits the family and children more than similar increased access by men needs to be tested. Furthermore, operations research should track the benefits to children at risk depending on the relationships that the child has to the caregivers e.g. uncle, grandmother or aunt.
3. Operations research should be designed around the IS&L initiative. Possibilities include:
 - Comparing results in an IS&L community versus a non-IS&L community
 - Tracking cash inflows versus seasonal, agriculture-related income fluctuations to identify the real incremental differences accruing from IS&L participation
 - Using teacher observation and records to track benefits to vulnerable children
 - Checking on the improved health care/nutritional status of children under five and relating this to whether the children are under the care of an IS&L member
 - Determining whether the gender of IS&L members related to how much vulnerable children in the household benefit
4. STRIVE should ensure that sub-grantees develop trainers from within their IS&L schemes who can serve as trainers for new IS&L groups. This will reduce the cost of expansion since community members will be training their peers. While trainers may charge for their services, new group members, rather than the STRIVE sub-grantees, should pay these fees.
5. STRIVE should wait (for at least six months) for results from the first three IS&L programs before replicating the model. Criteria for assessing results should include (a) an increase in economic resources (assets) at the household level and (b) evidence that any increase is benefiting vulnerable children and improving their welfare.

Practical options for ways to replicate might include:

- Encourage non-STRIVE organizations operating in the same geographical areas as STRIVE sub-grantees to implement IS&L programs. For example, in a community-based organization in Bulawayo might be able to implement IS&L in the same areas that Masiye Camp is working in. This mode of replication might be slow as it would require dialogue and discussions with potential partners and then the submission of proposals.
- Encourage more P8 sub-grantees to implement IS&L programs; facilitate information sharing among P8s in order to enable sub-grantees to learn from their peers and hopefully adopt IS&L. Field Officers from sub-grantees currently implementing IS&L programs could offer training of trainers to other sub-grantees, thereby reducing CRS dependence on CARE for scaling up. Adoption of this strategy would involve dialogue with P8 sub-grantees and the communities in which they work. Hence, it may take time before the other partners come on board.

- Engage more S8 sub-grantees in economic strengthening interventions. Like the current P8 sub-grantees, the S8 sub-grantees could possibly be supported by CARE field officers. However, CARE's capacity is limited and it only operates in specified districts. Therefore, if S8 sub-grantees are not working close to the CARE districts, it might be costly to engage CARE.
 - Explore the possibility of CARE expanding its geographical coverage to some of the areas that are already benefiting from other STRIVE sub-grantee programs.
6. If the six-month results prove positive, CRS/STRIVE should present USAID with a well-documented and justified request for direct USAID funding for economic strengthening activities. USAID should explore ways in which, in the long term, ES can be prioritised and funded as a strategy for community mobilisation and economic enhancement at household and community levels.
 7. USAID should consider replicating IS&L as 'low-tech' microfinance initiative specifically geared towards rural areas through its Private Sector (Microenterprise Development Unit). Programs such as LEAD, Self Help Development Foundation might benefit from CARE's experience and introduce this innovation in their programming areas. IS&L strengthens households economies and should not be restricted to child-focused programming. USAID could also contract CARE directly to implement the mechanism and ensure there is a strong operations research component and deliberate focus on children.
 8. CRS /STRIVE should use IS&L-related group meetings as a forum for discussing social issues such as HIV prevention and sharing ideas on caring for orphans. Caregivers could also be trained on counselling and psychosocial support. This concept is used extensively by Freedom from Hunger in its Credit with Education programs through village banking.
 9. CRS/STRIVE could organise exposure visits for partner directors locally and regionally to learn by observing experiences from other programs that have been running for long periods of time. Examples include UWESO in Uganda and CARE in Zimbabwe.

Annex 9 Capacity Building and Gender

By Lynne Cogswell

The Capacity Building/Gender Unit (CB/G) activities are directly linked to STRIVE's second main project objective: Improve the *organizational capacity* of at least eight local organizations to deliver high quality care, support, and prevention activities to benefit children affected by HIV/AIDS and their families.

To facilitate and guide this discussion of the mid-term review team's findings, organizational capacity has been defined as follows – it is a combination of developing an organization, i.e. putting in place its systems, process, procedures, plans and human and financial resources, and building the capacity of the individuals within the organization, i.e. their skills, knowledge, and abilities – thus organizational capacity. Though this definition differs slightly from the one used by the CB/G Unit, i.e. CB is the process of strengthening an organization's capabilities to implement the STRIVE project. The team feels this definition is more substantive and encompassing and less STRIVE-driven.

In addition to responding directly to STRIVE's second main project objective, the CB/G Unit also has identified intermediate results (IR) and corresponding indicators against which it plans to measure the impact of its capacity building activities. These include:

- IR 5: Effectiveness of sub-grantees improved
 - ✓ % change in organizational assessment score: (1) Governance, (2) Leadership/Management, (3) Finance, (4) Administration, (5) Program Management
 - ✓ # of sub-grantees reaching maturity (using score measure)
- IR 5.1: Learning linkages between NGOs & CBOs improved
 - ✓ % change in frequency of informal/formal contacts between sub-grantees
- IR 5.2: Effectiveness of services delivered by sub-grantee improved
 - ✓ % change in composite impact of partner programming on CABA (as identified and defined by the partner)

There also appears to be another objective or intermediate result that, though not officially in any STRIVE documents, has been used repeatedly in CB/G Unit documents, i.e. improve the sub-grantees' gender responsiveness capacity.

In December 2002, the original eight implementing partners/sub-grantees took organizational capacity assessments. These assessments determined the base score for their organizational capacity in governance, leadership, finance, administration, and program management. Reassessment has not yet taken place, so it is not yet possible to see if any of the capacity building activities that the CB/G Unit has been conducting have had an impact on these implementing partners. Initial scores ranged from 51 to 78 out of 100. It will be interesting to see how these improve by March 2004.

Furthermore, in 2001 baseline data was gathered on the frequency of formal/informal contacts held by the implementing partners with their respective communities. All indicated that contact was made on at least a monthly basis with one implementing partner reporting that it made contact with its community on a weekly basis. The baseline also identified the impact implementing partners presently perceived they had on their communities -- 50% felt they were empowering members bodies and 75% indicated that they were felt they were supporting CABA needs.

Though activities appear to be behind due to the delay in hiring a Program Manager for the CB/G Unit and the subsequent Project Officer, many scheduled activities have taken place as planned. This section will not discuss financial capacity building or operations research capacity building since these capacity building activities do not fall under the purview of the CB/G Unit. CB/G activities have included:

- Organizational capacity assessment tools were adapted for use with STRIVE, i.e. assessing governance, leadership, finance, administration, and program management and include a section on capacity of partners to mobilize their communities.
- Organizational capacity assessments were administered during individual workshops with implementing partners and later reports were prepared and distributed.
- A master CB activities plan was detailed based on assessment results.
- A fundamental management skills training workshop was held for implementing partner Directors.
- A skills bank is up and running.

Based on interviews and feedback from CB/G staff and feedback from some of the implementing partners, the CB/G staff has the background and experience necessary to identify, assess, organize and in many cases conduct the capacity building activities. They are highly skilled and professional. They both appear to be good role models for Capacity Building/Gender and participatory techniques. With their cohesive spirit and the time now available to them, they should be able to work on and work through some of the concerns expressed by implementing partners (see below). At present the staff complement is sufficient to the needs of the organization. Furthermore, as they put the skills bank in place, they will have expertise available to help design, organize, and assure quality of additional activities for topics identified by partners.

When implementing partners were asked how they felt about the capacity building activities in which they had participated they reported that they had helped them better understand the role of their boards and they felt they better understood what constituted a good financial system. To date most of what seems to have been transferred is knowledge and understanding. Skills and the ability to develop or use specific systems do not appear to have been sufficiently transferred yet. Little planning and management capacity appears to have yet been built. Minimal cross-fertilization seems to have occurred among the implementing partners. Implementing partners also expressed a need for more help in focusing their efforts through capacity building activities. Many implementing partners expressed concern over only involving STRIVE staff and not involving a wider organizational audience, it was interpreted as exclusivity and not capacity building. They were also concerned that often the activities were diluted by erratic

communication at many levels. Furthermore, many partners report feeling overwhelmed with capacity building activities from all of the Units that happen at the same time and that clear capacity building activity coordination within STRIVE has not yet been possible.

The challenges, while not numerous, will require careful and planned deliberation to handle:

- Many of the original eight implementing partners still need significant organizational capacity building especially in putting together systems and structures, in planning, and in management.
- Coordination of CB/G activities among all Units will be essential to reduce burden on partners and ensure that skills build on one another to develop and reinforce capacity of individuals and organizations.
- Gender has been particularly silent in STRIVE's work and needs to come out more strongly.
- Capacity building is not a one-shot workshop, it usually takes several different types of activities or occasions to ensure that someone has learned the skill and can use it.
- Challenging the established ways, the environment, and the attitudes of an organization is the precursor to change, but it is not always well accepted and how it is presented can be crucial, i.e. creating buy-in to process, treating partners appropriately, developing relationships.
- Though the gender-related objective developed by and used solely for the CB/G Unit is understandable, it does not at present correspond to any of the IRs or the supporting indicators and cannot at this point in time be effectively tracked.
- While, it is understandable that the CB/G Unit might see capacity building needs in the CRS/STRIVE staff as well as in the implementing partners, it is essential that the CB/G maintain its focus on the implementing partners.
- It is often times difficult to distinguish between building the capacity of the organization or only that of the individual – emphasis should be on organizational assets.

There are significant opportunities for Operations Research (OR) to play a part in the capacity building and gender activities. Several OR ideas come to mind that could be immediately designed and conducted:

1. Examine the impact on capacity building and actual use of skills based on whether organizations request assistance or STRIVE recommends assistance.
2. Investigate the impact of different combinations of CB activities using the same capacity building topics, e.g. formal training, informal group sessions, and organizational coaching vs. mobile task team, organizational coaching, and on-the-job training using the same topic of program management.
3. Detail the impact of different capacity building methods on men and on women
4. Explore how the level of organization capacity impacts on an organization's ability to deliver an intervention or a combination of interventions.
5. Develop specific, individual OR packages for the original implementing partners with clear capacity building objectives built into their proposals – Batsiranai, RUDO, Bulawayo Archdiocese, HOCCIC and DOMCCP.

RECOMMENDATIONS

The following recommendations are intended to help focus the CB/G Unit activities. These should be considered ongoing and fit into the overall program effectiveness recommendations. If there are budgetary implications, it has been marked with (\$). Programmatically, these readjustments will allow STRIVE to fulfil its present deliverables and establish itself for its long-term planning. Implementing these recommendations will allow STRIVE to operationalize capacity building beyond individuals to the organizations.

These should be ongoing and should fit into the STRIVE strategic program plan. Completion date for all should be 30 April 2004.

<i>Area</i>	<i>Specific Recommendations</i>	<i>Possible Action Steps</i>
Definition	1. Consider adopting the definitions provided in this piece for organizational capacity, organizational development, and capacity building	Discuss the possibility of broadening the capacity building activities to more than just the STRIVE project, i.e. allow more implementing partner staff to benefit.
Coordination	2. Coordinate all capacity building activities for STRIVE to reduce overlaps and burden on partners	Include OR activities, grants management activities, intervention activities, etc.
Topics	3. Create a menu of capacity building topics from which all partners can choose	Based on mid-term review information and identified needs from assessments, develop of the menu (maybe keep it to 10-15 topics) using this information and the needs identified from the Assessment Tool Examine skills available <i>Remember not to include any topics for which you cannot get an expert.</i>
Skills – Outsource (\$)	4. Continue development of certified skills bank	Identify external professionals for bank, based on the above developed list of topics Train them all together on STRIVE, in participatory methodologies and on effective materials development <i>CB/G Unit should facilitate this for all Units, help prepare TOR, oversee content with appropriate unit & methods, manage & monitor quality</i>
Calendar	5. Prepare an annual calendar of when ALL topics will be available for participation – all CB activities from all Units	Have all Units present their proposed capacity building calendars (all Unit topics should be included on the list created in Recommendation 1 above) and put together an annual calendar for all capacity building activities (not just those for the CB/G Unit, should include Finance and OR as well)
Methodologies	6. Develop a combination of activity styles – formal, informal, and organizational one-on-one – alternatives to workshops and TOTs	Talk to implementing partners about what they think would work best Examine the management & structural implications of adjusting the capacity building

<i>Area</i>	<i>Specific Recommendations</i>	<i>Possible Action Steps</i>
		strategies
Capacity Assessment Tools (\$)	7. Develop a more complete organizational capacity assessment package to improve the quality of the administered assessment and the resulting feedback to and use by the partners	Detail a “how-to use” the assessment tool (not necessarily confine unit to one tool), including clear instructions on how to analyse and present information to partners (positive feedback and constructive feedback) verbally and in writing, how to detail specific “action items” for them to follow, checklists Develop a qualitative portion of the assessment to use with the quantitative tool presently available Detail “maturity” level and establish clear, defined organizational capacity levels (basic, etc.)
Indicators	8. Develop a more specific set of indicators to assess the capacity building activities decided upon in Recommendation 3 above and to assess the appropriateness of methodologies used	Clearly define the objectives of organizational capacity building activities: ✓ Performance-based ✓ Results-oriented ✓ Impact-focused ✓ Creative-directed
Objective/Gender	9. Consider officially adding the Gender objective to the STRIVE plan and develop appropriate IRs	Include this topic at the next strategic planning retreat Ensure that it is in keeping with STRIVE’s direction
Asset Building	10. Document process of working with implementing partners	Detail guidelines on all of the activities the CB/G engages in
Operations Research (\$)	11. Commission external analyses of experience and observation	Develop TOR Recruit outsource Develop list of analyses to consider, e.g. behaviour change paradigm, management/decision-making structures & systems at community level, role of traditional leaders & mothers in increasingly difficult circumstances just to name a few

TRADITIONAL CAPACTY BUILDING INDICTORS

The following are generally recognized as CB indicators at any level (STRIVE/Harare/partner/community). They are considered visible and measurable indicators:

- ✓ Level of self-reliance (none to complete)
- ✓ Number/percentage of growth in organization, in activities, in services, in resources
- ✓ Number of Items institutionalised – development of organizational assets (documentation, processes, systems) and building of individual capacity (skills, knowledge, ability)
- ✓ Level of control over own social and economic development (none to complete)
- ✓ Level of group independence and autonomy (none to complete)

TRADITIONAL GENDER INDICATORS

The following are generally recognized GENDER indicators, again at any level:

- ✓ Number/percentage of women involved in positions they do not traditionally fill
- ✓ Number/percentage of women in leadership roles – traditional and untraditional
- ✓ Number/percentage of women in a particular group and the roles they play

MENU OF OPTIONS

Based on the overarching recommendations cited above for the Capacity Building and Gender Unit, the mid-term review team, based on the qualitative research gathered during this review and their experiences in the field put together a “menu of options” for topics for possible CB/G activities, methods to use in conducting/carrying out these activities, possible audiences considerations (with whom to carry out these activities), and some possible indicators to measures capacity building and gender activities.

MENU OF OPTIONS

TOPICS	METHODOLOGY	WITH WHOM/AUDIENCE	INDICATORS
Advocacy Budgeting Care for care givers Communication Community Mobilization Creating collaborative rather than top down organizational and community structures Development of Action Plans Development of Indicators Disbursement/receipt reconciliation Facilitation Skills Financial Management Financial reporting Fund raising HIV/AIDS Advocacy How to set up dialogue between partners and community Linkages with the established structures Lobbying Advocacy Management Micro-finance Operation research OVC Strategies and Principles Participatory methodologies (PLA, PRA, TFT, AI) Participatory monitoring and evaluation Partnership development Petty cash management Project management Psychosocial Support Record Keeping Report writing Resource Mobilization Resource mobilization/Accountability/Transparency Strategic Management Strategic Planning Substantive areas e.g. HIV/AIDS (aetiology, universal precautions etc), orphans, health and nutrition, Technical Issues USAID procedures/ Trends in HIV/AIDS and orphaning Volunteer management & Dependency Work planning and budgeting	Contracting out Demonstration Direct personal supervision Establish a “college” Exchange visits or study tours Experimental learning workshop Forums Guidelines (structured) Internships Learning by doing Meetings Mobile Task Teams Networking sessions On site training One on one TA/mentoring Partner to partner discussions Peer/group mentoring Practical internship Publications – Newsletters, brochures Retreats Seminars Staff attachments/internships Tool Kits Training in use of PLA methods should include Training of Trainers Training workshops Workshops Be sure that those who provide CB activities: <ul style="list-style-type: none"> • Are certified by CB/G Unit • Are participatory • Are “masters” of their content • Empower their audiences • Build capacity of trainees to use/apply/replicate/hold the knowledge 	Accountants Agriculture Extension Officers Bookkeepers Community Leaders Community leadership CRS/Diocesan/staff District Administrator District Medical Officer District Nursing Officer District Social Welfare Education Officers Field Officers Field Staff Finance officers Financial Manager Government Implementing Partners Key Personnel in P8 and S8 Local Government structures Management OR Manager OR Officers Other partner organizations in the area P8 Leadership Partner managers Partner office Partner specialists Partner trainers Program staff Project Manager Registrars of Births and Deaths Representation of school children School Heads Self selected partners Senior Women Volunteers	# of and types of action initiated by communities as a result of mobilization process lead by partners # of beneficiaries benefiting from interventions # of children reached # of clients who are satisfied with ability of trainers in implementing # of communities in which partners subsequently use PLA approach, methods and tools # of evaluation of methods developed & used by clients # of integrated plans # of OVC that benefit from the SK services delivered by partners # of people in the CB initiatives by type and by gender # of people that have been trained by topic and by gender # of people utilizing the skills by gender # of resources managed as expected # of Strategic plan being implemented # of timely submission # of times budget annual work plan, etc is sent back for revision composite index of common capacity, community, children well being Quality improved – number of errors

ANNEX 10 Closing the Gap: Scaling up Action to Improve the Lives of Children Made Vulnerable by HIV/AIDS in Zimbabwe

By John Williamson

STRIVE, along with many other partners in Zimbabwe, is doing much to address to the needs and rights of children affected by HIV/AIDS and is an important component of the national response to children at risk. However, a huge gap remains between the current situation of many of these children and the fulfillment of their needs and rights. One of the most urgent questions the country faces is how to close this gap. The safety, well being, and development of a very large number of children depend upon finding answers and putting them into action, as does the future development and social stability of the country. If Zimbabwe fails these children, their future will be bleak and the country will face a rapidly growing number of under-educated, malnourished, socially marginalized, angry youth.

In addition to more than a million orphans in Zimbabwe, there are very large numbers of children living in poor households that have taken in orphaned relatives. These households try to stretch already inadequate resources even further to provide for these orphans, affecting all children in the household. There are also children, not yet orphaned, who live with a parent chronically ill due to AIDS. In some cases these children become care providers for their parent. Additionally, there are children who themselves have HIV/AIDS. No one knows the total number children affected by AIDS. Neither does anyone know the total number who are benefiting from current programs and how many are not. STRIVE is an effort to fill a small portion of the gap in support to vulnerable children. It has the additional and vitally important responsibility to learn which interventions can be scaled up (expanded) and scaled out (replicated) so a large-scale, collective national response can close the gap.

If unlimited resources were available, implementing solutions would not be too difficult. Answers could found by training, hiring, and putting in the field armies of social workers, teachers, counselors, health service providers, and others backed with supply chains of food, medicine, school supplies, construction materials, and lots of money. Even if this hypothetical humanitarian army could be deployed, without sustained funding, it would collapse. Additional funding for programs to children at risk in Zimbabwe seems probable, but it is unlikely in the extreme that it will be more than a small fraction of the massive start up and operating costs that would be required to develop new and scaled up direct service delivery programs country-wide. The Government cannot afford this, and it would be unrealistic for Zimbabwe to anticipate that the international community would foot the bill for the next two or three decades.

Another option would be to use all available resources to field a much smaller army of trained personnel and volunteers to deliver whatever services could be afforded for as many children as resources would allow. This is more or less the current approach, but a yawning national gap remains that marginal additional donor funding is not likely to fill. Measuring the gap between the current effort and an adequate response to all vulnerable children is vitally important so this baseline can be used to measure progress. Closing the gap is likely to require a more cost-

effective mix of approaches than those currently used by most of STRIVE's partners (and likely those used by most other programs in the country), which primarily provide direct services to children through community volunteers.

Even with improved programming approaches, more resources are required to help build an adequate national response to the impacts of AIDS on children and families in Zimbabwe. Some of this support can be obtained from sources outside the country; however, it would be a very risky strategy for the country to stake its future primarily on the ongoing generosity of the international community. The one aspect of donor funding that can be depended upon is that, ultimately, it cannot be depended upon. The foundation of an adequate ongoing national response must come from within the country, and external funding must be used to supplement and strengthen it.

Most of Zimbabwe's current responses to the impacts of AIDS come from within the country, and with effective organization they can accomplish much more. Families and communities are doing the most. They are the first line of response to HIV/AIDS, and irrespective of whether anyone else helps, they struggle every day to survive and to provide whatever of care they can to their vulnerable children and ill adults. But they can't do enough and need help. Their resources are far too limited to provide adequate care, protection, and support. Additional elements of the current national response include the Basic Assistance Module (BEAM) for educational assistance, the national social assistance program, and the National AIDS Trust Fund. In addition, there are over 100 organizations registered as working with orphans and vulnerable children in Zimbabwe. CRS/STRIVE may be the largest program of this type.

Government bodies, nongovernmental organizations, faith communities, the private sector, and other actors are contributing in ways large and small to the national response to orphans and vulnerable children, but they are doing so without much reference to each other. Building and maintaining an adequate set of responses will require active information-sharing and collaboration (literally, "working together") of a wide range of governmental and civil society actors from the village to the national level and beyond. However, the active networks of exchange and collaboration needed to enable these many and varied bodies to piece together an adequate collective response are not currently functioning, and they must be developed.

Not only is the magnitude of the challenge enormous, the country will be dealing with it for a very long time. The number of orphans in Zimbabwe can be expected to increase until at about 2010 and the percent of children orphaned is likely to increase until at least 2005. The number of the additional children made vulnerable by AIDS will follow a similar pattern.

Figures 1 and 2 help put in perspective the orphaning challenge Zimbabwe faces (Data are from *Children on the Brink 2002* by USAID, UNICEF, and UNAIDS). Even if Zimbabwe begins to succeed in bringing down its HIV prevalence rate, AIDS deaths and orphaning can be expected to continue for a very long time, and the number and proportion of the country's children who are orphans will remain high. The lag between an individual's HIV infection and eventual death due to AIDS averages about 10 years, so even if HIV prevalence begins to decline (as the tables below anticipate), orphaning will increase for another decade beyond that point because of the people already infected. Because of the number of people living with HIV in Zimbabwe, the

shape of the curves in these figures is more or less already determined. The only factor that could change them substantially would be massive, sustained funding for the health services and medications to keep parents alive. Failing this, but with the hoped for downward shift in HIV prevalence, orphaning in Zimbabwe can be expected to increase for five to 10 years, then begin a gradual decline for another two decades or so, until it reaches pre-1990 levels. Both the number and percent of children affected by AIDS can be expected to remain abnormally high for two or three decades.

Figure 1

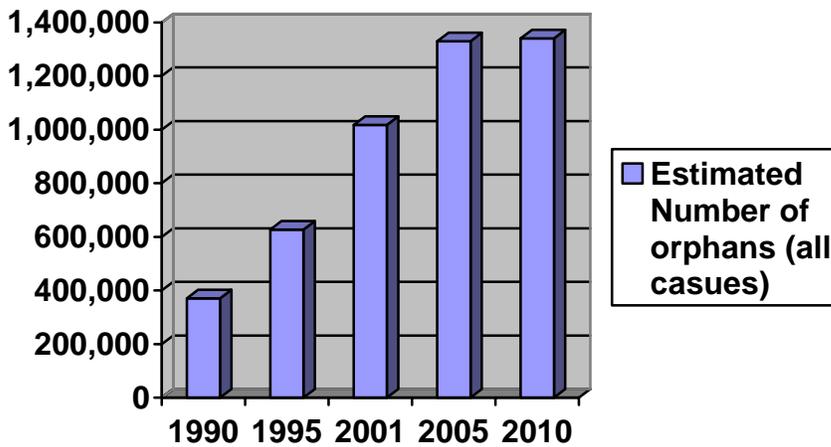
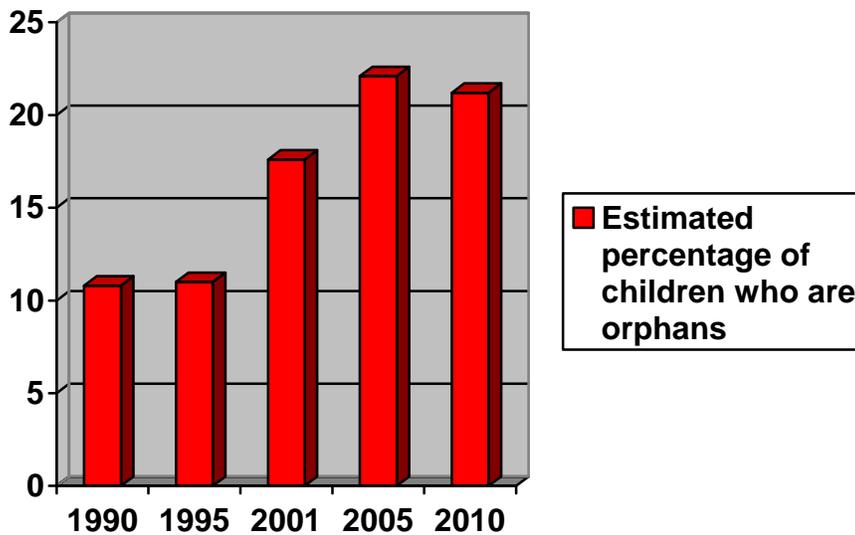


Figure 2



Three strategic conclusions seem obvious from the situation described above. First, the needs and rights of the country's orphans and vulnerable children will depend largely on its own resources. Second, cost-effective approaches are needed to allow Zimbabwe to piece together an adequate national response. Third, this collective effort will have to be maintained for a very long time. What is not clear, however, is the cost of mobilizing and maintaining such a response, and this is a significant constraint to planning a collective way forward. No one has yet determined the actual cost per child of most current and or other possible interventions, the costs of increasing their coverage, or their actual benefits for children, but this can and must be done.

To help plan an adequate collective national response, it is imperative that the STRIVE OR team help generate such needed information by determining (1) the per child costs of different interventions, (2) the likely costs for scaling up or scaling out each of these, and (3) the respective results of each of these interventions for children. The OR team should attempt to gather this information for the activities being carried out with STRIVE funding. It will then be important for STRIVE to make cost comparisons (both per child beneficiary and at a given scale) of various kinds of interventions, as well as describing their benefits for children. This comparison should include interventions in each of the three categories described in Table 1:

1. Direct service delivery to children by paid staff,
2. Service delivery through community participation, and
3. Community owned and managed activities that benefit children.

Table 1. Approaches to Addressing Needs Among Orphans and Vulnerable Children

Approach	Process of Initiation	Service Delivery Process	Services	Resource Base	Continuity	Relative cost per beneficiary
<i>1. Direct Service delivery</i>	Agency submits proposal to funder, contract is negotiated for delivery of specific services to targeted beneficiaries	Paid staff of a funded agency provide specific direct assistance to targeted beneficiaries	Predetermined by funder and agency	Funding and possibly technical assistance from donor(s) to agency	Determined by the availability of funding	High
<i>2. Service delivery through community participation</i>	As above, then agency persuades specific community members to carry out specific activities with agency training and support	A funded agency supports community volunteers to provide specific direct assistance to targeted beneficiaries	Predetermined by funder and agency, possibly with consultation with communities	As above, with addition of volunteer action by community members and possibly use of community resources (e.g. land, expertise, facilities)	As above	Moderate
<i>3. Community owned, led, and managed activities</i>	Community analyzes its own situation, decides what and who it is most concerned about, and initiates action. May be catalyzed (mobilized) by one or more community members or an external agency. May include capacity building of community group and/or designated members	Community members carry out and manage activities they have planned	Determined by community, often in dialogue with mobilizing agency. Cannot be predetermined by mobilizing agency.	Basis is community resources (as above), possibly with additional resources from external body(ies) (e.g. funding, material inputs, expertise, training, information)	Determined by community commitment (closely linked to concern about problem(s) addressed and sense of ownership of the response) and availability of local resources	Low

Most of the interventions being carried out by STRIVE partners seem to fall into category two. While such activities are likely to be less costly than those in category one, they are likely to be more expensive to maintain than those in the third category, which are much less dependent upon ongoing external funding. Interventions that STRIVE partners are carrying out which fall into category three include the IS&L approach to economic strengthening and (depending how they are developed) chief's fields or community fields. These would be important for the OR team to include in such an analysis.

USAID/Washington and other bodies have been involved with various costing exercises related to interventions for orphans and vulnerable children, and could share with the STRIVE OR team relevant reports and information. It could also help identify relevant technical expertise in the region. USAID/Washington would also welcome the opportunity to learn from any insights and methods the OR team may be able to bring to a costing and result exercise in Zimbabwe, because progress in this area, critical as it is, has been remarkably limited. In addition, recognizing that there are promising approaches and interventions in Zimbabwe and elsewhere in the region that are not currently being implemented by STRIVE's partners, it is important that USAID seek to obtain cost and benefit information for some of these. This would provide a wider set of options for Zimbabwean stakeholders to consider as they seek to piece together a collective national response that matches the scale of the problems that HIV/AIDS is causing among children and families.

Developing the best possible national response requires strategic planning to make the best use of currently available resources as well as bringing new resources to bear. The following, in addition to strategic issues described above, are some of the key aspects of the current situation in Zimbabwe that can limit or expand an adequate national response to the problems AIDS is causing among orphans and vulnerable children:

- The overwhelming majority of these children are living with a surviving parent or extended family member in a community.
- A small minority of children has slipped through these primary safety nets and is living on the street or in institutions, and some are in child-headed households receiving varying degrees of support.
- The large majority of adults in Zimbabwe are HIV negative, and among those with HIV, at any point in time, the majority is healthy and able to carry their normal activities.
- All communities have some degree of current and potential capacity (e.g. skills, knowledge, land, cultural traditions, etc.) and with support can do more for vulnerable children.
- Enabling ill parents to live longer and more comfortably is one of the most important ways to benefit their children.

Taking such factors into account, the outline of a way forward in Zimbabwe is reflected in such documents as the National Orphan Care Policy, the National HIV/AIDS Policy, the goals for orphans and vulnerable children of the United Nations Special Session on HIV/AIDS, the five-point strategic framework and 12 principles for programming in Children on the Brink 2002, but that's the easy part.

The hard part is figuring out who needs to do what and how. Currently there is no adequate mechanism to bring all key stakeholders together at the various levels and areas within the

country where they are working. This needs to happen on an ongoing basis so stakeholders to figure out the hard part, then piece together and sustain a network of responses. In mid-June there will be a national consultation on orphans and vulnerable children that can help Zimbabwe begin to build a collaborative national response. This event needs to help stakeholders to develop a jointly agreed upon national plan of action and determine stakeholder responsibilities for action. As two of the key stakeholders, STRIVE and USAID must play active roles, not just as participants but also in helping to shape the event and ensure it generates constructive action.

No single body has the resources and expertise by itself to respond adequately, countrywide to the needs and rights of the children made vulnerable by AIDS. This includes the Government of Zimbabwe, any international organization, NGO, or faith-based structure. They only hope that any of these bodies have of seeing an adequate national response is to collaborate, with each and every stakeholder contributing what it can to the collective effort.

Consequently, among the steps needed in a national plan of action are the development at each level (national through community) of ongoing mechanisms and networks that will serve the needs of participating organizations on an ongoing basis. Every organization agrees in principle with the idea of "coordination," but none really wants to "be coordinated," because it implies giving up a degree of autonomy and leeway in decision-making. Consequently, stakeholders need to agree upon mechanisms or networks that will serve their individual needs for exchanging information, finding ways to work together, seeking and providing technical support, planning jointly, solving problems, and advocating for needed action at higher levels. Before establishing any new mechanisms, stakeholders should consider the current and potential roles of such structures as Development Committees (at district and other levels), Child Welfare Forums (which seem largely dormant), and the AIDS Council structure.

To inform the process of developing mechanisms for collaboration regarding vulnerable children stakeholders should also gather information on models used in other countries in the region. Some of the structures in other countries worth considering include AIDS Committees in Malawi (each of which has a technical sub-group on orphans) and Orphans and Vulnerable Children Committees in Zambia.

Considering the above, closing the gap for children affected by AIDS in Zimbabwe will require a variety of approaches, which include:

- Developing and implementing a national plan of action,
- Organizing a collaborative national situation analysis,
- Reviewing and revising national policies relevant to children's safety, well-being, and development,
- Developing mechanisms from national to community level through which stakeholders can exchange information and find ways to work together,
- Scaling up individual programs to benefit more children,
- Scaling out effective programmatic approaches by enabling more stakeholders to replicate them, and
- Monitoring and evaluating action and feeding this information into ongoing planning and implementation.

STRIVE's Role

STRIVE's programmatic and operations research roles are interrelated and vitally important to the development of an adequate national response to the impacts of AIDS on children in Zimbabwe. It needs to help demonstrate what works and how cost-effective interventions can be scaled up and out to all the areas where HIV/AIDS is seriously undermining family and community capacity to fulfill their children's needs and rights.

It is not enough for STRIVE to help its partners to implement effective interventions. The country needs it to develop into an ongoing program whose priorities include:

- Strengthening the economic and other capacities of vulnerable households to protect and care for their children,
- Mobilizing and strengthening community action to protect and promote the well-being of the most vulnerable children, including their psychosocial well-being,
- Ensuring that resources are mobilized to meet the children's basic physical needs,
- Enabling children to attend school and otherwise gain skills to better support themselves and others, and
- Helping children and adolescents to avoid HIV infection.

Since resources are limited and, nationally, the gap is large, STRIVE must enable its partners to develop and implement approaches that measurably benefit vulnerable children at a low cost per child and which can be replicated by other organizations. With this in mind, a current deficit in programming by STRIVE's partners is mobilization of community owned, led, and managed activities (the third category in Table 1). The primary approach used by STRIVE's partners is to involve community volunteers in service delivery (category two), rather than to mobilize and support communities to assume primary responsibility for responding to the needs and problems of orphans and vulnerable children. The point is that communities (in addition to problems) have capacities and access to local resources that can be brought to bear to improve children's safety and well being. But let there be no mistake, community efforts will not be sufficient to meet children's needs, but systematically mobilizing communities and strengthening their capacities can enable them to be the foundation of an effective, sustained national response. Limited external assistance and capacity building can enable communities to expand their activities incrementally as their capacities grow, and significant additional programmatic and policy action will be required to complete an adequate national response.

Communities need more than initial help with mobilization. They need some level of ongoing support, be that in the form of information, training, technical support, material resources, or limited amounts of financial support, but to be sustained, community efforts must be based on local ownership, commitment, and sense of responsibility. Community mobilization is a process that helps community members come together to analyze their shared situation, decide what and who they are most concerned about, what resources they may be able to bring to bear, and what they are willing to do. It takes time, and its evolution in a community must proceed at that community's own pace. Neither the pace nor the specific outcomes can be predetermined by the mobilizing body. To do so would undermine the foundation of community ownership and place responsibility for action on the mobilizing body. If you are going to call the tune, you have to be willing to pay the piper. This point is at the heart of the ongoing debate about volunteers.

Programs, such as COPE in Malawi, SCOPE-OVC in Zambia, and FOCUS in Zimbabwe are all demonstrating that benefits can be achieved for large numbers of orphans and vulnerable children at a relatively low cost per child and that poor rural and urban communities can sustain these with limited external support. Communities develop mechanisms through which limited amounts of external support can be directed. While such grassroots efforts are not nearly sufficient, they are a sustainable basis that can be supplemented by microeconomic strengthening and other interventions. These programs are demonstrating that many small community efforts can be mobilized to benefit a substantial number of children on an ongoing basis. STRIVE, its partners, and USAID/Zimbabwe could benefit from exploring programs that mobilize and strengthen community owned and managed action for vulnerable children.

STRIVE also needs to develop linkages and collaborative relationships with stakeholders beyond its own partners and USAID. It can strengthen its links with Government at national level. A working relationship with the BEAM program would be particularly valuable. Greater collaboration with the Ministry of Education generally may provide opportunities for to influence national policy relevant to educational access, and linkages with emergency food programs (beyond those of CRS) can help improve children's nutritional condition.

USAID Role

USAID/Zimbabwe has a unique opportunity to help bring about a radical improvement in the way the needs and rights of orphans and vulnerable children are addressed in the country. It is already playing an active role, and has open to it vital strategic opportunities to help the country move from its current fragmented approach to a collaborative, coherent national response. By working with UNICEF and engaging actively with the Government, it can influence stakeholders very broadly. It is uniquely able to influence other bilateral donors to contribute toward missing elements of a national program. By funding additional promising approaches and targeted, technically sound operations research, it can answer key questions about how to put together and maintain a set of interventions adequate to make a real difference in the lives of the most vulnerable children.

Access to education is the core of an adequate response to orphans and vulnerable children in Zimbabwe, and USAID can play leadership and advocacy roles to help move the country to universal primary education.

USAID/Zimbabwe needs to develop long term working relationships with several technically competent organizations seriously committed developing and implementing programming for children made vulnerable by HIV/AIDS. Recognizing the complexity of the challenges, it is going to take years to develop and refine an adequate set of responses. Regarding HIV/AIDS, USAID/Zimbabwe has already taken a leadership role in the region, making the case for technical changes in the approach to voluntary testing and counseling and for amending programming regulations to make them more appropriate to the new demands of responding effectively to the pandemic.

However, with regard to STRIVE, USAID's programming and financial regulations, requirements, and procedures are inappropriate to the massive, long-term impacts of HIV/AIDS on children and families. USAID has a reputation in the international development community as having particularly complex and onerous regulations related to program funding, accounting, and reporting. It rarely commits funding for more than three years. Its competitive processes for making funding decisions undermine the collaborative approach essential to an effective response. Its regulations concerning the use of Child Survival and Development Funds (such as those used to fund STRIVE) largely preclude the use of such funds for microeconomic strengthening household incomes to benefit vulnerable children. On the other hand, orphaning and other impacts of AIDS will continue for decades and are causing unprecedented child welfare problems throughout sub-Saharan Africa. There is a glaring mismatch between regulations and procedures, on the one hand, and the horrific, slow onset disaster of AIDS on the other. This problem must be acknowledged and explored more fully by USAID/Washington in order to find solutions.

USAID's typical approach of working with one partner for a few years then announcing another competition for funds precludes the continuity necessary to develop effective, efficient programs which are addressing a multitude of new and complex challenges without a proven road map to follow. USAID must acknowledge and address the challenges of developing a program that will significantly improve the lives of orphaned and vulnerable children on an ongoing basis, and the difficulties must not be underestimated. Programming in this area is in an entirely different category of complexity from most health or development projects. Simultaneously, a project for orphans and vulnerable children must address social, psychological, cultural, education, economic, and health issues as well as those of child rights, welfare, and development. Multiple levels of governmental, organizational and social structures come into play. A project must deal with the organizational challenges of addressing these in an integrated way without having a proven course of action to follow. It must address in effective, measurable ways the long-term and unprecedented impacts of HIV/AIDS on children and families, and it must find ways to collaborate with a wide variety of other actors to form an integral part of a much larger whole. Developing such a project and making it work well takes time. In Zimbabwe, the two and a half year time frame for STRIVE would have been unrealistic even if it were not expected to generate operations research findings needed to guide and scale up future action by USAID in the country.

While STRIVE must shoulder responsibility for most of its operational difficulties, USAID's systems the complexity of the task and are major contributing factors. The extremely complex regulations of USAID have contributed significantly to a relationship between STRIVE and its partners of micro-management, frustration, and distrust. In a situation requiring innovation and creativity, USAID's complex regulations are telegraphed through STRIVE to its partners, slowing, limiting, and frustrating programmatic action. STRIVE needs to find ways to buffer its partners from these demands rather than to pass them on.

Recommendations

USAID/Zimbabwe should make a substantial, long-term commitment to help develop an adequate, collective national response to the impacts of HIV/AIDS on children and families. It should use the five point strategic framework and the 12 programming principles in Children on

the Brink 2002 as foundational guidance and gear its program toward achievement of the UNGASS goals for orphans and vulnerable children. It should provide substantial support for programming by multiple lead organizations, work actively and play an advocacy role with UNICEF and the Government, participate in and support development of effective networks for stakeholder collaboration from national to community level, and support policy analysis and development.

USAID should make universal primary education a central goal in its efforts to mobilize an adequate collaborative national response to orphans and other vulnerable children.

USAID, in consultation with UNICEF and the Government, should pursue the establishment of a national resource center for community-based organizations that are making appropriate, effective, low-cost activities that genuinely benefit orphans and vulnerable children. Such a center could develop mechanisms to channel information, training opportunities, technical support, and judicious amounts of material resources and funds to community organizations. In addition, a resource center could help link developing organizations with donors that prefer to make direct grants.

The STRIVE OR Unit, with cooperation from USAID/Zimbabwe, should identify aspects of USAID programming regulations and processes that hinder effective programming for children made vulnerable by HIV/AIDS. Based on this research and its own experience, USAID/Zimbabwe should consider whether it may be able to make additional recommendations to USAID/Washington, with a view toward the development of regulations and procedures that facilitate effective programming for children and families affected by AIDS.

The STRIVE OR team should calculate the costs per child beneficiary of selected interventions being carried out by its partners, at a minimum, including activities in categories 2 and 3 in Table 1. The OR team should generate such information by determining (1) per child costs of its partner's interventions and (2) the costs of scaling up or scaling out specific activities to benefit more children. It should also gather quantitative and qualitative information on the results for children of the same interventions. The OR team should prepare a document that compares and contrasts costs and results of the different interventions.

USAID/Zimbabwe and USAID/Washington should seek to obtain costing and impact information for promising approaches and interventions in Zimbabwe and elsewhere in the sub-region that are not currently being implemented by STRIVE partners.

USAID Zimbabwe should fund CARE to implement its Village Savings and Loan approach (which it has developed and has unique capacity to implement). This project should include a strong OR component which USAID/Washington could help to design.

USAID should also consider funding other organizations already working in Zimbabwe, which have a distinct comparative advantage in providing assistance to vulnerable children. This should include particular attention to children without family care.

USAID/Zimbabwe should seek the cooperation of the Nairobi office of the World Conference for Religion and Peace to explore opportunities for strengthening and expanding and

strengthening the role of faith-based organizations in responding to orphans and vulnerable children in Zimbabwe.

A major emphasis of STRIVE's capacity building with its partners should be to enable them to develop and implement approaches that measurably benefit vulnerable children at a low cost per child.

For a small group of personnel of STRIVE, partner organizations personnel, and USAID/Zimbabwe, STRIVE should facilitate a study visit to the COPE and SCOPE-OVC programs. Following such a visit, STRIVE should work with selected partners to develop necessary skills and methods to mobilize and strengthen community owned and managed activities to benefit orphans and vulnerable children.

STRIVE should collaborate with COPE, SCOPE-OVC and other organizations or programs in the region to develop a community mobilization network for information exchange and training.

STRIVE should strengthen its working relationships with ministries that have key roles to play in developing a scaled up national response to improve safety, well-being, and development of children made vulnerable by HIV/AIDS.

STRIVE should do training with its partners in methods of involving children and adolescents effectively in decision-making and interventions. Such training, however, should be carried out in communities with partners and community members and not in a centralized workshop setting. Part of the training strategy should be partner-to-partner exchanges involving participation in exercises with children and adolescents in communities.

USAID should ensure the continuity and evolution of STRIVE. CRS should diversify and expand its funding base for STRIVE.

ANNEX 11 DISCUSSION DOCUMENTS

Government Linkages

Ms. G.R. Dete, Ministry of Health and Child Welfare

The objective of the presentation is to provide the reviewers with the historical, administrative, legal, policy, national and international environment governing the protection and care of children in difficult circumstances in Zimbabwe. Children affected by AIDS are a category of children classified by the National Programme of Action for children as children living in especially difficult circumstances.

Historical Context

The nation state of Zimbabwe is very young having emerged from a protracted war of independence in 1980 as compared to states like Britain, for example, which has operated as a nation state since 1066. Besides the struggle for liberation, the country had also struggled with economic sanctions imposed by Britain to punish the colonial “settler community” which had unilaterally declared themselves independent from Britain to prevent or delay African majority rule.

The Zimbabwean economy was therefore not in good shape even at its birth as a state. To correct the enormous inequities between the European and African races in the country, the new government developed the overall economic policy of “Growth with Equity” out of which was derived the health policy of Equity in Health guided by the Alma Ata declaration and definition of Health as not merely the absence of disease or infirmity but the physical, social, mental and economic well being of an individual.

Correcting the gross disparities in health care provision and education for the African population in the native reserves constituting about 80% of Zimbabweans meant an enormous investment in the construction for example, of forty district hospitals with corresponding clinics in an endeavour to reduce the distances travelled on foot to reach a clinic to ten kilometers. Primary and secondary schools doubled between 1980 and 1995. The medical school intake for student doctors was also doubled and all the training for other professional groups was also expanded. The rural population in the former native reserves now known as communal lands carried then, as now, the heaviest burden of ill health as the soils are poor. The rainfall is poor and these areas are infested with malaria, sleeping sickness, and bilhazia. Infrastructure like roads, bridges, and dams are poor in some cases non-existent. Portable water and sanitation are poor.

All the developmental efforts of the majority government registered significant gains in the health status of the population resulting in for example the reduction in infant mortality from about 300 deaths per 1000 live births in some parts of Zimbabwe to about 80 deaths per 1000 live births. Infant mortality for the non-African segment of the population was and still is around 14 deaths per 1000 live births even with the AIDS pandemic.

Most of the expansion in the social sector did not come about as a result of a vibrant industrial and commercial sector but from borrowing. Then came the deadly virus on population with very poor life chances as a result of malnutrition, general poverty and disease. Oakland Ross writing for the Toronto Globe and Mail on August 10, 1991 aptly captured the fearful state of a weakened population also under attack from AIDS when he said “If some malevolent and ingenious god wanted to inflict the greatest imaginable harm on the widest possible scale, he might well choose AIDS and he would put it in Africa” but I say he would put it in Zimbabwe. With the current economic sanctions imposed by the West, the country may well be jostling for the number one slot in the prevalence, mortality and orphaning as a result of its weakened ability to fight HIV/AIDS.

Government Legal and Administrative Response to Meet the Needs of Orphans and Vulnerable Children

- Government has ratified the Convention on the Rights of the Child and had already enacted legislation such as, the Child Protection and Adoption Act, The Public Health Act and The Education Act
- Government established Victim Friendly Courts that specifically handle cases of child sexual abuse.
- Government through the National AIDS Council collects 3% AIDS levy, which is disbursed through District and Ward AIDS Committees.
- District Development Committees at district level consisting of departmental heads from government ministries, NGOs, CBOs and Traditional Leadership and their Social Services sub-committees address issues of vulnerable children.
- Establishment of Child Welfare Forums which are formal sub-committees of the DDCs in districts oversee the welfare of vulnerable children and feed into the National program of Action for children

The National Social Protection Strategy comprising:

- Basic Education Assistance Module
- Zimbabwe National Strategy on children in difficult circumstances.
- Rural and urban public works Strategy for income transfers to vulnerable households.
- Assisted Medical Treatment – for vulnerable persons.
- Drought Relief and Supplementary feeding for vulnerable children

Constraints

- The high turnover of District Social Welfare Officers is being remedied through the orientation of Local Authorities to undertake the functions of the Social Welfare Officers as Probation Officers.

Why Linkages?

- To minimize duplication and wastage of scarce resources
- To enable equitable distribution of services both geographically and by categories of vulnerable children
- To enhance quality of care by referrals to professionals and institutions of difficult cases like abuse and other requirements of children such as birth certificates

Importance of forming linkages with government.

- Government has the primary responsibility to deliver services, protect and care for the vulnerable child. NGOs assist government to fulfill this role.
- Government has permanent structures through which NGOs should operate.
- Government has a coordinating planning mechanism at village, ward district, provincial and national levels. The coordinating Committees are village, ward, district and provincial development committees and child welfare forums all of which feed into the national program of action for children with a secretariat housed in the Ministry of Health and Child Welfare.

STRIVE linkages with government so far:

- The key collaborating ministry is the Ministry of The Public Service, Labor and Social Welfare for children in difficult circumstances.
- In the education sector, STRIVE has obtained clearance from Ministry of Education, Sport and Culture to provide wet feeding in schools. Discussions were held at district, circuit and school levels.
- BEAM is represented on child school fees selection committees to prevent duplication.
- Health and Child Welfare, Education, Sport and Culture and Public Service, Labor and Social Welfare ministries provide the authority to feed at Education Care and Development Centers for the pre-scholars.

RECOMMENDATIONS:

1. STRIVE should use existing structures, such as the DDCs and the DACs which are sub-committees of the DDCs, to foster coordination and linkages.
2. To support the STRIVE partners, CRS should play both a monitoring and facilitative role to ensure that the partners are making relevant linkages with government departments, local authorities, and other NGOs in STRIVE operating areas.
3. STRIVE should be more pro-active than reactive in forming linkages.
4. STRIVE should formalize a process that ensures coordination at national and partner level.

STRIVE should strengthen working relationships with mother ministry which is the Ministry of The Public Service, Labor and Social Welfare. However in the absence of social welfare officers,

STRIVE should consult health and child welfare as they are the coordinating ministry for children in the country.

The National AIDS Trust Fund is a Noble innovation, which is mobilizing additional resources for the fight against AIDS. No other country in the region has such an innovation. It demonstrates Zimbabwe's commitment to fight the scourge and uphold the rights to life and development even of the most vulnerable children who live in especially difficult circumstances.

CHARACTERISTICS OF CHURCH STRUCTURES

Linda Lovick, CRS/Zambia

The following is a brief outline of characteristics of church structures in the sub-Saharan region and challenges of working with or within them. This summary is neither exhaustive nor a claim that all church systems are the same, but rather a compilation of observations based on experience. By definition, then, these comments will be general in nature and limited in scope. The intent is that they may be of assistance in formulating recommendations.

Characteristics of Church Structures:

- local churches ultimately accountable to a higher authority
This can be a Board of Directors, the Pope, a Mission Board located overseas, as examples.
- usually very hierarchically organized
Church structures are often very well organized with clear reporting pathways, often vertical and hidebound.
- high level church leaders may be very powerful
For example, Catholic bishops have a lot of power within their own diocesan borders and a sense of established territory, while other church heads may still be establishing their area of 'fit'.
- often have an international staff
Permanent church staff as well as lay volunteer or missionary staff come from countries all over the world.
- often cover a large geographic area, province e.g.
- sometimes apply inappropriate reasons for hiring
Motivated by compassion, staff members may be hired who lack the proper skill set for the position.
- offer comparative advantage via pre-existing and extensive community structure
Some denominations have developed and maintained deep community penetration and relationship; indeed they can represent a primary institutional component for development services delivery.
- church members are often the backbone of community responses and interventions
Often in Home Based Care (HBC) and other community-based programs, recruitment takes place in part through local churches. The community wants to have "caring" people (and with "good reputations") in the role of volunteer caregivers and churches are perceived as havens of such people for both caregivers and those to vet potential caregivers.
- service delivery across faiths
CRS strongly requires that its funds provide services to target beneficiaries regardless of type of church membership or type of religious practice.

Challenges, or Issues with Implications:

- **differences between project staff and church staff salaries**
 Churches often have salary policies applicable in their own jurisdiction that may or may not be consistent country-wide, but usually cannot easily be changed. Projects coming in can pose a threat to the equilibrium and create unintended tensions in a number of ways. Such projects may have a better ability to respond to and reflect the current cost of living. They may wish to adhere to a neighboring or country-level pay rate for internal consistency that doesn't match the church structure's rates. Any scheme could provide more or fewer allowances than the host church structure.
- **the personalities, energy for development and management skills of church heads vary considerably**
 These factors can combine to provide an operational environment for response and development that supports a reality anywhere on the spectrum from stonewalling to progressive, proactive support for innovation.
- **church heads are usually very busy and are away a lot**
 This is especially germane when release of funds, check signing, contract ratification or other critical fiscal duties lie in the hands of that church head. When such duties are delegated to other high level church officials this is less an issue. Other activities can also be affected; when project proposals are developed collaboratively, RFA deadlines can be impacted.
- **some churches are constrained from strongly advocating for or distributing condoms**
 The obvious one in this category is the Catholic church. At minimum, this issue has ramifications for HIV/AIDS prevention programs funding.
- **religious beliefs make it hard for churches to target because they want to reach ALL the needy**
 It is often difficult for the staff of a church structure to really grasp the limitations of service provision to targeted beneficiaries even when they have fully participated in the conceptualization of the project. Inherent in most religions is a mandate to serve, and it is problematic to put boundaries on that basic tenet in the face of broader unmet need.
- **parsimonious with funds, church project holder staff may spend too slowly to guard against running out**
 Churches are continuously faced with people seeking services or support from them. When they do acquire funds, there is often a sense of wanting to stretch out these resources as long as possible. This good intention comes into conflict with 1) implementation plans, and 2) 'next tranche' funding level based, to a certain degree, on current tranche actual spending.

Volunteerism in the context of the CRS/STRIVE Project: Which way forward? Notes from a discussion session on May 19, 2003

By Pelucy Ntambirweki, UNICEF

Arising from the perceptions from the field visits in the project area, the CRS/STRIVE review team proposed that volunteerism should be discussed further as a candidate issue that impacts on service delivery at the field level.

John Williamson highlighted three approaches, underscored their relevant impact and cost to service delivery at the community level:

- Direct service delivery—agency submits proposal to funder, contract is negotiated for delivery of services to targeted beneficiaries. The services are pre-determined without the participation of the community.
- Service delivery through community participation—agency pursues specific activities with agency training and support.
- Community owned and managed activities—community analyses own situation, decided what and who is concerned and initiates action. May be catalysed by one community member or an external agency.

Emerging challenges from the discussion:

- Definition of a “community; - a group of people with collective interests, articulating their needs and interests...should this collectivity/commonality be interpreted as a community based organization, and treated as such rather than as a group of volunteers?
- Challenges of volunteerism in the face of HIV/AIDS, the exponentially growing orphan crisis, the overstretched community capacities and deepening poverty at the community level was underscored.
- It was emphasized that abject poverty is and will continue to be major constraint/impediment to volunteerism. No doubt, the caregivers’ capacity to cope is overstretched by the debilitating effects of HIV/AIDS; resource-poor volunteers’ need to support themselves and their families ... pertinent to their ability and willingness to continually sacrifice their time and resources.
- Is the direct service delivery support approach, pre-determined by the agency, destabilizing the communities’ capability to analyze and solve their own problems?
- When does the community participation become voluntary? For example, the community schoolteacher - where an individual spends time and other resources for a whole day/month/years teaching vulnerable children. Is this volunteerism? Or, a caring woman who has been visiting a few of her sick neighbors/friends, she is now expected to visit and provide care and support to more sick people; often homes to be visited are many kilometres apart, necessitating traveling several kilometers on foot, on an empty stomach. How long

can this spirit last? What are the implications to her time in relation to providing care and support to/ meeting the needs of her household members?

- Is it realistic/feasible to mobilise other members of the community to participate in an economic empowerment programme, when their own financial capacity, too, has been eroded by the prevailing poverty.
- The community is cognisant of the fact that the agency/programme has been funded, with well-remunerated staff members; on the other hand, the community members are expected to undertake some of the project activities ,without pay, under the pretext of their service to their community. Is this an issue of double standards?
- If and when communities are remunerated, how “sustainable” is this approach in the long run?
- Community capacity strengthening versus incentives through training and provision of tools to carry out tasks (gloves for home based care or bicycles for community mobilisation) where does one draw the line between the two?
- Disharmony/disagreement? between agencies...differing approaches to volunteerism...some agencies have a policy of compensating (allowances, transport subsidy, food handouts) members of the community for their serviced rendered, others decline thus creating long term mistrust at the community level.
- Should the overlap between direct service delivery-community participation-and community owned and managed approaches be explored?

The review team reached a consensus that:

1. Traditional coping mechanisms have been greatly eroded by HIV/AIDS and deepening poverty. Clearly, it is a fact that the resilient traditional coping mechanisms are either greatly weakened or nonexistent.
2. Given the observations coupled with the prevailing situation in the country, there is need for the CRS/STRIVE Project through the sub-grantees to consider providing the relevant tools or incentives in - kind (bicycles, gloves, shoes, t-shirts, uniforms) to facilitate volunteers. In many cases, this is **all** the volunteers request to undertake additional responsibilities.
3. There should be a deliberate effort to value volunteer/community contributions to programmes, which should be reflected in the project budget (land, time, knowledge and resources should be costed) in addition to volunteer participation in the programmes, this will go along way to improve their quality of life.
4. Skills-transfer–capacitating the community members is critical to improve the efficient delivery of services as well as guaranteeing continuity and ownership of the programmes.

ANNEX 12 PROCESS OVERVIEW and EVALUATION

By Mark Loudon

I. INTRODUCTION

The purpose of this annex is to briefly record the process which was employed to set up and implement the mid-term review, in order to serve as a guideline to any organizations contemplating a similar exercise. This overview should be read together with comments on the review process from the review team and the summary of the STRIVE process evaluation, both of which follow the process overview.

This annex does not aim to explain the rationale, objectives or methodology of the mid-term review of the STRIVE project. These subjects are dealt with in the Scope of Work the report produced by the review team.

II. PROCESS OVERVIEW

A. *Genesis*

The idea of a mid-term review is not contained in STRIVE's founding documents, but appears in the STRIVE annual workplan covering the period 1 October 2002 to 30 September 2003, as follows:

In Q3 (May) of FY '03, STRIVE and USAID will conduct a collaborative mid term peer review of progress to date. The purpose of the exercise will be to ensure that STRIVE and its sub grantees have put into place adequately rigorous measures, systems and personnel to achieve the results that project stakeholders expect to achieve. STRIVE will use the outcome of this review to tighten up areas that need improvement, and to make any mid-course adjustments necessary for ultimate success.

A Scope of Work (SOW) for the review was developed collaboratively by personnel from CRS/STRIVE and USAID, including the Principal Advisor from USAID's Bureau for Africa who was asked by the two Zimbabwe-based offices to lead the team. The consultation over the SOW extended over a number of months, from late 2002 through March 2003.

January – February 2003

During this period a number of developments took place:

- The newly-appointed unit manager for operations research at CRS/STRIVE was asked to coordinate the review process;
- A number of key review team members were approached to participate, including an organizational development expert, an expert in orphans and vulnerable children, a technical report-writer and a logistician;
- A short-list of other potential consultants was developed, and some were informally approached to ascertain their availability.

March 2003

At this time the logistician came to Harare for a two-week period to work with the coordinator in order to prepare the way for the review. The major activities undertaken during this period were:

- To finalise the structure, methodology and deliverables of the mid-term review. This involved a series of meetings with the management of CRS and USAID, and a short trip to Botswana to meet the review team leader who was attending a conference in Gaborone.
- To confirm the membership of the review team. This proved to be considerably more difficult than anticipated. Many of the people who had been identified as potential members were not available. Many additional names were suggested and approached, and again many were not available. In the end all the identified “portfolios” were filled, but two of the consultants backed out at the last minute leaving gaps in the process.
- To initiate a self-assessment process. This was accomplished by facilitating a meeting of the CRS/STRIVE unit managers, and designing a process. It was decided by this team that they would manage the process themselves, and keep the results for internal use.
- To prepare an operating environment document. The logistician (who also acted as a facilitator and report-writer) prepared a short overview of recent scenarios prepared by USAID and other agencies on the situation in Zimbabwe, which was shared with the review team members and others.
- To form a Reference Group. This group, made up of local stakeholders, was set up as a resource for the review team, to support their work and validate their findings. A list of potential members was agreed by CRS/STRIVE and USAID, and a standard invitation letter drafted and approved.

April 2003

The organisational development specialist, technical writer and logistician all arrived in Harare during the third week of April (after Easter).

28 April – the first meeting of the Reference Group was held. Unfortunately an extended stayaway for the preceding two weeks hampered the distribution of invitations, and attendance was poor. However most of the invited members indicated they would attend the second and third meetings, scheduled for 19 and 28 May respectively.

30 April – the CRS/STRIVE team held a workshop to review the results of their self-assessment

B. Review Process

5 May

The mid-term review began officially on this day with a one-day workshop attended by the review team, the CRS/STRIVE team, representatives from the Reference Group and senior staff from both CRS and USAID. The workshop included presentations by all of the CRS/STRIVE unit managers and the review team specialists, and a discussion of expectations and processes.

6–7 May

These two days were set aside for the review team to reach consensus on methods and to formulate their review instruments. In practice, much of the time was taken up by discussion of the review objectives (see comments by the review team). A simple “generic questionnaire” was ultimately adopted by the group as a general format for interviews.

8-16 May

Over this nine-day period, most of the review team travelled around the P8 projects. The group was made up of the specialist consultants in the various interim result areas; generalists –

including a group of peers from similar projects in neighbouring countries, most of whom joined the team for limited periods – and a support group, including the logistician and technical writer. The team was also accompanied by regional staff from CRS/STRIVE and the supervising officer from USAID.

Each day the team divided itself into groups, with one group meeting staff of the sub-grantee organizations who were involved in the STRIVE project, while others visited some of their interventions and interviewed community leaders, committee members, caregivers, teachers and children. In the evenings the review team gathered to share their observations.

The team leader joined the group on Sunday 11 May. The major debate within the review team up to this point related to the question: who are we reviewing? Ultimately the group agreed that its recommendations could relate only to CRS/STRIVE, and that observations of the sub-grantees and participating communities could only serve to inform those recommendations. While this field-trip was underway, two members of the review team were visiting the P8 sub-grantees separately to examine their accounts and talk to their accounting and administrative staff. The organizational development specialist spent this time in Harare, working with CRS/STRIVE staff to complete her assignment. She later visited two of the sub-grantee organizations in order to gain an understanding of the context in which CRS/STRIVE operates.

17-27 May

Once the review team had re-assembled in Harare, they spent virtually all of their time in their hotel, which also served as a meeting place and office. In order to firm-up their observations and recommendations, each of the IR specialists was asked to conduct a mini-workshop with the rest of the review team. This gave them an opportunity to tap into the observations and ideas of their colleagues on the team.

Time was also allowed for members of the review team who came from similar projects in neighbouring countries to talk about their experience, and compare this to their observations of the STRIVE project, while government representatives on the team participated in all the sessions and made a presentation on government linkages.

On 19 May the second Reference Group meeting was held. The review team updated the Reference Group on progress to date, and discussed their approach to finalising the report. Thereafter a number of meetings were scheduled in the hotel with external stakeholders, including senior representatives of the S8 sub-grantees, USAID's partner agencies, and staff from both CRS/STRIVE and USAID. The team leader also met with a number of key government officials and donor representatives.

The various mini-workshops and discussion sessions were documented, and these papers ultimately formed the basis of a series of separate reports on each of the interim result areas (education assistance, psycho-social support, economic strengthening, food security, operational research, organizational development and capacity building). A number of supplementary papers were also produced on scaling up, volunteerism and organizational strategy.

These papers were shared with the CRS/STRIVE team and staff from USAID during a series of workshops over the long weekend of 24-26 May, and their inputs were captured in revised documents which were consolidated into a "zero draft" of the review report, which was circulated among the review team for comment on 27 May. It was agreed the consolidated report would be accompanied by a series of annexes on each of the interim result areas, providing more contextual information and detail on the recommendations.

28 May

At the last meeting of the Reference Group, the team leader presented the key findings and recommendations. It was agreed that the first draft of the report and annexes would be circulated on Friday 30 May, and that all stakeholders would have two weeks to provide feedback to the technical writer. The final report would be published not later than the end of June.

A process for CRS/STRIVE and USAID to evaluate the mid-term review was also agreed, and it was confirmed that the team would provide this overview of the review process, and their own suggestions for improving similar reviews.

III. REVIEW TEAM COMMENTS ON THE PROCESS

After the final Reference Group meeting the review team met to give their opinions on the review process and make suggestions for similar exercises in the future.

There was much about the process which received positive comment, including the huge commitment of time and effort by CRS/STRIVE and their sub-grantees to coordinating and facilitating the review. The openness and professionalism of these staff, and their courage in submitting themselves to such an intensive and high-profile exercise, have been commented upon elsewhere.

Members of the review team said they had learned a great deal both from the STRIVE project and from each other. It is ultimately for CRS/STRIVE to evaluate the review findings, but members of the review team felt they had done their very best to provide useful insights and constructive guidance.

Evaluation or review?

However there were some serious concerns. Principal among these was that the review had attempted to achieve two distinct and contradictory objectives:

- to “evaluate” CRS/STRIVE (despite protestations from USAID and CRS/STRIVE themselves that this was a simply a “review”) in order to fulfil USAID’s legal requirements, and
- to engage in a “participatory review” which would reflect the combined insights of STRIVE stakeholders and review team members.

The first objective was not stated in the scope of work but was clearly articulated by the team leader. In order to fulfil this objective the team tried to protect the ethical integrity of the process by limiting their exposure to the opinions of CRS/STRIVE personnel so their findings could not be attacked later as being unduly influenced or biased.

However this decision was at odds with the intention stated in the scope of work of conducting a participatory review which, by definition, represents the collective views of insiders and outsiders. Indeed, the review team shared the frustration of CRS/STRIVE staff at the limited opportunities for sharing and learning from each other, and it is possible that the team’s final recommendations would have been better had the process been more participatory.

In the final analysis the review process was not sufficiently rigorous to draw authoritative conclusions on the performance of CRS/STRIVE. But even if the process had been academically structured, the inclusion of USAID employees and contractors on the review team (including the team leader) and the presence of CRS staff in most of the discussions would have created an ethical land-mine.

On the other hand the process was not sufficiently participatory to be accurately described as a participatory review. This is not to say the review was a wasted exercise, by any means, but the

team would recommend that similar exercises in future take care to avoid blurring the line between evaluation and participatory review. If each is required it would be best to separate them entirely, both in terms of time and membership.

Too big?

Another major concern was that the review team was too big, and the review process too long and too expensive, given the scarcity of resources and the short time period allowed for the STRIVE project. If the exercise had been clearly identified as an evaluation a very small group of external consultants could have done the job much quicker and much better, at a fraction of the cost.

However there may be a case to be made for a large international team to be assembled for a (true) participatory review, if the project warrants it and funds are available. Certainly the team believes that STRIVE is a very important project, but they were not in a position to reach any conclusions on the cost-efficiency of the review process.

Separate or together?

A related issue was the decision that most of the review team members should travel together for the field trip, and work together in Harare to reach consensus on their findings and recommendations. Concerns were expressed by team members at the beginning of the review about the itinerary which had been prepared for them, which assumed the team would stay together, but it was decided that the disruption which would be caused by changing these arrangements at short notice, to CRS/STRIVE, their partners and participating communities, could not be justified.

The effect of working together was that an enormous amount of time was spent discussing the purpose of the review, and the implications of the team's observations. At any given time there were 15 or more people on the team, all of whom had strong opinions which needed to be aired and discussed.

It is an open question whether dividing the review into sections, and delegating each section to a sub-group of the review team, would have weakened the quality of the findings and recommendations. Nevertheless the consensus of the review team was that, if they were to start again, they would prefer this approach, and would like to spend more time with each sub-grantee (including the S8, whose involvement in the process was limited to a single group meeting) and other key stakeholders – particularly the Director and staff of CRS/STRIVE.

Review schedule

The team made several observations on the scheduling of the review:

- The team should have reached a common understanding on review objectives before engaging in any interviews with STRIVE stakeholders. In fact the team struggled for two full days to define their task before departing on the tour of the P8 sub-grantees, and continued this debate for much of the field trip. With the benefit of hind-sight it appears the conflicting needs for an evaluation and a participatory review, and the delayed arrival of the team leader – who had unique insights into the review process – prevented the team from reaching a satisfactory conclusion.

- The review team should have spent much more time with the CRS/STRIVE team and Director before meeting with sub-grantees and visiting their interventions. Greater clarity on the project, and on the views of CRS/STRIVE staff, would have enabled team members to use their time in the field more productively – although (in the context of an “evaluation”) they could have been accused later of being biased by what they had learned from CRS/STRIVE.
- Thirdly, it would have been better if all members of the review team had arrived together and worked full-time on the review until the end. However, it was acknowledged that this is very hard to achieve in practice, and there was consensus that it was better to have some of the consultants’ time – especially the so-called “peer review” group from similar projects in neighbouring countries – than to exclude those who could give only limited time to the review.

Review team composition

Much was said about the calibre of the review team and the collective experience they embodied. However the decision to appoint specialists to cover the various “interim result” areas had the unintended effect of compartmentalising their talents, which in turn meant several members of the team felt the full breadth of their skills had not been exploited. It is hard to say whether this is a fault of the process, the facilitation, or the deadlines which the team imposed on itself.

There was also a strong feeling that the team would have been stronger if it had included more Zimbabweans, although it must be said that considerable effort went into locating suitable consultants within Zimbabwe before internationals were approached.

However there was unanimity that the involvement of government and government-linked counterparts on the team was hugely beneficial to both the review findings and the process itself. It is of interest that the inclusion of these people on the review team was recommended by the Reference Group, indicating the wisdom of the process designers in setting up this committee.

Facilitation

Overall the review team felt the process was very positive. They agreed that one of the reasons for this success was that specialists had been appointed to manage the logistics, facilitation and report-writing. Indeed, several members expressed the view that the only reason such a large team was able to survive such a complex and intensive process, in spite of a very difficult environment (stay-aways, shortages of cash and fuel, last-minute changes to team membership etc.) was that they had the benefit of full-time support in these areas. The team also recommended that any future exercise of this magnitude and intensity should ensure that it included, as was the case here, a clinical psychologist and magician!

IV. SUMMARY OF THE STRIVE MID-TERM REVIEW PROCESS EVALUATION

A. OVERVIEW

Process evaluation feedback was collected from 12 team members, i.e. review, reference, peer, and stakeholders. The following is an overview of the quantitative and qualitative information gathered.

Based on quantitative feedback collected (see specific breakdowns that follow), team members felt that the leadership and management of the process, i.e. the team leader, were very good (4 on a scale of 1 to 5). Furthermore, they indicated that the review set-up and process were good (3 on a scale of 1 to 5). They also felt that the process outcome was very good (4 on a scale of 1 to 5) having primarily achieved its desired outcomes and having provided something of value to the project.

Qualitatively, the team members who responded to the evaluation reported that they most liked the participatory nature of the review, the chance to interact with all involved stakeholders, the highly motivated, skilled, committed, and professional members involved, and the interaction and discussions held. They also indicated that, in particular, they least liked the large, unwieldy size of the team, the inadequate time to spend in the field with sub-grantees and in Harare with CRS/STRIVE staff, the insufficient time to work through and discuss issues and recommendations, the comings and goings of team members, and the lack of clarity in the scope of work and in the actual report to be written. Most of the team member respondents felt that the process had added something useful to their own work because of the unselfish and abundant learning and sharing that took place during the process to help children in vulnerable circumstances. As well, the “process template” presented that could be used elsewhere was highly regarded and felt to be extremely useful.

When asked whether they would participate again in this type of process and whether they would recommend the process to another project, the team responded with an overwhelming “conditional yes.” Conditions they recommended included smaller team, more clarification on scope and work, better organization of time available, clarification of team roles, a clear report outline, and much more collaboration with project staff.

Numerous respondents provided some additional comments or feedback that provide some useful insight into the review process and outcomes. Several indicated that they felt the process should be thought out carefully and streamlined to maximize its usefulness. Another pointed out that “...*this kind of process generates a lower level of anxiety and, consequently, more transparency and receptivity on the part of project staff.*” Furthermore, several respondents reported concern over the cost of such a review and questioned whether this same amount could have been better spent on the children STRIVE seeks to assist.

And finally, one respondent summed it up well: *Congratulations for seeing it through!*

B. Quantitative Feedback RESULTS (N=12)

<i>Unsatisfactory</i>	<i>Fair</i>	<i>Good</i>	<i>Very Good</i>	<i>Excellent</i>
<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>

Issues

A. Review Leadership & Management (Team Leader): 4

- | | |
|--|--------------|
| 1. Guided and directed the team | <u> 4 </u> |
| 2. Set clear group rules and conduct | <u> 4 </u> |
| 3. Minimized conflict | <u> 4 </u> |
| 4. Maximized productivity | <u> 4 </u> |
| 5. Established and maintained positive authority | <u> 5 </u> |
| 6. Ensured participatory decision-making | <u> 4 </u> |

B. Review Process and Set-Up: 3

- | | |
|--|--------------|
| 7. Preparation of the field before work began | <u> 4 </u> |
| 8. Team composition | <u> 4 </u> |
| 9. Team size | <u> 2 </u> |
| 10. Research and review methodology used | <u> 3 </u> |
| 11. Amount of time spent in the field | <u> 2 </u> |
| 12. Team interaction | <u> 4 </u> |
| 13. Equal involvement of stakeholders | <u> 3 </u> |
| 14. Use of review team expertise and experience | <u> 4 </u> |
| 15. Use of reference group | <u> 3 </u> |
| 16. Use of peer review team | <u> 2 </u> |
| 17. How relevant were the presentations | <u> 4 </u> |
| 18. Usefulness of background documents provided in folders | <u> 4 </u> |
| 19. Effectiveness of group work and discussions | <u> 4 </u> |
| 20. Organization of meeting (logistics, venue etc.) | <u> 4 </u> |

C. Review Outcome: 4

- | | |
|--|--------------|
| 21. Achieved desired outcome | <u> 4 </u> |
| 22. Provided something of added value to the project | <u> 4 </u> |

C. *Specific Comments RESULTS*

WHAT DID YOU LIKE THE MOST?

- Camaraderie of the team and hearing the viewpoints of experienced, seasoned colleagues
- Clear commitment to children of all those involved
- Consultation and feedback that was promptly given to the project staff
- Discussions amongst team members – *“Passionate discussions between team members”*
- Exposure to the vast knowledge and experience of other team members, which greatly improved understanding of child vulnerability
- Field visits - interactions with CRS/ STRIVE sub grantees and communities – *“it was an excellent chance ‘journey into the people’”*
- Group leadership through Mark and Peter was excellent – flawed only by Peter’s late arrival which was difficult, and our failure to wrestle our way through, early in the proceedings, to a clear understanding of the terms of reference for the team
- High quality/competence of the team members
- Highly skilled, commitment and experienced team.
- Inclusion of peer reviewers
- Interaction among review mission members, in vehicles, on site, in formal and informal meetings was excellent, many learned a lot – *“There was terrific exchange of information.”*
- Interaction with the CRS/ STRIVE sub grantees and beneficiaries
- Involvement of ‘experts’ for each intermediate result area was helpful
- Involvement of GOZ officials, their commitment and input
- Mark’s role in keeping things organized and keeping people on track
- Openness and humor despite all possible obstacles, team spirit
- Participatory nature of review
- Peer Review and Reference Group concept
- Receiving a plethora of references and CDs.
- Team mix
- Ultimate agreement of team to put OR at the core of this pilot project was critical – *“There is no other reason for a pilot project to exist, and much international community money has been wasted on so-called pilot projects from which no one learned anything”*
- Use of Mini Workshops – *“The mini workshops provided good background to develop recommendations”*
- Willingness of CRS/STRIVE to expose itself to such a searching review, and their positive reaction to the (preliminary) findings and recommendations – even though they were not consulted as much as they should have been
- Working with all of the team members - *“It was an extraordinarily talented group.”*
- Wrestling with very difficult issues and did so in serious and productive ways.

WHAT DID YOU LIKE THE LEAST?

- Assumption that we were doing a “review” rather than a mutual reflection on the state of the STRIVE program.
- Changing nature of what would be included in the report and how it would be structured
- Each sector being assessed in isolation raised the expectation of the team on the project, e.g. in education, talk of boreholes for a school, something not within the mandate of STRIVE.
- Field work, if organized differently, could have been the most fruitful part of the mission
- First day – *“Better to have everyone meet each other in a more conducive environment than a day of presentations by consultants.”*
- Frustration of trying to incorporate so many valid and passionately held perspectives into a joint product – *“There was so much talent and our process did not use it to its maximum potential.”*
- Having team members arrive and depart at different times in the process (particularly the team leader) – *“Smaller, tighter, more mobile team would have been better, and for a shorter length of time, or perhaps two visits – one for field, and one for headquarters.”*
- How to resolve challenges within the STRIVE Project could have received more attention during team discussions
- Insufficient time or opportunity enough to liaise with CRS and STRIVE counterparts and government officials who showed interest, in MOESC for example. This was a real flaw in planning, as some of us could have used at least two days of formal and informal meetings with sector colleagues.
- Insufficient time to discuss results and recommendations
- Lack of participation from the initial phase of the process especially missing out on the field visit
- Little time spent in the field - *“Fieldwork should/could have taken much longer.”*
- Logistics of the field visits went terribly awry – too much travel in too short a time, with too little time in batches with too few people, primarily a testing aggravation not to be able to follow on with lines of thought and interrogation because it was someone else’s turn, not good to visit only headquarters and not see the field and vice versa, in each case
- Meeting individual members of the peer review team, but unsure of their contribution to the project/programme, or to the work of the review mission – *“Better use of the peer review group”*
- Members of the team did not declare their bias and brought the bias into the review process without clearly understanding what the STRIVE Project was trying to achieve
- Misunderstanding between a review and an evaluation
- Not enough interaction with CRS/STRIVE
- Not putting CRS at the core of our explorations – *“We should have seen STRIVE more substantially within the context of CRS, its organization and administration, its unique characteristics and processes.”*
- Peer review group was not well utilized
- Proposed post mini-workshop discussions sometimes lost direction
- Question usefulness of recommendations to USAID for the short-, medium- and long-term and whether they were strong and clear-sighted enough

- Raised ethical considerations (as a result of USAID’s legal requirements?), which limited the “*extent to which the review team could work with the CRS/STRIVE team, as a result this was not, in fact, a ‘participatory’ review*”
- Some of the topics could have been done at the beginning of the process, e.g. the session on principles was not very well understood
- Team leader arriving late and refocusing the group
- Team members could have listened more to the CRS/ STRIVE and USAID/Z teams to better understand where both parties
- Team size was too big - “*Evaluation team was too large and the process too long – length could have a toll on project implementation.*”
- Time constraints - the review process seemed long and some of the discussions could have been shortened, too little time to do a thorough review, 2 to 2½ hours allowed a cursory review at best with only the most glaring inefficiencies standing out
- Too many comments taken at face value by the review team members from the CRS/ STRIVE partners, without further verification from CRS/ STRIVE staff, on why certain partners started late, why they were struggling, why funds were not disbursed sooner, etc.
- Too many sweeping statements which were not grounded
- Too much confusion about the scope of work and what was expected – “*Confusion between “review” and “evaluation” and the ethics of a participatory review.*”
- Too much time spend with the team as a whole debating verbally
- Too much time spent on word-smithing the recommendations and too much time spent on going back to the same issues without conclusion
- Uneven distribute of work load

WHAT ASPECTS OF THE CONSULTATION DID YOU FIND MOST USEFUL FOR YOUR WORK?

- Constant interaction made for stimulating thinking – “*but not always along the track the review mission was taking, for there is an element of selfishness in wanting to learn what one needs, rather than wanting to learn what the client needs when there such a plethora of good thinking is going on.*”
- Incredible amount of knowledge gained on OVC issues
- Interaction with team with highly skilled consultants
- Learning from African and other international colleagues who are tried specialists in their field; from government officials; from field workers; from villagers and permanent secretaries.
- Learning together about community-based interventions – “*This is a new field, and very little is as yet understood about how strategic action should be planned, designed and implemented usefully.*”
- Making contacts with many very capable people, benefiting from their perspectives, and learning about their experiences
- Meeting with people in related fields and exchanging information with them
- Observing the extent and manifestations of child-vulnerability in Zimbabwe, which gives important clues as to what may happen in other southern-African countries, e.g. proliferation of child-headed households, collapse of social infrastructure

- opportunity to work with organization/program doing something unique
- Participatory development of the tools used in the review
- Presentations of key findings by the team members
- Process of the review – *“The process is a useful template we need to adopt to our own work in program review.”*
- Process will help as I prepare for a forthcoming evaluation of our project
- Recommendations, some of which I would be able to apply to our situation
- Sharing ideas, lessons learned with highly experienced team members in the field of OVC
- Strong partnership developed among the peer reviewers
- Studying the dynamics of an organization which exists to support and measure OVC interventions. We need many more organizations like this, so it is extremely valuable to learn from CRS/STRIVE.
- Taking a shared approach to addressing very difficult and urgent problems.
- Team’s feedback sessions which made us ‘self assess’ our own work.
- Use of tools and their adaptation
- Usefulness of peer review as it also provided the reviewer and reviewee time to learn from each other, and provide a space for sharing and affirmation – *“We need to arrange more of this – focused peer processes.”*

WOULD YOU RECOMMEND THIS PROCESS TO ANOTHER PROJECT?

12 “conditional yes’s”:

- Highly streamlined version with fewer consultants and clearer objectives
- If it is a true participatory review
- In a modified form, i.e. smaller team, earlier division of labor to put ideas on paper, more exchange on specific text after an initial open discussion, much more collaboration with project staff and less of an evaluative approach or an “expert” consultation
- Smaller, tighter team, with very clear SOW/terms of reference, and a tighter schedule, more carefully worked out in advance in consultation with the review team members
- With specific modifications such as smaller team, better clarification of roles, clear report outline from the beginning, more participation of key stakeholders

WOULD YOU PARTICIPATE IN THIS TYPE OF PROCESS AGAIN?

12 “yes’s”:

- *“How else can we learn so much from so many people in so short a time and get paid for it?!”*
- If the above conditions are met
- More time with individual grantees

ADDITIONAL COMMENTS OR CONCERNS?

- Appreciation for having the opportunity to work with such professional, dedicated and committed people who have only the interest of the program and the plight of orphans and vulnerable children at heart
- Concern with the amount of money spent on this review – I'm not sure whether a review which cost half as much, (i.e. half as many people on the review team) would necessarily have produced less useful findings and recommendations
- Evaluation form should have been completed before the team departed Zimbabwe
- Everyone needed to be clear from the beginning about everyone's schedules – *"The constant arrival and departures of team members were disruptive to the team process."*
- Excellent group process of presenting the day's main ideas and observations daily
- Joint collaborative review can produce the best result in terms of identifying needed adjustments in methods and approach by a project – *"This kind of process generates a lower level of anxiety and, consequently, more transparency and receptivity on the part of project staff."*
- More time is needed for the team to agree on roles, responsibilities, tasks before going into the field
- Observer team is not a useful concept
- Peer review team needed to come into the process earlier.
- Process of building the final recommendations with a multi-sectoral team presents challenges
- Rather than engage in the rather roundabout process of having the team decide what was important for them to focus upon, it might have been easier and faster to present a provisional strategy based on best practices of other review processes
- Support decision to make use of international consultants along with Zimbabweans so that CRS/STRIVE can be measured against regional/global standards, to make the output as widely applicable as possible
- Team "homework" to move the process forward was useful
- Team leader and logistician need to be clearer when the decision making procedure was a democratic process and when it was an oligarchic process – *"There were times when the decision of the entire team was sought only to have one or two people make the final decision. There were also times when the entire team was involved, especially in the first days of the review, when we could have split off into working groups or simply Mark and Pete made decisions unilaterally in certain areas."*
- Think through the process – to make it less unwieldy; more time for the peer review and for key informants/stakeholder participation and feedback
- Wonder how many children could have been helped by the \$\$ spent on the review

Congratulations for seeing it through!

