

**Report of Second Monitor Mission of CARE's  
Community Infrastructure Improvement Project (CIIP),  
Pakistan,  
19 February-8 March, 2014**

**Submitted to DFATD**

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## Abbreviations

Awaz CDS	AWAZ-Center for Development Services
BBCM	Broad Based Community Meetings
CBO	Community Based Organization
CIDA	Canadian International Development Agency
CIP	Care International Pakistan
CIIP	Community Infrastructure Improvement Project
CNIC	Computerized National Identity Card
CO	Community Organization
COP	Chief of Party
CSP	Civil Society Partner
DAC	District Advisory Committee
DCO	District Coordination Officer
DCOP	Deputy Chief of Party
DFATD	Department of Foreign Affairs and Trade Development
EDO	Executive District Officer
IP	Implementing Partner
LCAP	Local Councils Association of Punjab
LSO	Local Support Organization
M & E	Monitoring & Evaluation
MoU	Memorandum of Understanding
NADRA	National Database and Registration Authority
P&D	Planning and Development
PAC	Project Advisory Committee
PAD	Project Approval Document
PIP	Project Implementation Plan
PMT	Project Management Team
PRA	Participatory Rural Appraisal
PSE	Private Sector Engagement
RHC	Rural Health Center
RMT	Road Maintenance Team
SHG	Self Help Group
TDR	Term Deposit Receipt
TF	Takhleeq Foundation
TMA	Tehsil Municipal Authority
TMFB	Tameer Micro Finance Bank
TORs	Terms of Reference
TOT	Training of Trainers
UC	Union Council
VO	Village Organization
WEE	Women Economic Empowerment
WDD	Women Development Department

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- The staff of Takhleeq Foundation, in particular its Executive Director Mr. Mohammad Yaqub and Mr. Mohsin Solangi
- The staff of Awaz-CDS, in particular its Executive Director Mr. Zia Awan, Mr. Manzoor Hussain, and Mr. Imran Zahoor
- The government officials, including the Secretary Women Development Sindh, the UC secretaries, and civil society members, who took time out to meet the mission
- Private sector partners, in particular Ms. Afshan Khan Nanji, Social Investments Manager, Shell Pakistan, Mr. Muhammad Saifullah Malik, Project Coordinator, and Mr. Imran Azeem Manager Training & Development, Shell Livewire Trust; and Mr. Syed Hashim Ali, Financial services Sales Executive, and Mr. Sheraz Safdar, Regional Support Executive, Telenor, Islamabad
- The community members who met us in the broad based community meetings, and shared their views and experiences.

Most importantly, I wish to thank all the Road Maintenance Team (RMT) members for sharing their stories, struggles, and achievements, and for providing such inspiring examples of human endurance and courage in the face of all kinds of hostile elements.

Rafiq Jaffer  
Lahore, July 8, 2014

## Executive Summary

This is a report of the Second External Monitor's Mission of CIIP on behalf of DFATD. It is based on a review of documents provided by CARE, DFATD, Awaz Foundation and Takhleeq Foundation, an initial meeting with CARE staff, field visits, meetings with Sindh PAC members, civil society partner (CSP) staff and private partners, and debriefing with and feedback from CARE and DFATD. The Monitor visited all 9 project districts, including 5 in Sindh and 4 in Punjab and met CSP staff, DAC members, government officials, RMT women (working and graduated), family members of RMT women, key community members, Community Based Organization (CBO) and Self Help Group (SHG) members, and observed on-site training programs, and individual and group businesses run by RMT women.

### Key Findings

1. The project is highly relevant with regard to the targeting of the most vulnerable and needy women, DFATD's poverty reduction and sustainable development policies, the selection of road maintenance as an entry point, the different training programs provided to RMT women, and is consistent with the efforts of local and Canadian organizations, and other donors.
2. The project design was mostly appropriate for its context. However, it did not fully recognize the potential role of the private sector and communication technology in the original design, and increase in minimum wages during the life of the project. The project also failed to identify or underestimated a number of risks, including resistance from large landowners, local interference in project management teams, weak literacy and numeracy skills of most RMT women, high staff turnover, and, most importantly, the absence of a local government structure, and high turnover in government staff.
3. The project made good progress in the achievement of most targets related to Immediate Outcomes 100, 200 and 300 and their related Intermediate Outcomes. The project has made insignificant progress on Outcome 400 (with some exceptions in Sindh), primarily due to the absence of a functioning local government system in the country, the high turnover of government staff, and the absence of strong and sustainable CBOs in project areas. Involvement of UC secretaries has been useful, but is unsustainable.
4. At the Ultimate Outcome level, there is growing evidence of benefits of rural roads for communities, and benefits to RMT women and their families in the form of improved health, nutrition and education of children, re-marriages of widows and divorcees, return of husbands to their wives, greater involvement of women in decision making at the family level, prevention of early marriages, and participation in elections, including some women filing nomination papers.
5. The project has rationalized its use of resources in a number of ways, including the use of local partners, use of Social Mobilizers as trainers and DAEs rather than full-fledged engineers as Technical Officers, conducting trainings in modest settings, with a good trainer-trainee ratio, and using trainees to spread key messages acquired during training to other women.
6. The business training and its implementation has improved over time, with greater confidence and improved literacy and numeracy of new batches of women RMTs, through literacy and numeracy classes for RMTs. Animal

rearing, dairy and village shops are most popular. The project is focusing on promoting multiple, rather than 'non-traditional', businesses, as it reduces risks to women performing a new role. There are increasing examples of successful individual and group businesses. Cell phones helped women in improved communication, cell phone banking, handling businesses, etc., even though delays in wage disbursement were an issue in some districts.

7. There is considerable evidence of improvement in health and hygiene of RMT women and their families, including widespread construction of toilets. However, the spread of unhealthy consumption practices, particularly among children, is a cause for concern. The health insurance scheme failed to deliver, and alternatives are being explored.
8. Partnership with government and CBOs remains weak, while partnership with the private sector is growing, with good results. Partnership with Tameer Bank has evolved into provision of loans to RMTs, while Telenor (Easy Paisa) has won two international awards. The partnership with Shell Tameer is showing encouraging results, despite considerable challenges, while the most recent with Engro in Sindh is picking up. Civil society partners have benefited from capacity building initiatives by CARE, and have helped the project in outreach, linkages, training, advocacy, and follow-up. However, they suffer from high turnover (more in Sindh), weak skills (reading, writing, mentoring, coaching, monitoring, business, research), etc.
9. The project has sound financial management policies and procedures. However, there are weaknesses in data updating, organising and reporting which need to be addressed.
10. Sustainability issues include the low durability of earthen roads, sustainability of businesses, weaknesses of CBOs, and the absence of a local government system to take the project beyond 2015. Self-help groups, on the other hand, have proved to be highly successful and popular. Paving of a few roads by the government is a good start to build on.
11. The project has a strong M&E system, a well-developed research agenda, and regular reflection meetings for project review and correction.

### Key Recommendations

Based on the issues and weaknesses identified, as well as the strengths and achievements, the report makes detailed recommendations in the areas of learning/training, partnerships, advocacy, RMT businesses/income generation, health and hygiene, and areas for research/evaluation.

## 1. Introduction

The CIIP was initiated in 2010. Due to the devastating floods in the middle of 2010, the project designed and implemented a community infrastructure reconstruction and rehabilitation program during 2010 and 2011. This enabled the project to focus on the defined objectives of the program, which involved empowering the most vulnerable and marginalized women using road maintenance as an intervention.

The revised work plan for the period February, 2014 to July, 2015, and the TORs of the second mission were approved on February 10th, 2014 for the second monitoring mission to take place from Feb 19-8 March 2014.

This report covers the second mission of the external monitor. It describes the mission objectives, the monitor's activities and schedule, the key findings of the mission, and the conclusions and recommendations emerging from the mission.

## 2. Mission Objectives

DFATD's Framework of Results and Key Success Factors identifies the following four development results:

1. Achievement of results
2. Cost-effectiveness of results
3. Relevance of results
4. Sustainability of results

It also identifies the following four key success factors:

1. Partnerships
2. Appropriateness of design
3. Appropriateness of resource utilization
4. Informed and timely action

A key objective of the mission was to get answers to the questions related to the development results and the key success factors. The broad objectives of the mission were to:

- a) verify and validate actions taken by CARE and the IPs on building the capacities of various stakeholders (RMT women, government officials, CBOs, community members) in carrying out road maintenance, improving health and hygiene, diversifying their income base, and monitoring the program at the local level;
- b) verify and validate progress made in the achievement of expected results at outcome levels (i.e., areas that show promise in contributing to outcomes) to the extent possible, especially with regards to improvement in the income base of RMT women and its impact on their lives and those of their families;

c) assess the key components of the project, including road maintenance, training, developing linkages of RMT women with government line agencies and private sector actors.

In addition, the mission sought answers to a set of CIIP-specific questions also given in the Work Plan. These questions, along with the sources from which information was to be obtained, and the method for obtaining the information, are given in the Monitoring Framework in **Annexure 1**.

The specific objectives were:

- i. **an assessment of the Women Economic Empowerment Strategy**
  - a. How is it being implemented?
  - b. To what extent is it contributing to improvement in the socio-economic status of RMT women?
  - c. What are the key challenges and how are they being addressed?
- ii. **an assessment of the Gender Mainstreaming Strategy.**
  - a. How is it being implemented?
  - b. How successful is the implementation?
  - c. What are the key challenges and how are they being addressed?
- iii. **an assessment of the Private Sector Engagement Strategy**
  - a. How is it being implemented?
  - b. How successful is the implementation?
  - c. What are the key challenges and how are they being addressed?

### 3. Project Monitor Tasks and Mission Schedule

The Project Monitor was responsible for the following tasks concerning this mission:

1. Preparing mission TORs
2. Communicating with CARE and CSP staff regarding mission TORs, schedule, and logistics
3. Reviewing the CIIP Bi-Annual Progress and Financial Report for April-September, 2013, and providing comments to DFATD and CARE
4. Reviewing other project documents (list of documents reviewed given in **Annexure 2**)
5. Meeting CIIP team in Islamabad to get their responses to the monitoring questions
6. Visiting project sites in Sindh and Punjab to meet all project stakeholders, and observe on-site training programs
7. Meeting private sector partners and PAC members
8. Debriefing DFATD headquarters and field staff and CARE Canada/Pakistan on visit findings
9. Writing mission report

The mission schedule is given below:

- Meetings with CARE CIIP team in Islamabad (19 February)



- Field visits Qambar-Shahdadkot and Ghotki districts, Sindh, including community meetings, RMTs monitoring, government officials and civil society members in Ghotki (21-22 February)
- Orientation by Takhleeq Foundation, Karachi (24 February)
- Meetings with Shell Tameer, PAC members, Secretary Women's Development, Karachi (24 February)
- Field visits Tando Allah Yar, Mirpurkhas, and Thatta in Sindh, including Road for Life Training, Broad Based Community Meeting, Discussion with Business RMTs, visit RMT individual and group businesses (including self-help groups), observe earthen road maintenance work (25-27 February)
- Field visits Multan, Muzaffargarh, Rajanpur and Vehari districts, including DAC members in Vehari (4-7 March)
- Debriefing with Awaz team in Multan (7 March)
- Attended RMT Festival on Women's Day (8 March)
- Preparation of debriefing (9-12 March)
- Meeting with Telenor and CARE staff (13 March)
- Debriefing of DFATD and CARE Pakistan/Canada (14 March)
- Draft mission report
- Final mission report incorporating inputs from DFATD and CARE

The list of persons met during the mission is given in **Annexure 3**.

## 4. Key Findings

The key findings of the mission are presented under the same headings as DFATD's Framework for Results and Key Success Factors.

### 4.1. Achievement of Results

The project has four immediate, three intermediate, and one ultimate, outcome. Each of these outcomes is reviewed under this section. A detailed matrix, listing targets and achievements, is given in **Annexure 4**.

#### 4.1.1. Immediate Outcome 100: Improved rural roads and other community infrastructure

The project identified 1669 rural earthen roads for maintenance, and prepared maps for each of the 100 UCs covered. Legally binding agreements were signed with RMT women and UCS in each of these 100 UCs. Of these 1468 roads have been maintained, which is 87% of the total. So far 8213 kilometers of roads have been maintained, which is 68% of the target of 12,000 kilometers. Considering that 2250 RMT women are presently working on road maintenance, the project should be able to achieve its target by October, 2014.<sup>1</sup>

A total of 3,694 monitoring visits were conducted, and their findings were quite positive: "... *quality of road maintenance work was good in 89% cases, fractional*

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<sup>1</sup> CARE CIIP Annual Progress Report, 2014, page 9. The report mentions 63% roads maintained, which seems to be a typo, since the correct figure of 68% is given on page 37 of the report.

absenteeism was recorded; tools were in working conditions, wages were disbursed on time (85% RMT women reported that they had received wages in time), and learning from trainings was being implemented accordingly.”<sup>2</sup> The roads we visited during the monitoring visit were indeed well maintained, and the women RMTs were at ease in carrying out maintenance work.

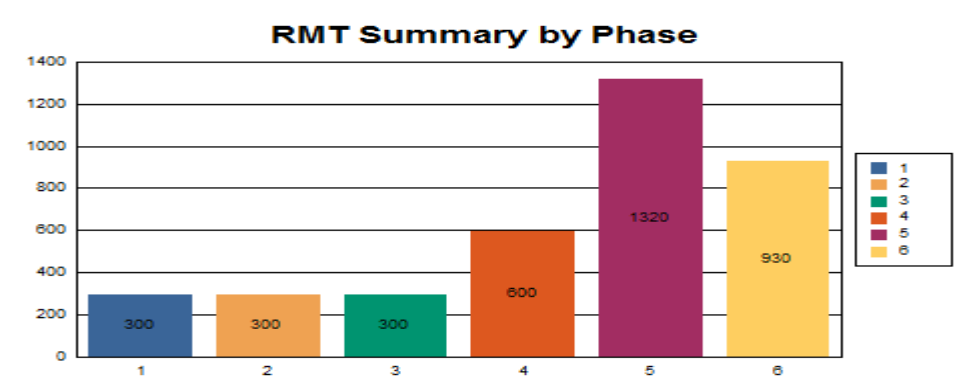
“Even my *haris* [peasants] cannot do such quality work.” – landlord, Mirpurkhas

Most of the community members that we met appreciated the quality of road maintenance work, and the benefits resulting from their maintenance. Their main concern was the sustainability of the roads, and their desire to have the roads paved, as a number of maintained roads have started to deteriorate once the maintenance work discontinued.

#### 4.1.2. Immediate Outcome 200: Increased employment opportunities for local women through engagement in maintenance of rural earthen roads and community infrastructure

All 3750 RMT women completed technical trainings, including health and hygiene knowledge, by March, 2014. RMTs found the training very efficient, with 80% to 85% participants saying that the training environment, organization, facilitation, and materials were good.<sup>3</sup>

As per target 2,250 women RMT members are working in 100 UCs across 9 districts of Sindh and Punjab, while 1500 RMTs have graduated from the program.<sup>4</sup> Of the 1500 women who have graduated, some 78% are reported to be earning an income at least equal to their previous RMT wage.<sup>5</sup> Of the 2250 women recruited in 2012-2013, one third were widows, while a third was separated or divorced.<sup>6</sup>



Source: CIIP MIS database

The figure shows steady increase in the number of women recruited as RMT members, from only 300 in the first phase, to 1320 in the 5<sup>th</sup> phase, and 930 in the 6<sup>th</sup> and last phase, thereby completing the target of 3750 RMTs.

<sup>2</sup> CARE CIIP Annual Progress Report, 2014, page 10.

<sup>3</sup> Ibid, page 13

<sup>4</sup> Ibid, page 12

<sup>5</sup> Ibid, page 38. The total figure given in the annexure is 86%, whereas the actual total comes to 78%.

<sup>6</sup> CIIP Semi-Annual Report (April-September, 2013), November, 2013

The project faced considerable initial resistance to the idea of women working on roads, particularly in Qambar-Shahdadkot, Ghotki and Thatta in Sindh, and Rajanpur in Punjab, which have strong tribal and feudal structures. In Sindh Takhleeq used Participatory Rural Appraisal (PRA) tools to identify the local power structure, identify entry points, and work through them. In Punjab Awaz already had good links with CBOs, and worked through them in most districts. These strategies paid good dividends, and the project made good progress. This is evident from the fact that 11,202 women have so far applied for 3750 RMT positions. Dropout rates continue to be low, and are mainly due to out-migration, deaths, or women re-marrying.<sup>7</sup>

The absence of a functional local government system and resistance from influential community members, mostly men, forced the project to adopt an alternative strategy. The Broad Based Community Meetings (BBCMs) was an outcome of this strategy. During 2013-14 period 15,458 men, women (52%) and children participated in 2,317 BBCMs.<sup>8</sup> This forum has served multiple purposes, including getting support for RMT women working on roads, and disseminating information and materials (e.g. hygiene kits). The project plans to disseminate the Directory of Services through this forum.

While the road work activity has become fairly streamlined at this stage of the project, a major challenge was providing salaries to RMTs through mobile phone accounts. Initially salaries were delivered by Tameer Bank to the RMTs at the UC offices. However, presently 2850 RMTs are receiving salaries through mobile accounts. The need for updated RMT data (phone numbers, CNIC numbers, attendance, replacement, etc.) often resulted in delays in salary payments, more in some districts than others. While the situation is improving with time, it does create a lot of frustration for affected RMTs, who depend very highly on timely wage disbursement.

One of the issues explored in the mission was whether RMTs preferred the old system of salary disbursement by Tameer Bank in the UC office or the new system through Easy Paisa. Despite the fact that more cost was incurred in going to Easy Paisa retail outlets for collection of salaries, most RMTs preferred the new system as they mostly travelled together to the retailer, thereby saving costs, and in the process also purchased groceries, clothes, etc., got market information regarding their own businesses, and, in the words of some, it helped them to 'open their minds'. The fact is that road work has enhanced the mobility of women.

According to Telenor Islamabad head office staff directly involved with CIIP, Telenor has 30 company owned sales and service outlets and 275 franchisees (business partners). Franchisees have 3000 retail outlets known as Sahoolat Ghar Express (facilitation centers), while there are 35,000 Easy Paisa retail outlets. Normally salary is transferred from Tameer Bank to the Easy Paisa retailer in 3 working days. If a SIM is lost the RMT contacts the CSP, who contacts CARE, which applies for a new SIM. The process can become slow, since only the Chief of Party (COP) and Deputy COP of CIIP are signatories.

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<sup>7</sup> CARE MIS database, accessed on 19.4.14

<sup>8</sup> CARE CIIP Annual Progress Report, 2014, page 12

### *4.1.3. Immediate Outcome 300: Improved Capacity among Poor Rural Women to Start Viable Income Generating Activities*

A total of 1225 RMT women have participated in baseline surveys to assess skills and knowledge of women, which is 100% of the target RMTs. No data or reports were available regarding any baseline survey during 2013.

Against a target of 1200, 1185 (99%) technical trainings on gender equity and human rights were conducted by March, 2014. There was an average 48% improvement in post-test compared to pre-test scores as a result of the training.<sup>9</sup>

One issue that was pointed out was that, as per the CARE training manual, girls can marry at the age of 16 under the present law, while NGOs are advocating for 18 years, and the Sindh Assembly has already tabled a bill in the assembly for minimum 18 years for marriage for both boys and girls. The CARE manual, and the accompanying training, needs to reflect this as well.

A number of modifications have been made in the Business Planning and Operations manual and training, which has made the training easier to deliver and comprehend. So far 1247 (52%) business management trainings have been conducted against a target of 2400.<sup>10</sup> According to CARE all training except gender and business management were held on schedule. Prior to this training, the project team conducted 90 pre-business sessions to develop the interest of RMT women to attend the full 12-day long business management training. This led to early start of businesses by a number of RMTs. According to CARE the newer RMTs are more confident than the earlier ones even without business training, having received literacy and numeracy training soon after enrolling in the project, and having seen businesses run by early graduates.

According to CARE more weightage is being given to key knowledge areas in the pre and post-tests of participants as recommended in the first monitoring report. However, the cumulative numbers of RMTs who have attended these trainings so far, or their pre and post test scores, were not available in the last bi-annual report or the CIIP database. Reasons for such gaps include project partners not sending CARE the filled quarterly data collection form provided to them by CARE.

Consequently, and because of the over-emphasis on RMT businesses, the regular analysis of data received from web based monitoring has also suffered. CARE has decided to collect the data during its field monitoring visits. Perhaps some capacity development of partners may be on the cards. This is dwelled on in the section on Recommendations.

During the mission I was able to observe training sessions on Gender and Rights and on Business Planning and Operations. Generally I found the trainers to be very competent and articulate, with good communications skills, and excellent rapport with participants. Participation varied from low to high, though trainers made considerable efforts to involve weaker participants. Since in many cases it was the

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<sup>9</sup> Ibid, page 15

<sup>10</sup> Ibid, page 39

first day of training, therefore it was not possible to assess the learning levels of participants.

I made it a point to assess the literacy and numeracy skills of RMTs during my field visits. There were clear indicators of improvement compared to my previous monitoring visit, except in districts like Qambar-Shahdadkot, Ghotki, Thatta, and Rajanpur which are bastions of feudalism and tribalism, with abysmal poverty, illiteracy, and strong controls on women.

### ***Learning by Observing***

It was the first day of the training of 23 RMTs on “Step Towards a Bright Future” (gender and human rights) in village Vikio Mallah, UC Begna, Tehsil Jati, District Sajawal (formerly a part of district Thatta). In addition to the RMT participants some 18 local women, and a few children, were sitting at the back, observing. They had been sitting there since morning, out of curiosity, as this was a unique experience for most of them. Despite their shyness some of them said that the training was good, and gave examples of what they had learnt. Such unplanned learning is a good example of unintended project benefits.

### ***Improved capacities in health and hygiene***

Comparison of pre and post test scores of RMTs attending health and hygiene training revealed a 44% increase (target 60%) in the knowledge of key health and hygiene issues.<sup>11</sup>

There is considerable evidence that the health and hygiene practices of RMTs have improved during the life of the project. A strong indicator of this was the construction of 1125 toilets by RMTs in South Punjab districts alone since the start of the project.<sup>12</sup> I saw a number of such newly constructed toilets during my visits.

One concern is the sale of unhygienic and harmful consumable stuff at the grocery shops opened by RMTs. A common scene during my field visits to such shops was children buying and consuming sweets, chips, and other harmful edibles of highly questionable quality. On the one hand this is a drain on the resources of poor families, while it is contributing to building poor nutrition habits and poor health among a whole new generation. Rising incomes also increase access to media advertisements promoting urban and western consumption patterns, and create a sense of inferiority about local home grown products. Thus healthful, fresh and cheap local drinks are being replaced by expensive, inferior quality and harmful fizzy drinks and juices. This trend is also adding to the growing pollution in villages, as most of the products sold at grocery shops, particularly to children, come in plastic wrappings and packing. Notably CARE’s MoU with Shell Tameer specifies that women led businesses will incorporate environmental concerns in their practices.

These issues highlight the risk of encouraging women to move away from traditional income generating activities like rearing livestock and dairy, for which women have the necessary skill and experience, can carry on the activity along with other work (e.g. agriculture), is a source of healthful nutrition for the family, can be a source of regular income, and also provides a lump sum of money and good profits from

<sup>11</sup> CARE CIIP Annual Progress Report, 2014, page 14

<sup>12</sup> Awaz Foundation. WEE-CIIP presentation, 7<sup>th</sup> March, 2014

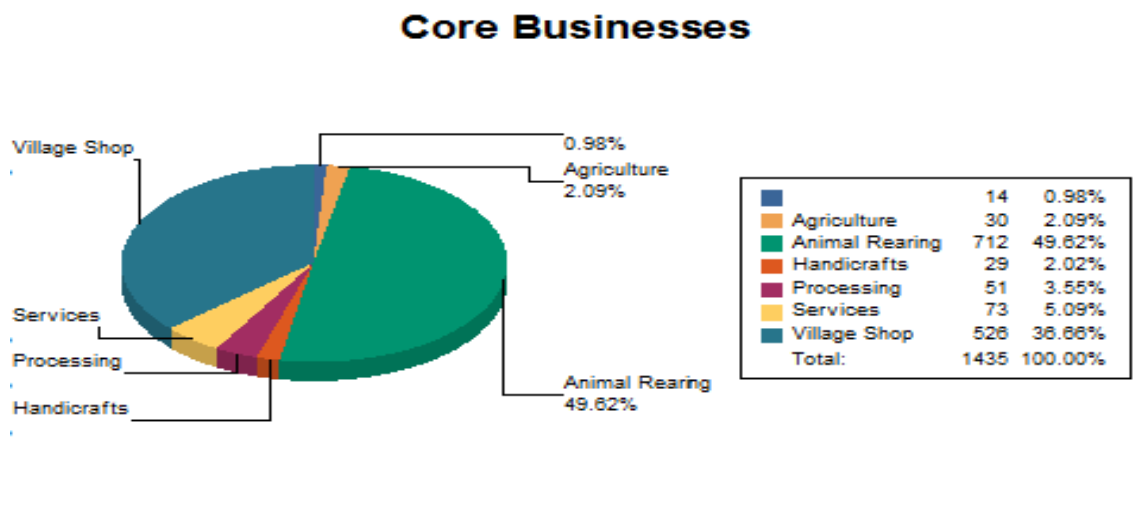
selling animals when demand is high (e.g. Eid ul Azha). Livestock management also does not involve the risks and negative effects associated with grocery shops mentioned earlier, and also enhances productivity and the rural economy. According to CARE RMTs are more used to hard labour (in agriculture) rather than fine hand work (e.g. embroidery), so dairy was a first choice for most of them.

**From Wage Laborer to Contractor**

*Mai Bappi worked as an agricultural wage laborer in a village in District Multan, Punjab before becoming an RMT member. After getting her savings, she acquired one acre of land on contract on which she grew vegetables and obtained a good profit after six months. She got the land fallowed by engaging a tractor, and engaged other women as labor and worked along with them. She then took another acre of land on contract, and grew chillies. When I met her this time (I had also met her on the first monitoring visit), she had purchased three cows, was consuming as well as selling milk, and was cultivating 3 acres of land. Next day she was among the first women who started dancing on the stage in front of a crowd of about 1000 women and 100 men celebrating International Women’s Day in Multan.*

**RMT businesses and income generating activities**

According to CIIP some 1410 out of 1500 (94%) graduated RMTs are doing 36 different types of businesses or income generating activities, compared to only 1% in the baseline survey and against a target of 70%. The main activities are animal rearing (50%) and village shops (37%). Other activities include services (5%), processing (4%), agriculture (2%), and handicrafts (2%). A few women are also involved in knitting, tailoring and embroidery, running rickshaws, embellished garments, seedlings, land contracting, grinding machine, and applique work.



Source: CIIP MIS database

During the monitoring visits I saw excellent examples of individual and group businesses, including embellished garments, seedlings, land contracting, village shops, grinding machine, and applique work. Most RMTs had accounts registers, mostly filled by literate children in the family. The project has indeed been successful in helping women to significantly improve their livelihoods. However, low literacy rates of women continue to be a major constraint, particularly for book keeping and managing ‘non-traditional’ businesses.

## Self Help Groups

In order to encourage savings the project has helped RMTs to form self-help groups (SHGs). In the first Monitor Report it was pointed out that there was lack of clarity regarding the concept of SHGs at all levels. Subsequently CARE and its partners reviewed the concept, developed a proper implementation mechanism, and set out to establish SHGs in each project district. The SHGs are comprised of RMTs working on roads, since they have a regular income and capacity to save on a monthly basis. So far 21 SHGs have been established, including 8 in Mirpurkhas, 7 in Tando Allah Yar, two each in Multan and Muzaffargarh, and one each in Vehari and Rajanpur districts. These groups have generated total savings of Rs. 560,000, and given business loans of Rs. 175,000.<sup>13</sup> Accounts of 3 SHGS in Mirpurkhas district have been opened in Tameer Bank, while forms of two SHGs in Tando Allah Yar have been submitted.<sup>14</sup> By-laws of SHGs are being translated into Sindhi for printing and dissemination.

I was able to meet six SHGs, one in each district, and observe at least 2 SHG meetings. I was impressed by the thoroughness with which the groups had been set up through a transparent process, with clearly defined roles and distribution of responsibilities of office bearers elected by group members, the regularity of their savings, including contributions to the Social Fund for other needy persons, the organized way in which internal lending was being carried out, and in a number of cases, the impressive use of loans for individual and group businesses. Since most RMTs are illiterate, most SHGs have educated girls to help in managing their accounts. Members have used loans to buy sewing machines, transport (cart, cycle, rickshaw) for a male family member to earn a livelihood (e.g. selling vegetables), purchasing and storing seasonal agricultural produce to be sold at a higher price off season, etc. Issues identified included security of savings (being addressed by opening SHG accounts in Tameer Bank using Easy Paisa), and reluctance of some RMTs to pay interest (service charges).

### **Economic Potential of Self Help Groups**

*A Self Help Group in UC 11, Tehsil and District Vehari has 15 RMT members. Three of them took loans of Rs. 3000 each from the SHG, and purchased a motor cycle rickshaw, which is being driven by the son of one of the RMTs to generate family income. The business has been so successful that the women are now planning to buy a second rickshaw.*

#### **4.1.4. Immediate Outcome 400: Increased support from local government institutions and CBOs for women engaged in maintenance work and entrepreneurial activities**

CSPs have MoUs with district governments and line departments (and Awaz with the Sindh government). But the absence of a functioning local government system, the absence of a Project Advisory Committee (PAC) in Punjab and delayed PAC meetings in Sindh, and continuing high staff turnover within government officials (and CSPs themselves) have been major constraints to progress on Component 400. UC Monitoring Committees could not be formed. Under the circumstances it was not

<sup>13</sup> CARE CIIP Annual Progress Report, 2014, page 20

<sup>14</sup> Takhleeq Foundation and Awaz CIIP Quarterly Reports, October-December, 2013

possible to conduct a TNA or develop a manual on gender based programming and monitoring to train government officials.

Four training workshops for 70 UC secretaries were conducted in 2013. However, no details were available regarding the content of these workshops or their outcomes.<sup>15</sup> In March, 2014 some 170 participants, including UC secretaries, and members of CBOs and Self-Help groups attended training on Gender Sensitive Development Planning and Management skills; the training helped to improve coordination between these key stakeholders.<sup>16</sup>

Talking to UC secretaries, one is struck by the universal acknowledgement across districts that **no project has given as much importance to them as CIIP**. That may be one of the reasons for many secretaries being supportive of RMTs despite the absence of any incentive from the project or the government. One constrained voiced by many secretaries was that, being male, they were reluctant to meet and talk to female RMTs on roads for cultural reasons.

Recently (quite late in the project) the project has re-activated 10 women CBOs, one in each district, (including 2 in Multan), to check RMT attendance, resolve issues, provide support in business, and promote linkages between RMTs and service providers. I met a number of CBOs during my field visits. In South Punjab these CBOs were initially set up by Awaz's Integrated Community Development Program as Village Development Councils, but became defunct once the project ended. Some of these CBOs were initially involved in selecting RMTs. Most of these CBOs are not actually community based, but are in fact retail service delivery outlets of NGOs. Most of the women members lack literacy skills, are dependent on men, and are unclear about their role. In the absence of any incentives, the probability of these CBOs meeting project expectations seems to be fairly low. On the contrary the project may have raised expectations of these CBOs – for example, Awaz received a long list of demands from the CBO in Vehari, primarily asking for financial support.

CARE acknowledges that if they had given more attention to CBO formation in the early years of the project, they could have helped a number of BBCMs to mature into sustainable CBOs, with active involvement in project objectives. This is a lesson learnt for similar future projects.

The Local Council Association of Punjab, a partner of CARE CIIP, has played an active role in expanding the alliance of local council associations in various provinces. Its members have also made inputs into the various draft legislations on the revamped local government systems which provinces plan to introduce. However, they have had limited success so far, as many of their proposals were not incorporated in the local government systems proposed by Punjab and Sindh governments, and elections continue to be delayed.

### *Advocacy Strategy*

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<sup>15</sup> Takhleeq Foundation and Awaz CIIP Quarterly Reports, October-December, 2013

<sup>16</sup> CARE CIIP Annual Progress Report, 2014, page 28.



The CIIP advocacy strategy identified the following four specific objectives for advocacy:

- Acceptance of the project model for empowering marginalized women by the government and its wider replication
- Functional local government system and adequate allocation of resources to the Union Councils (especially for a separate % of funds for women and children)
- Opportunities available and availed for life skills training for the poor and disadvantaged
- Reduction in wage discrimination between women and men.<sup>17</sup>

The strategy was reviewed in detail in the last monitoring mission, and the report identified slow and limited progress on this front, primarily due to the absence of a functioning local government system. Since this situation has not changed very much, and turnover among government staff remains a perennial issue, the strategy has not been able to make much headway.

There is anecdotal evidence that payment of minimum wages, which are comparatively higher than the average local wage rate, has led to women demanding higher wages, resulting in improved wages of women in general.<sup>18</sup> If true, this is an important impact. However, it would need to be properly researched and analysed, including comparisons with wages in areas where the project was not implemented.

The **Inventory of Services** for RMTs prepared by the project includes information regarding all support organizations. The project has developed a form which is filled on a quarterly basis. Due to the constraints involved (lack of literacy of most RMTs, restricted mobility, located in rural areas and services in urban areas), use of the inventory has been varied. However, it seems to have picked up in the last year. CARE reported 211 cases of use of services, mostly related to health (155 cases), social welfare (31 cases) and legal aid (20 cases), mainly in 3 districts of Sindh (Thatta, Qambar Shahdadkot and Tando Allah Yar).<sup>19</sup>

### *Gender Mainstreaming Strategy*

The first monitoring mission found that the project gender mainstreaming strategy was being implemented in a highly successful manner. It has succeeded in raising awareness of the rights of poor rural women; involving poor rural women in an economic activity in the public sphere, thereby raising their status both in the community and within the household; training and supporting women to start and run businesses and income generation activities, resulting in improved socio-economic status of poor women. Some 92% RMT women interviewed in the Cost Benefit Analysis study said that their decision making power had increased at the household level.<sup>20</sup>

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<sup>17</sup> CARE CIIP. Advocacy Strategy for CIIP. September, 2012, p. 3.

<sup>18</sup> CARE CIIP Annual Progress Report, 2014, page 12

<sup>19</sup> CARE CIIP Annual Progress Report, 2014, page 43

<sup>20</sup> Ibid, page 15.

It has been less successful in sensitizing government officials and community organizations regarding gender equality principles and practices, and facilitating linkages between poor rural women and district/tehsil administration, UC, micro-credit institutions, skills training centers and business development centers. The main constraining factors have been a non-functional local government system and high turnover among government staff.

**4.1.5. Intermediate Outcome 1: Improved year-round use of maintained roads by light traffic.**

CARE conducted a Cost Benefit Analysis study during the summer of 2013 with 269 women respondents from four districts. Some 77% of the respondents said that the improved roads had reduced their travel time by 3-6 hours; 95% said that improved roads also reduced time required for networking, connectivity and mobility; while 93% said that availability of public transport increased because of the improved roads.<sup>21</sup> Anecdotal evidence from the field supports the findings of the study. In the community meetings attended by the monitor, members were generally appreciative of the benefits of the maintained roads.

The main issue faced by the project is the deterioration in road conditions once road maintenance is discontinued. Paving of roads is conducted by the Union Council, while asphalt (metalled) roads are the domain of the district government. An interesting recent development has been the paving of 35 kilometers of rural earthen road originally maintained by the RMTs. An internal road pavement study by CARE identified the critical role of mobilized community members who wishes to continue benefiting from improved roads.<sup>22</sup>

**4.1.6. Intermediate Outcome 2: Increased and diversified income base for RMT women through participation in income generating activities**

According to the latest progress report 21% of the 900 graduated RMTs were earning Rs. 6000 and above monthly through businesses. A study by CARE of the impact of business education on savings found that 38% of 269 graduated RMTs were doing multiple businesses.<sup>23</sup>

Of the 209 businesses being implemented by RMTs the project listed 34 different types of businesses. Categories with 5 or more businesses in a category are listed in the Table below, along with their mean monthly profit.

**Mean Profitability of Popular Businesses (PKR)**

<b>Name of Business</b>	<b>Mean Monthly Profit (PKR)</b>	<b>Number of businesses</b>
Grocery shop	5286	50
Dairy	5076	25
Trading livestock	6096	21
Contract land	5526	21
Rickshaw	13800	10

<sup>21</sup> Ibid, page 9.

<sup>22</sup> Ibid, page 9-10.

<sup>23</sup> CARE. Impact of Business Education on Savings of Community Women, 2013

Knitting	4860	10
Tailoring	6550	9
Cosmetic shop	4050	9
Vegetable shop	6900	6
Embroidery	2545	5
Clothes shop	2400	5

The data shows that most businesses have earned good profits, which is quite promising considering that they are fairly new.

There is also a steady increase in profitability of businesses over time, from an average profit of Rs. 4516 in Phase-I, to an average profit of Rs. 5840 in the current Phase-IV.<sup>24</sup>

One issue which is not mentioned in any project documents or discussions is the fact that RMTs who employ women in their businesses (e.g. land contracts, embellished garments, applique work) often give less than minimum wages to these women. The issue needs research and discussion.

According to the CIIP M&E Manager average annual spending on health of RMTs has increased by Rs. 1500, while spending on education has increased by Rs. 700. There is considerable positive evidence from field interviews as well, e.g. construction of rooms, toilets, sending children to school who were previously out of school, etc. However, spending by itself is not a very good indicator of good health; in fact it could well be the opposite, i.e. increased expenditure due to poor health. More direct measures of health status (e.g. disease burden, nutritional status) are required.

There is considerable anecdotal data that the use of cell phones by RMTs has helped them to save time and travel costs, increased sense of security and reduced need to have someone to accompany them during travel, developed market contacts (e.g. input suppliers, buyers), with RMTs checking community demand before market visits, etc.<sup>25</sup>

CARE partners have played an important role in facilitating RMT businesses. For example, in Tando Allah Yar district TF helped a large group of RMT women running a rope making business to sign an MoU with a supplier, and 3 RMT applique workers with a wholesaler, and organized an exposure trip of RMT business women to Hyderabad markets. The latter helped women to purchase bulk supplies, establish contacts, and broaden their horizon.

CARE admitted that initially they were not very confident regarding group businesses, but their partners developed linkages within group members and between groups, which led to good results. They also felt that categorization of businesses into three categories (A, B and C) as suggested in the last monitor report proved very useful.

<sup>24</sup> CARE CIIP Annual Progress Report, 2014, page 19

<sup>25</sup> Ibid, page 22

#### ***4.1.7. Intermediate Outcome 3: Increased ability to plan and monitor gender-responsive community-based development initiatives at local government and community level.***

There is no progress related to this outcome in the absence of a functional local government in Sindh and Punjab.

#### ***4.1.8. Ultimate Outcome: Improved socio-economic status of rural disadvantaged women in selected districts of Punjab and Sindh.***

According to the data presented by Awaz during the monitoring mission 1534 children of RMTs previously in child labor were now enrolled in schools, 26 divorced and widowed RMT women had remarried, 42 husbands who had left their wives (RMTs) and children had returned to them due to RMT now being gainfully employed.<sup>26</sup> According to the draft CIIP Cost-Benefit Analysis study 111 out of 269 RMTs from four districts reported sending children to school, with 153 boys and 101 girls going to school after CIIP, and 96% of RMT women report increased mobility. Interviews of RMTs during field visits corroborated these findings.

These figures are indeed impressive, and demonstrate that the project has had a significant impact on gender relations within very poor rural families. Hopefully we will have similar data from TF as well.

According to the Cost Benefit Analysis study, out of the 269 RMT women interviewed, 96% reported an improvement in their health and hygiene conditions, and 94% agreed that it had resulted in reduced occurrence of diseases.<sup>27</sup> I found a number of instances of improved nutritional status through interviews and visits to RMTs. Increased incomes had led to better nutrition, while purchase of livestock had led to increased consumption of dairy products in families of RMTs. On the negative side increased incomes were also encouraging unhealthy consumer practices, more so among children. Again this data is anecdotal and needs to be researched and used for advocacy.

There is also some evidence, even though limited, of an increase in women's participation in community decisions in public fora. For example, women members of a CBO in Jampur installed a public hand pump for use by community members, while in Multan women CBO members approached the owner of a factory creating pollution in the area and got the pollution stopped. Also five RMT women in South Punjab prevented early girl marriages through direct intervention.<sup>28</sup> Increasing political involvement of women is evident from the fact that 11 RMT women have filed their nomination papers for local government elections in South Punjab (see box on next page for my eyewitness account).

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<sup>26</sup> Awaz Foundation. WEE-CIIP presentation, 7<sup>th</sup> March, 2014

<sup>27</sup> CARE CIIP Annual Progress Report, 2014, page 14

<sup>28</sup> Awaz Foundation claimed that over 200 RMTs stopped early childhood marriages. The source of this data needs to be obtained.

### **Transformed Women Celebrating Success**

*The tented ground of a local hotel in Multan was filled with over a thousand people, mostly rural women, including a large number of RMTs from four districts of Southern Punjab, there to celebrate International Women's Day. Many women came on stage and talked about how they had set up and run successful businesses, sent working children to schools, abandoned women had got their husbands back, stopped early childhood marriages, and submitted nominations for contesting local government elections. While a hundred of them performed traditional dances to blaring Punjabi music, an equal number waited to join in, oblivious of the men sitting on the front seats. This was truly the day of poor rural women of Pakistan.*

## **4.2. Cost Effectiveness of Results**

In the last monitoring report it was mentioned that the project has generally been quite cost effective due to reasonable overhead costs, modest offices and salaries, multi-tasking by staff, use of same staff and offices for multiple projects, conducting trainings in modest settings, and encouraging RMTs to spread key messages acquired during training to colleagues. The project continues to utilize its resources in a cost-efficient manner.

## **4.3. Relevance of Results**

As mentioned in the last monitoring report, the project was highly relevant with regard to the targeting of the most vulnerable and needy women, DFATD's poverty reduction and sustainable development policies (including crosscutting goals of gender equality and environmental sustainability), the selection of road maintenance as an entry point, the different training programs provided to RMT women, and was consistent with the efforts of local and Canadian organizations, and other donors. Added project components like access to cell phones and health insurance were also very relevant to women's needs, though the latter did not work out as planned due to poor service quality.

The issues identified in the earlier report (lack of attention to literacy and numeracy, difficult business management training) have been rectified to a considerable extent during the past few months, with positive impacts. The negative impacts of the project focus on promoting non-traditional as opposed to traditional businesses was pointed out in the previous report, and has been redressed to some extent by focusing on multi-businesses as opposed to single businesses.

## **4.4. Sustainability of Results**

The previous monitoring report identified various components of the project which contributed to sustainability, including the maintenance of roads, the businesses of RMT women, the role of women in household decision-making, and the role of local government and CBOs. Key concerns identified included the low durability of earthen roads, sustainability of a large number of businesses, the absence of a local government system to take the project beyond 2015, and the minimal involvement of CBOs. These concerns still remain unaddressed.

Data on business incomes gives an idea of RMT profits, but does not tell us about their growth and sustainability of profits. Initiatives such as the use of cell phones have sustainable potential to help RMTs in business matters (e.g. checking demand,

input costs, etc.), communication and networking at affordable costs. More in-depth research on the most popular businesses (grocery, dairy, cloth) and the impact of multiple businesses would be very useful in this respect.

The fact that 35 kilometers of RMT maintained roads have been paved is a good beginning, one that needs to be supported and advocated. CARE has done well to research and identify the factors which have led to this development. What they need now is a broad and sustained advocacy campaign building on these initial successes. Some success stories could be developed in this regard.

A new and highly positive development is the successful pilot testing of self-help groups (SHGs). These organisations have a great potential, and the project needs to carefully design a replication programme so that the number of SHGs can be increased before the close of the project.

## **4.5. Partnerships**

This section reviews the project's partnership with the government, the private sector, and Civil Society Partners (CSPs).

### ***4.5.1. Partnership with Government***

Issues related to the absence of a functional local government system and high turnover of government staff has already been discussed in the preceding pages. While the progress has been slow, there have been a few developments worth mentioning. For example, the DCO of Tando Allah Yar district formed a committee to assess the impact of CIIP in relevant UCs, and also formed a technical committee to assess which of the maintained roads were suitable for paving. This is a development which needs to be publicized by the project, so that other districts may take up similar initiatives.

Perhaps an even more important development, for the project in Sindh, has been the visit of the Secretary Women's Development Department (WDD) to Tando Allah Yar district only 3 weeks after joining as Secretary. In my meeting with him he said that he was inspired by the project, and had therefore decided to pay a field visit. Another significant development has been a request from the Secretary, asking TF to conduct a TNA of 15 Women Development Officers of the WDD. This reflects TF's advocacy efforts with the department.

Government officials have also mentioned other benefits which could be obtained by RMTs through government linkages, including free medicines, access to crisis centers, participation of RMTs in district government events (stalls, displays), disability certificates to family members of RMTs, and paving of roads through MPAs.

### ***4.5.2. Partnership with the Private Sector***

The project identified the following purposes for its private sector engagement strategy:

- Demonstrate social impact and financial viability of enterprise-based solutions
- Mainstream social enterprise as part of CARE's programming
- Develop a new complementary business model for long-term financial viability to serve CARE International in Pakistan's mission; and
- Support replication and scale-up of interventions to achieve impact.<sup>29</sup>

The enterprise development efforts of CIIP were primarily designed to explore the production and supply chains with a potential to involve women. This is particularly true of the partnership with Engro, and to a lesser extent with Shell, where the focus is on financial inclusion.

Partnership with the **Tameer Micro Finance Bank** (TMFB) (since October, 2011) is functioning smoothly. There were some issues regarding saving certificates issued to RMTs against their escrow savings; these matters have mostly been sorted out. Recent developments have included the use of mobile phone accounts to draw salaries, and the offering of loans up to Rs. 10,000 to RMTs for starting or expanding businesses at 18% interest. Loan size will increase as previous loans are returned.

Tameer Bank terminated its partnership with **Asia CARE** because of repeated complaints about its poor performance, including lack of outdoor treatment coverage, low number of panel hospitals, refusal by some panel hospitals to treat RMTs, poor response to phone calls, etc. CARE had paid premium till April, 2014, and is now considering other health insurance options, again through Tameer Bank. Since RMT women would be paying premium for the insurance, hence the model is potentially sustainable, provided the needed services are delivered efficiently and effectively.

**Telenor** has a Life Insurance scheme with Adamjee Insurance, and provides Rs. 50,000 for a natural death and Rs. 100,000 for an accidental death to those who maintain a minimum balance of Rs. 2000 in their mobile accounts and pay a premium of Rs. 180 annually. However, health insurance is a higher priority for RMTs compared to life insurance, so the Telenor package is not being considered.

CARE's partnership with Telenor has proved very fruitful. Telenor has been quite responsive to the complaints regarding re-activation of SIMs, matching of IDs, and delayed payment of salaries, because of which the number of complaints have decreased, and are present in some, rather than all, districts or UCs.

A big success has been Telenor Pakistan winning the prestigious GSMA Awards for the **best mobile phone money service out of 160 countries** represented. It also shared the award for the best project empowering women in emerging economies with the Benazir Income Support Programme (BISP).

CARE's partnership with **Shell Tameer** (September 2013 to March 2015) aims to build the capacity of 1000 RMTs and facilitate them to establish 300 sustainable micro enterprises. Initially Shell Tameer conducted a TOT for CSP staff, followed by workshops for RMTs doing business. On CARE's request record keeping was added to the training for RMTs.<sup>30</sup> Some of the issues identified by CARE and Shell

<sup>29</sup> CARE CIIP. Position Paper on Private Sector Engagement, May, 2012

<sup>30</sup> According to CARE the objective of record keeping was not clarified to RMTs during the business management training for RMTs.

included the difficulty in RMTs understanding the language of the trainers, many RMTs were older than the youth age group targeted by Shell, remote locations of RMTs resulted in increased budget, delays, mobility and security issues of interns, while the quality and commitment of local urban partners providing training and support was questionable in some of the more remote districts. In March, 2014 Shell trained 270 RMT women and helped them develop business plans in 7 sectors, including bangle embellishment, handicrafts, agriculture, foods, and lubes merchandizing. They will be facilitated by Shell Tameer for market linkages, while CARE will facilitate micro-credit for business start-up through Tameer Bank.<sup>31</sup>

In my monitoring visits in Sindh I visited 3 RMTs trained by Shell interns, including two grocery shops and a poultry farm. While the RMTs running the poultry farm (with male members) had clearly benefited from the business advice of the interns, there were certain issues regarding the kind of products being sold at one of the grocery shops. For example one RMT had a mixture of pills (allopathic medicines) in a large glass jar, purchased on the advice of an intern, which was being sold by her and her son to community members. Shell Tameer was informed about this, to which they expressed great concern, and resolved to follow up on it on an urgent basis.

It was evident that at least some of the interns were either unaware or had not fully benefited from the excellent one page business plans developed by Shell Tameer for setting up handicraft centers, auto spare and oil shop, milk shop, embroidery and applique work, general store, mustard oil mill, vegetables corner, uniform shop/supplier, uniform tailoring, tailoring, glass bangles, mobile general store, grinding/chakki, solar lights, crushing plastic, kitchen gardening, etc. On the positive side, Shell staff shared their concern regarding the finding related to medicines, and promised to look into the issue, including improving their monitoring of interns. Presently some of the business opportunities being actively promoted and supported include recycling of used empty lubricant bottles, women led lubricant shops, and retailing of solar lights.

CARE's most recent partnership is a pilot testing of a dairy milk value chain project in Mirpurkhas, Sindh with **Engro Foods**.<sup>32</sup> This partnership will enable 500 women dairy farmers to form 15 milk cooperatives and 3 self-help groups to access high yield markets, increase yields and incomes, reduce animal diseases and mortality, with a number of women working as livestock extension agents or milk collectors, or setting up input supply shops. So far two meetings have been held between Engro and TF staff. The process had a slow start because of a lack of agreement on the selection criteria of RMTs provided by Engro<sup>33</sup>, which included literacy skills which most RMTs do not possess. However, the project has made progress recently, including selection of 9 out of 203 RMT women as Female Village Milk Collectors and Female Livestock Extension Workers, training of 47 rural women and 5 RMT women in livestock management and linked with Engro milk chilling networks, milk

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<sup>31</sup> CARE CIIP and Shell Tameer. Concept Paper: Capacity building and business facilitation for establishment of sustainable micro-enterprises. 2013

<sup>32</sup> CARE CIIP and Engro. Concept Paper: Strengthening fresh milk collection value chain in Mirpurkhas, Sind. April, 2013

<sup>33</sup> Takhleeq Foundation Quarterly Report, October-December, 2013



production by 3 self-help groups, and opening of four women-lead milk collection centers in Mirpurkhas district.<sup>34</sup>

Ms. Ishrat Gill, Enterprise Development Advisor and dairy consultant, Awaz, District Vehari, was of the view that the Engro project had better chances of success in the Punjab, which had much higher volumes of milk production than Sindh. Awaz staff tended to concur with her view. Unfortunately I was unable to meet Engro staff of the project to get their viewpoint, as they were not located in any of the field districts that I visited.

On the whole, with some exceptions, the project has benefited greatly from private sector partnerships. In fact CARE has helped partners like Tameer Bank and Telenor to earn laurels and greater business as a result of its innovative initiatives.

#### ***4.5.3. Partnership with Civil Society Partners***

CARE has been conducting various capacity building activities to enhance the capacities of its partners, including orientations, TOTs, training programs (e.g. business development and management, gender, security), mentoring, refreshers, exposure visits, reflection meetings, as well as CARE specific training (e.g. governance, conflict, etc.). In the last monitoring report I presented a detailed assessment of the project's two CSPs in Punjab and Sindh, including an assessment of their strengths and weaknesses. There is no report of any of the partners addressing the weaknesses identified, including weak skills (reading, writing, mentoring, coaching, monitoring, business, research) and imbalance in workloads.

While staff turnover has reduced in Awaz, it still remains significant in Sindh. One reason for the provincial difference in turnover are the large distances to be covered in the five Sindh districts, which contribute to staff burnout and make monitoring a major challenge. Some recommendations have been made in the last chapter in this regard.

#### **4.6. Appropriateness of Design**

As mentioned in the first monitoring report the project is highly relevant with regard to the targeting of the most vulnerable and needy women, DFATD's poverty reduction and sustainable development policies (including crosscutting goals of gender equality and environmental sustainability), the selection of road maintenance as an entry point, the different training programs provided to RMT women, and is consistent with the efforts of local and Canadian organizations, and other donors. The major weakness in project design, one which continues to exist, was the failure to anticipate the absence of a functioning local government system, and the lack of strategies to compensate for this gap.

#### **4.7. Appropriateness of Resource Utilization**

As mentioned in the previous monitoring report, the project has sound financial management policies and procedures. Project reports are produced timely, and to a

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<sup>34</sup> CARE CIIP Annual Progress Report, 2014, page 24

large extent follow standard CARE and DFATD formats and requirements. Case studies also serve to provide a human face to the quantitative figures reported on a regular basis. According to the CARE Finance Manager, 73% of funds had been spent in 71% of project duration.

Since CARE has stopped producing quarterly CIIP reports, I had to rely on the latest quarterly reports produced by TF and Awaz. While these reports provide a wealth of information, the potential for improvement remains. For example, in a number of cases (e.g. number of RMTs trained) cumulative data for the complete project period was not available. Often the narrative reports do not reflect all the lessons learned or areas for improvement.

The CIIP MIS database provides useful information regarding RMTs, road work, businesses, training, etc. However, there are considerable gaps. In some cases the data is incomplete (e.g. scores of pre and post-tests of training and cumulative figures of number of RMTs trained not available, Training Monitoring only of Road for Life with locations missing, etc.). Some tables and graphs in the database are difficult to comprehend because of the way they are produced or presented (e.g. RMTs by district, training session status, training evaluation, average business profit, etc.). The database, including tables and graphs, needs to be comprehensively updated and improved.

In response to the growing demand for support for business development CARE has recently engaged an entrepreneurship development officer with considerable experience in the sector. This is a good addition to the CARE team.

#### **4.8. Informed and Timely Action**

Many of the issues identified in the last monitoring report continue to engage project staff, including delays in wage disbursement through mobile accounts, business planning and operation, literacy and numeracy skills of women, health insurance, high staff turnover within government and CSPs (reduced in Awaz), weak reporting skills of field staff, and, most importantly, the absence of a functional local government.

The project has **reflection** meeting every six months (originally every 3 months), in which all project partners and CARE participate. I attended the last reflection meeting in Islamabad in August, 2013. It provided partners a good opportunity to identify issues and risks, and to jointly develop strategies to deal with them.

The project has excellent **financial management** systems and controls, as well as systems for procurement and stock controls. These systems are evidently working well, and there were no reported complaints or issues in this regard.

In general the project has been able to provide **resources and services** in an effective manner, with some exceptions (wage disbursement through cell phones in some districts/UCs).

## 5. Conclusions

On the whole CIIP can be described as a fairly successful project. In terms of progress the project is well on its way to achieve its targets related to road maintenance and women employment. It has also made excellent progress in building the capacity of rural women to carry out income generating activities, though lack of literacy and numeracy pose serious challenges. The self-help group initiative has been an outstanding success, because of its well-structured design, regularity of meetings and savings, initiation of a social support fund, and successful use of loaning for enterprise development.

There has been some progress in reviving CBOs, but this is very much in its initial stage. It is not clear whether these institutions will sustain, and whether they will play the support role for RMTs envisaged by the project. In the absence of local government, and the continued turnover of government officials, government ownership of the project is still a distant dream.

## 6. Recommendations

The recommendations are grouped under various headings, and are in the form of suggestions. It is up to CARE and the CSPs to decide which recommendations are useful and feasible, for incorporating in their next annual plan. The proposed implementer is identified in parenthesis.

### Learning/training

- Organise need-based exposure visits, on the job training, learning from experienced RMTs, and sectoral training (e.g. applique training by TF) in key areas, such as livestock, kitchen gardening, land contracting, and retail outlets (CARE, CSPs)
- Increase allowance for RMTs travelling long distances for training (CARE)
- Make MIS data base more comprehensive. This should include regular updating of data, provision of time series data for key variables, as well as data according to important categories, ongoing data analysis, (e.g. prevention of early childhood marriages), etc. (CARE)
- Operationalize receipt of quarterly data from CSPs for analysis (CARE)
- Develop the capacity of CSP staff to document unplanned learning among the non-targeted population as a result of project activities, as well as the use of services given in the Directory of Services (CARE, CSP)
- Benefit from organizations like Kashf for book keeping training for RMTs (CARE)

### Partnerships

- Use CSP co-facilitators with Shell Tameer facilitators to reduce language barriers in training RMTs (CARE)
- In districts (e.g. Vehari) where quite a few RMTs are receiving salaries late, update information on RMTs and provide Telenor in a timely fashion (CARE)
- Help RMT women to access government opportunities, such as facilities of Crisis Center / Darul Aman, financial support from Baitul Maal (CSPs), free

- medicines, participation of RMTs in district government events (stalls, displays), disability certificates to family members of RMTs, etc. (CSPs)
- Re-think the concept and strategy of facilitating and strengthening CBOs, introduce members to self-help group savings and credit model through presentations, exposure visits, etc. (CARE, CSPs)
  - Develop strategies for effective replication of self-help groups – there is already a demand from partner staff for more SHGs (CARE, CSPs)
  - Provide CSPs with summary reports of all important project documents in Urdu; encourage IPs to have a system of on-going sharing and learning (e.g. weekly or fortnightly meetings to share learning) (CARE)
  - Further support the capacity development needs of staff (e.g. monitoring, mentoring, coaching, reporting, presentation skills), and organize training (CARE)

### Advocacy

- Build on the opportunity created by the visit of the Sindh Secretary, WDD, to field sites, and increase linkages and conduct advocacy with the department for institutionalizing project activities (TF)
- Highlighting the high quality of road work done by RMTs, liaise with District Development Committee, provincial highway and district works department, and private contractors to advocate for recruiting RMTs to prepare shoulders of metaled roads, involve P&D and Finance Departments (CSPs)
- Follow the five-step approach (see box below) or its local variation to convince the authorities to pave earthen roads maintained by RMTs.
- Engage more actively with UC, tehsil and district officials and development partners, and make the DACs more effective, to increase their ownership of project outcomes, and play a more effective role. (CSPs)
- Widely publicise success stories of outstanding RMTs and groups of RMTs in various fields, as done by Awaz on International Women’s Day. (CARE/CSPs)
- Build on the initiative taken by the DCO of Tando Allah Yar district to form a committee to assess the impact of CIIP in relevant UCs, and a technical committee to assess which of the maintained roads were suitable for paving; publicize and advocate in districts where feasible. (CSPs)

#### ***A Five-step Approach to Road Pavement***

1. *Conduct a meeting with the community (BBCM)*
2. *Write an application / joint resolution for road pavement, including reason*
3. *Approach the local MPA / MNA along with village elders and give him application for road pavement. Follow up regularly. Also ask him to forward the application to the DCO/ P&D department, if the road does not require a large amount of funding.*
4. *Since “seeing is believing”, arrange a visit of the DCO/MNA/MPA and meet them with women working on roads.*
5. *In this entire process engage the local power structures, usually the local Wadera / Sardar, who has strong connections with MNAs/ MPAs.*

Source: CARE Focus Group Discussion analysis, 2013

### RMT Income generation/business

- TF advice to store seeds should be widely promoted in RMT agri-businesses

- Avail government opportunities, such as training and orders for production (e.g. bed sheets and pillow covers, uniforms) from Sanatzars (industrial homes), training and seeds for kitchen gardening from Punjab Agricultural Department, in order to provide RMTs with employment opportunities
- Improve monitoring of graduate interns supporting RMTs in businesses (Shell Tameer, CARE)

### Health and Hygiene

- During the BBCMs give key messages, including health messages, with a focus on practices affecting children's health (e.g. promotion and use of healthy as opposed to junk foods) (CSPs)
- Use model business plans developed by Shell Tameer and other sources to provide RMTs opening grocery shops to promote healthy products (CARE)
- Need to review indicators of good health (CARE)

### Ideas for research/evaluation (CARE)

- Role of RMTs in reviving CBOs – existing and potential
- Successful (e.g. embellished garments business in Kot Addu, rope yarn and applique work group businesses in Tando Allah Yar) and not so successful RMT businesses, and what contributes to their success or failure
- Impact of project on life styles, environment and values of RMTs and their families
- Documentation of use of Tameer Bank loans by RMTs for businesses, in order to advocate its use for more RMTs
- Documentation of the route/process (model) adopted by the project for women's empowerment (i.e. exposure/consciousness, awareness, access to resources, to participation in decision making and then towards accrual of direct and indirect social benefits for women and their families from project activities)
- Impact of minimum wages paid to RMTs on wages of other (non-RMT) women
- In-depth research on the most popular businesses (grocery, dairy, cloth) and the impact of multiple businesses and use of cell phones, including growth and sustainability of profits

Given the fact that DFATD is planning to undertake a project evaluation in the coming months, this report identifies certain areas which could be taken up in the evaluation. For example:

- To what extent have RMT women been able to spread their learning from the project to other women not directly involved in the project?
- What is the status of the linkages developed by the project between RMT women and various government and nongovernment institutions?
- To what extent has the project had an impact on the lives of RMT women, including household health and hygiene, household decision making, changes in male attitudes and practices
- Are the wage labourers working for RMT women benefiting from their income increases and finding new empowered roles as a result?

- Key issues such as the low durability of earthen roads, sustainability of a large number of businesses, the absence of a local government system to take the project beyond 2015, the minimal involvement of CBOs, and the failure of the partnership with Asia Care.

## Annexure 1: Monitoring Framework

Monitoring Question	Source and Method
<b>Achievement of Results</b>	
How comprehensive and timely were the baseline surveys conducted by CIIP? Did they provide the necessary information for planning, monitoring and evaluating the project? How was this information used? Did the baseline surveys undergo change over time? If so, in what manner?	<ul style="list-style-type: none"> <li>• Interview CIIP M&amp;E Team, IPs</li> <li>• Baseline and progress reports, MIS</li> </ul>
Were maps prepared using baseline survey information? What was their quality? Were these handed over to IPs, UCs, and RMTs? How were these maps used? What factors contributed to high or low use?	<ul style="list-style-type: none"> <li>• Interview CIIP M&amp;E Team, IPs, UCs</li> <li>• FGDs with RMTs</li> <li>• Progress reports, maps, MIS</li> </ul>
Was the selection of roads for maintenance according to the criteria set by CIIP? Was the community satisfied with the selection? Were agreements executed with UCs and RMTs in a timely manner? What is the quality and cost-effectiveness of the community infrastructure maintained/ How satisfied are community members with the utility of the RMT-maintained infrastructure?	<ul style="list-style-type: none"> <li>• Interview CIIP M&amp;E Team, IPs, UCs,</li> <li>• FGDs with RMTs, key community members</li> <li>• Progress reports, MIS</li> </ul>
What was the quality of social mobilization activities, orientation sessions, and media campaigns undertaken by the project? How did it affect the number of women applicants applying for the jobs of RMT? Did the campaign work better in some areas and less in other communities? Which factors (e.g. geographic, socio-economic, ethnic, cultural, etc.) played a key role in the level of acceptance or resistance of women's involvement in the workforce? Are there any lessons for future mobilization?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, UCs,</li> <li>• FGDs with RMTs, male family members of RMTs, key community members</li> <li>• Progress and visit reports, MIS, case studies, success stories</li> </ul>
Was dropout of women from RMTs an issue? What were the causes? Could they have been addressed? How can such dropout be prevented in future?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, UCs,</li> <li>• FGDs with RMTs, male family members of RMTs, key community members</li> <li>• Progress reports, MIS, case studies</li> </ul>
How effective was the training? Which trainings were more useful and which were less useful? Did the education levels of women play a role in the effectiveness of training? Did the training design and materials adequately cater to the needs of non-literate women? Was the training able to involve all women, particularly those who were shy or passive? What problems did women face in participating in the training, understanding various components, and applying the training?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Gender &amp; Advocacy, Enterprise Development), IPs, UCs,</li> <li>• FGDs with RMTs, RMT graduates, male family members of RMTs, key community members</li> <li>• Training evaluation, visit and progress reports, MIS, case studies, success stories</li> <li>• Observe training session</li> </ul>

<p>Do the pre and post-tests adequately assess the key knowledge areas of women? Why did women achieve low scores on the post tests, particularly in the gender and human rights, and the basic business management and operations trainings?<sup>35</sup> How is the project dealing with these findings?</p>	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Gender &amp; Advocacy, Enterprise Development), IPs</li> <li>• FGDs with RMTs</li> <li>• Training evaluation and progress reports, MIS</li> <li>• Observe training session</li> </ul>
<p>Which components of technical training (road maintenance techniques, group management, roles and responsibilities, problem solving), life skills training (health, nutrition, human rights, gender equality), and business management training have RMT women been able to apply most/least in their work and daily lives? What are the reasons for success and failures? (e.g. quality of training received, past experience, education level, family support, support from CBOs or local government institutions, etc.)?</p>	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, UCs</li> <li>• FGDs with RMTs, RMT graduates, male family members of RMTs, key community members</li> <li>• Training evaluation, visit and progress reports, MIS, case studies, success stories</li> <li>• Observe training session</li> </ul>
<p>Of the inventory of income-generating activities provided by CIIP, which activities were most appropriate for RMT women and why? Were RMT women able to get necessary skills training? What were the consequences of getting or not getting training on their subsequent businesses? Were RMT women able to see running businesses specific to their identified businesses? What was the benefit of these visits?</p>	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs</li> <li>• FGDs with RMT graduates, male family members of RMTs, key community members</li> <li>• Training evaluation, visit and progress reports, MIS</li> <li>• Field visit to businesses</li> </ul>
<p>What proportion of RMT women were able to start income generating activities after three months of graduation? What were the reasons for delay in starting such activities? How were they addressed? What proportion of RMT women invested their savings in new income-generating activities? On what did the remaining women spend their savings?</p>	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Gender &amp; Advocacy, Enterprise Development), IPs,</li> <li>• FGDs with RMT graduates, male family members of RMTs, key community members</li> <li>• Visit and progress reports, MIS</li> <li>• Field visit to businesses</li> </ul>
<p>How profitable and sustainable are the income-generating activities being conducted by RMT women? What factors contribute to the rate of success of these ventures (e.g. type of business, quality of training received, past experience, education level, family support, group or individual business, support from CBOs or local government institutions, etc.)?</p>	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Gender &amp; Advocacy, Enterprise Development), IPs,</li> <li>• FGDs with RMT graduates, male family members of RMTs, key community members</li> <li>• Training evaluation, visit and progress reports, MIS</li> <li>• Field visit to businesses</li> </ul>
<p>How effective was the training and sensitization on gender equality delivered to local government officials? Was there any evidence of the impact of the training on their attitudes and behaviour?</p>	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, officials,</li> <li>• FGDs with RMTs, male family members of RMTs, key community members</li> <li>• Training evaluation, visit and progress</li> </ul>

<sup>35</sup> CIIP. Training Impact Evaluation. October, 2012



	reports
How effective was the training on managing, implementing and monitoring rural road work and other rural infrastructure projects delivered to Union Councils and CBOs?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, UCs</li> <li>• FGDs with RMTs, CBOs, male family members of RMTs, key community members</li> <li>• Training evaluation, visit and progress reports</li> </ul>
Were linkages developed between RMT women and district administration, <i>taluka/tehsil</i> (sub-district), Union Councils, micro-credit institutions, skills training and business development centers? How effective and useful were these linkages? Did these institutions play any role in resolving the problems of RMT women? What factors contributed to high or low usefulness?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, officials, MFIs, skills training and business development centers,</li> <li>• FGDs with RMTs, RMT graduates, CBOs, male family members of RMTs, key community members</li> <li>• Visit and progress reports</li> </ul>
Were knowledge-sharing workshops held with local government representative and officials at district and UC levels to review progress and develop quarterly plans? If yes, what was the level of participation? How effective and useful were these workshops? What factors contributed to high or low participation and usefulness?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication), IPs, officials, DAC members</li> <li>• Visit, progress, and workshop reports</li> </ul>
Was there any change in the knowledge and awareness of local government representatives on issues related to women's economic activities as a result of CIIP training and other activities? What is the level of participation of government officials, UCs and CBOs in the project? What factors contribute to high or low participation?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Enterprise Development), IPs, officials, DAC members</li> <li>• FGDs with RMTs, RMT graduates, key community members</li> <li>• Training evaluation, visit and progress reports</li> </ul>
Were UC Monitoring Committees formed and made functional? Of the ones which were made functional, how many were able to effectively monitor the work of the RMT women in their respective UCs? How were the weaknesses in the role of the UC monitoring committees addressed?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication), IPs, UC Monitoring Committees, DAC members</li> <li>• FGDs with RMTs, RMT graduates, key community members</li> <li>• Visit and progress reports, MIS</li> </ul>
Was there an increase in the ability to plan and monitor gender-responsive community-based development initiatives at local government and community levels? Reasons for success or failure?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, officials, DAC members</li> <li>• FGDs with RMTs, RMT graduates, key community members</li> <li>• Visit and progress reports</li> </ul>
To what extent have UCs developed road maintenance plans? Have any UCs created employment programs for women? Reasons for success or failure?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, UCs, DAC members</li> <li>• FGDs with RMT graduates, key community members</li> </ul>

	<ul style="list-style-type: none"> <li>• Visit and progress reports, MIS, case studies, success stories</li> </ul>
Was there improved year-round use of maintained rural roads by light traffic? Reasons for success or failure?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication), IPs, UCs,</li> <li>• FGDs with RMT graduates, key community members</li> <li>• Progress, early impact evaluation reports, MIS, case studies, success stories</li> </ul>
Were there any differences in achievement of results by province or district? By linguistic, ethnic or religious group? By older or younger women? Other factors?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication), IPs, UCs</li> <li>• FGDs with RMTs</li> <li>• Progress, early impact evaluation reports, MIS, case studies, success stories</li> </ul>
<b>Cost Effectiveness of Results</b>	
Are the relationship between costs and results reasonable? Are significant variances justified?	<ul style="list-style-type: none"> <li>• Using the latest financial reports, compare planned and actual project expenditures under various heads.</li> </ul>
<b>Relevance of Results</b>	
Are the results consistent with the needs and priorities of targeted beneficiaries/local partners/country/region?	<ul style="list-style-type: none"> <li>• Interview CIIP (CoP, DCoP, Gender &amp; Advocacy), IPs, DAC and PAC members</li> <li>• FGDs with RMT graduates, male family members of RMTs, key community members</li> <li>• PAD, evaluation reports</li> </ul>
Are the results consistent with DFATD's poverty reduction and sustainable development policies, and other policies, Branch priorities and programs, including crosscutting goals of gender equality and environmental sustainability?	<ul style="list-style-type: none"> <li>• Interview DFATD field staff, CARE staff, CIIP (CoP, DCoP, Gender &amp; Advocacy)</li> <li>• DFATD policy documents</li> </ul>
Are the results consistent with Canadian foreign policy, including potential benefits to Canada?	<ul style="list-style-type: none"> <li>• Interview DFATD field staff, CARE staff, CIIP (CoP, DCoP)</li> <li>• DFATD policy documents</li> </ul>
Are the results consistent with the efforts of local organizations, Canadian organizations and other donors addressing the same needs or problems?	<ul style="list-style-type: none"> <li>• Interview DFATD field staff, CARE staff, CIIP CoP, WEE partners</li> <li>• DFATD policy documents</li> </ul>
What are the key challenges and key lessons learnt with regard to relevance of results?	<ul style="list-style-type: none"> <li>• Interview CIIP (CoP, DCoP, M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, DAC and PAC members</li> <li>• Progress, evaluation reports</li> </ul>
Was the choice of infrastructure (road maintenance) relevant to the needs of the communities involved?	<ul style="list-style-type: none"> <li>• Interview CIIP (CoP, DCoP, M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, DAC and PAC members</li> <li>• FGDs with RMT graduates, male family members of RMTs, key community members</li> <li>• Progress, evaluation reports</li> </ul>
Was road maintenance the most appropriate	<ul style="list-style-type: none"> <li>• Interview CIIP (CoP, DCoP, M&amp;E,</li> </ul>

entry point to empower poor rural women?	<p>Research &amp; Communication, Gender &amp; Advocacy), IPs, DAC and PAC members</p> <ul style="list-style-type: none"> <li>• FGDs with RMT graduates, male family members of RMTs, key community members</li> <li>• Progress, evaluation reports</li> </ul>
Which components of technical training (road maintenance techniques, group management, roles and responsibilities, problem solving), life skills training (health, nutrition, human rights, gender equality), and business management training were more or less relevant for RMT women? How could these be made more relevant? Should there have been a greater emphasis on skill training related to the specific businesses of women?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs</li> <li>• FGDs with RMT graduates, male family members of RMTs, key community members</li> <li>• Progress, training evaluation reports</li> </ul>
Were the businesses seen by RMT women during exposure visits relevant to the businesses that they were preparing to start?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E, Research &amp; Communication, Enterprise Development), IPs</li> <li>• FGDs with RMT graduates, male family members of RMTs, key community members</li> <li>• Visit and progress reports</li> </ul>
Why did the project emphasize adoption of non-traditional businesses? Were the businesses conducted by RMT women relevant to their needs, capacities, and their business environment?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs</li> <li>• FGDs with RMT graduates, male family members of RMTs, key community members</li> <li>• Visit and progress reports</li> </ul>
Which aspects of the training for government officials were more or less relevant? How could these be made more relevant?	<ul style="list-style-type: none"> <li>• Interview CIIP (DCoP, M&amp;E, Research &amp; Communication), IPs, officials, DAC members</li> <li>• Training and progress reports</li> </ul>
Was the training and sensitization on gender equality delivered to local government officials relevant to their needs and their role in the project?	<ul style="list-style-type: none"> <li>• Interview CIIP (DCoP, M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, officials, DAC members</li> <li>• Training and progress reports</li> </ul>
Was the training on managing, implementing and monitoring rural road work and other rural infrastructure projects delivered to Union Councils and CBOs relevant to their needs and their role in the project?	<ul style="list-style-type: none"> <li>• Interview CIIP (DCoP, M&amp;E, Research &amp; Communication), IPs, UCs, CBOs</li> <li>• Training and progress reports</li> </ul>
Were the linkages with district administration, Taluka (sub-district), Union Councils, micro-credit institutions, skills training centres and business development centers relevant to the needs of RMT women?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, officials, DAC members</li> <li>• Training, visit and progress reports</li> </ul>
Were the knowledge-sharing workshops to review progress and develop quarterly plans relevant to the needs of stakeholders at district and UC levels?	<ul style="list-style-type: none"> <li>• Interview CIIP (DCoP, M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, officials, DAC members</li> <li>• Workshop and progress reports</li> </ul>
Was the use of cell phones relevant to the	<ul style="list-style-type: none"> <li>• Interview CIIP (DCoP, M&amp;E, Research</li> </ul>

needs of poor rural women? Are they able to benefit from the technology as planned?	<p>&amp; Communication, Gender &amp; Advocacy), IPs, DAC members, Telenor Easy Paisa</p> <ul style="list-style-type: none"> <li>• FGDs with RMT members, graduates, male family members of RMTs, key community members</li> <li>• Progress and Easy Paisa evaluation reports</li> </ul>
To what extent is the health insurance component relevant to the needs of RMT women?	<ul style="list-style-type: none"> <li>• Interview CIIP (DCoP, Research &amp; Communication, Gender &amp; Advocacy), IPs, DAC members, Asia Care</li> <li>• FGDs with RMT members, graduates, male family members of RMTs, key community members</li> <li>• Progress reports</li> </ul>
Is there any difference in the relevance of the project by province or district? By linguistic, ethnic or religious group? For younger or older women?	<ul style="list-style-type: none"> <li>• Interview CIIP (CoP, DCoP, M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs</li> <li>• Progress, evaluation reports</li> </ul>
<b>Sustainability of Results</b>	
Is there local ownership of project/program activities, with commitment for results and methods chosen to achieve them?	<ul style="list-style-type: none"> <li>• Interview CIIP (CoP, DCoP, M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, officials, DAC and PAC members</li> <li>• Progress reports</li> </ul>
Are there any commitments of sufficient resources to maintain benefits/results, where applicable?	<ul style="list-style-type: none"> <li>• Interview CIIP (CoP, DCoP, Gender &amp; Advocacy), IPs, officials, DAC and PAC members</li> <li>• Progress reports</li> </ul>
Is there adequate institutional capacity and on-going relevance to maintain results?	<ul style="list-style-type: none"> <li>• Interview CIIP (CoP, DCoP, Gender &amp; Advocacy), IPs, officials, DAC and PAC members</li> <li>• Progress reports</li> </ul>
Is the domestic policy and institutional environment conducive to maintenance of results?	<ul style="list-style-type: none"> <li>• Interview CARE, CIIP (CoP, DCoP, Gender &amp; Advocacy), IPs, officials, DAC and PAC members</li> <li>• Progress reports</li> </ul>
Is the national and international environment conducive to maintenance of results?	<ul style="list-style-type: none"> <li>• Interview CARE, CIIP (CoP, DCoP, Gender &amp; Advocacy), IPs, officials, DAC and PAC members</li> <li>• Progress reports</li> </ul>
What are the key challenges and key lessons learnt with regard to sustainability of results?	<ul style="list-style-type: none"> <li>• Interview CARE, CIIP (all), IPs, officials, DAC and PAC members</li> <li>• Progress and evaluation reports</li> </ul>
Will the road maintenance work continue beyond the life of the project? How? Will the government support this activity? Does it have the will, resources and capacity (including technical capacity) to do so? Has the government expressed its willingness to support the road maintenance work in any of the project areas?	<ul style="list-style-type: none"> <li>• Interview CARE, CIIP (CoP, DCoP, M&amp;E, Gender &amp; Advocacy), IPs, officials, DAC and PAC members</li> <li>• Progress reports</li> </ul>
Are UCs and CBOs playing any role in managing, implementing and monitoring rural	<ul style="list-style-type: none"> <li>• Interview CIIP (CoP, DCoP, M&amp;E), IPs, officials, DAC and PAC members</li> </ul>

road work and other rural infrastructure projects? Are any UCs implementing the agreements made between CIIP and UCs?	<ul style="list-style-type: none"> <li>• Progress reports</li> </ul>
What is the outcome of the links formed between RMT women and various government, micro-credit, skill training, and business development institutions? Are these linkages sustainable?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, officials, DAC members</li> <li>• FGDs with RMT members, graduates, male family members of RMTs, key community members</li> <li>• Training, visit and progress reports</li> </ul>
What is the likelihood that the private sector will continue to be engaged with RMT women after project funding ends? Will RMT women continue to benefit from cell phones and health insurance?	<ul style="list-style-type: none"> <li>• Interview CARE, CIIP (CoP, DCoP, M&amp;E, Research &amp; Communication, Gender &amp; Advocacy), IPs, officials, DAC and PAC members, private sector partners</li> <li>• FGDs with RMT members, graduates, male family members of RMTs, key community members</li> <li>• Progress reports</li> </ul>
Will RMT women be able to sustain the income generating activities initiated by them with project support? Which businesses are more or less likely to sustain? Reasons? What is being / can be done to increase sustainability of on-going income generating activities?	<ul style="list-style-type: none"> <li>• Interview CIIP (CoP, DCoP, M&amp;E, Research &amp; Communication, Gender &amp; Advocacy, Enterprise Development), IPs, officials, DAC and PAC members, private sector partners</li> <li>• FGDs with RMT members, graduates, male family members of RMTs, key community members</li> <li>• Progress reports</li> </ul>
What is being / can be done to increase sustainability of programs/activities being carried out by CIIP?	<ul style="list-style-type: none"> <li>• Interview CARE, CIIP (CoP, DCoP, M&amp;E, Research &amp; Communication, Gender &amp; Advocacy, Enterprise Development), IPs, officials, DAC and PAC members, private sector partners</li> <li>• FGDs with RMT members, graduates, male family members of RMTs, key community members</li> <li>• Progress reports</li> </ul>
Is there a significant improvement in the quality of life (e.g. health and nutritional status) of RMT women and their families? Is this improvement likely to sustain? Why or why not?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs</li> <li>• FGDs with RMT members, graduates, male family members of RMTs, key community members</li> <li>• Progress, evaluation reports</li> </ul>
Are an increased number of RMT women involved in decision making regarding marriage, education, control related to their children and assets at household level? Are these changes sustainable? Why or why not?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs</li> <li>• FGDs with RMT members, graduates, male family members of RMTs, key community members</li> <li>• Progress, evaluation reports</li> </ul>
Have the perceptions of male colleagues/family members of RMT women regarding women undergone a change as a result of the project? Are they likely to be more supportive of women desiring to earn their livelihoods?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs</li> <li>• FGDs with RMT members, graduates, male family members of RMTs, key community members</li> <li>• Progress, evaluation reports</li> </ul>
<b>Partnership</b>	
Is there an active participation of local country	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, UCs, DAC,</li> </ul>

partners, recipients and beneficiaries (including women) in project/program design, implementation and monitoring/evaluation?	<p>PAC</p> <ul style="list-style-type: none"> <li>• FGDs with RMT members, graduates, key community members</li> <li>• Progress and visit reports, monitoring framework for private sector engagement</li> </ul>
Is there a clear definition, understanding and acceptance of roles and responsibilities of project/program participants?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, UCs, DAC, PAC</li> <li>• FGDs with RMT members, graduates, key community members</li> <li>• Progress and visit reports, MoUs,</li> <li>• Monitoring framework for private sector engagement</li> </ul>
Do partners in management have the appropriate authority and tools they need to make decisions and take action?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, UCs, DAC, PAC</li> <li>• FGDs with RMT members, graduates, key community members</li> <li>• Progress and visit reports</li> </ul>
Does the project have new partnerships to achieve results?	<ul style="list-style-type: none"> <li>• Interview CIIP (COP), IPs, DAC, PAC, private sector partners</li> <li>• Progress and visit reports, MoUs</li> </ul>
What challenges are being experienced by the project in working with Implementing Partners? How are these challenges being dealt with?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, UCs, DAC, PAC, private sector partners</li> <li>• FGDs with key community members</li> <li>• Progress, evaluation and visit reports</li> </ul>
What is the role of various partners in making effective linkages between them and RMT women? What are the weak links and how can they be improved?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, UCs, DAC, PAC, private sector partners</li> <li>• FGDs with RMT women, graduates, key community members</li> <li>• Progress, evaluation and visit reports,</li> <li>• Monitoring framework for private sector engagement</li> </ul>
What challenges are being experienced by the project in working with the government at various tiers? How are these challenges being dealt with?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, UCs, DAC, PAC, private sector partners</li> <li>• FGDs with key community members</li> <li>• Progress, evaluation and visit reports</li> </ul>
What challenges are being experienced by the project in working with private sector partners? How are these challenges being dealt with?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, UCs, DAC, PAC, private sector partners</li> <li>• FGDs with key community members</li> <li>• Progress, evaluation and visit reports</li> </ul>
<b><i>Appropriateness of Design</i></b>	
Is the design appropriate and based on sound understanding of local context?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, UCs, DAC, PAC, private sector partners</li> <li>• FGDs with key community members</li> <li>• Progress, evaluation reports, PAD</li> </ul>
Were risks identified and assessed and strategies developed for on-going monitoring?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, PAC, private sector partners</li> <li>• FGDs with key community members</li> <li>• Progress, evaluation reports, PAD, PIP</li> </ul>
How were innovative and creative ideas and approaches explored to achieve results?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, PAC, private sector partners</li> <li>• FGDs with key community members</li> </ul>

	<ul style="list-style-type: none"> <li>• Progress, evaluation reports, PAD, PIP, AWP</li> </ul>
Do the project goals, objectives, results and performance indicators meet DFATD's standards for Results-Based Management? Were they defined using participatory approaches? Are they based on sound understanding of local context, including gender and the environment?	<ul style="list-style-type: none"> <li>• Interview CIIP (M&amp;E), IPs, DAC, PAC</li> <li>• FGDs with key community members</li> <li>• Progress, evaluation reports, PAD, PIP</li> </ul>
Are resources and services designed to effectively respond to conditions (including risks), needs or problems identified?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, PAC, private sector partners</li> <li>• FGDs with key community members</li> <li>• Progress, evaluation reports, PAD, PIP</li> </ul>
Does risk analysis in planning phase lead to strategies for on-going monitoring during implementation?	<ul style="list-style-type: none"> <li>• Interview CIIP (DCOP, M&amp;E), IPs, DAC, PAC</li> <li>• FGDs with key community members</li> <li>• Progress, evaluation reports, PIP, AWP</li> </ul>
Does the project experiment with new project/program design and procedures?	<ul style="list-style-type: none"> <li>• Interview CIIP (DCOP, M&amp;E), IPs, DAC, PAC</li> <li>• FGDs with key community members</li> <li>• Progress, evaluation reports, PAD, PIP, AWP</li> </ul>
Does the project apply any lessons from development experience? Are lessons learned from innovations recorded, reported and disseminated?	<ul style="list-style-type: none"> <li>• Interview CIIP (DCOP, M&amp;E), IPs, DAC, PAC</li> <li>• FGDs with key community members</li> <li>• Progress, evaluation reports, PAD, PIP, AWP</li> </ul>
Did the project evaluate the risks involved in working with a dysfunctional local government system? What kind of fall back strategy did it have to deal with the risk? To what extent did it work?	<ul style="list-style-type: none"> <li>• Interview CIIP (DCOP, M&amp;E), IPs, DAC, PAC, LCAP</li> <li>• FGDs with key community members</li> <li>• Progress, evaluation reports, PIP, AWP</li> </ul>
Why was the private sector not involved in the original design of the project?	<ul style="list-style-type: none"> <li>• Interview CIIP (COP, DCOP), IPs, DAC, PAC, private sector partners</li> <li>• Progress, evaluation reports, AWP, PIP</li> </ul>
<b><i>Appropriateness of Resource Utilization</i></b>	
Are there sound financial management policies and procedures, including budgeting, accounting and reporting systems and practices?	<ul style="list-style-type: none"> <li>• Interview CIIP (Finance Manager, M&amp;E), IPs, DAC, PAC, private sector partners</li> <li>• Financial, progress reports</li> </ul>
Is contracting and contract management in accordance with sound contracting policies and practices?	<ul style="list-style-type: none"> <li>• Interview CIIP (Finance &amp; Admin Manager, M&amp;E), IPs, DAC, PAC, private sector partners</li> <li>• Financial, progress reports</li> </ul>
Is Canada's capacity to provide goods and services required to achieve intended results?	<ul style="list-style-type: none"> <li>• Interview CARE, CIIP CoP, IPs, DAC, PAC, private sector partners</li> </ul>
Is there a good match between needs and knowledge, expertise and personal skills of all major project/program participants?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, PAC, private sector partners</li> <li>• Progress reports</li> </ul>
Are project/program personnel and physical assets adequately managed?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, PAC, private sector partners</li> </ul>

	<ul style="list-style-type: none"> <li>• Progress reports</li> </ul>
Does CIIP have the experience and expertise to manage multiple unconventional partners, i.e. private sector partners, LCAP?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, PAC, private sector partners, LCAP</li> <li>• Progress reports</li> </ul>
What are the reasons and implications for high staff turnover within IPs? How is this challenge being addressed, and with what outcomes?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, private sector partners</li> <li>• Progress reports</li> </ul>
What are the implications of eliminating the position of Training Coordinator for the remaining life of the project? Is the decision justified?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, private sector partners</li> <li>• Progress reports</li> </ul>
<b><i>Informed and Timely Action</i></b>	
Did the project anticipate and respond to change based on adequate information?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, private sector partners</li> <li>• Progress reports</li> </ul>
Did it take appropriate action to manage risks?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, private sector partners</li> <li>• Progress reports, CIIP security and risk mitigation protocols</li> </ul>
Are there effective networks and processes to identify and assess important trends and events in the project/program environment?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, private sector partners</li> <li>• Progress reports, CIIP security and risk mitigation protocols</li> </ul>
Are there effective monitoring and reporting systems for internal and external risks and appropriate and timely response to manage risks and opportunities?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, private sector partners</li> <li>• Progress reports, CIIP security and risk mitigation protocols</li> </ul>
Are there adequate strategies and practices which respond to the nature and level of internal and external risk to project/program funds and assets?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, private sector partners</li> <li>• Progress reports, CIIP security and risk mitigation protocols</li> </ul>
Are resources and services delivered in a manner that effectively responds to conditions, including risks, needs, opportunities or problems?	<ul style="list-style-type: none"> <li>• Interview CIIP (all), IPs, DAC, private sector partners</li> <li>• Progress reports, CIIP security and risk mitigation protocols</li> </ul>



## **Annexure 2: Documents Consulted**

CARE. Project Approval Document, CIIP.  
DFATD. Contribution Agreement, May 6, 2010  
CARE CIIP. Gender Analysis and Gender Mainstreaming Strategy. December, 2010  
CARE CIIP. Project Implementation Plan. January 24, 2011  
CARE CIIP. Road for Life. Rural Earthen Road Maintenance and Basic Health.  
Training Module for Trainers  
CARE CIIP. Training Module for A Step Towards a Bright Future. Gender and Rights  
Training Module. June, 2011  
CARE. Gender Mainstreaming Strategy for CIIP. October, 2011  
CARE CIIP. Scale-Up Completion Report. January, 2012  
CARE CIIP. Annual Progress Report, 2012 (April, 2011 to March, 2012)  
CARE CIIP. Position Paper on Private Sector Engagement, May, 2012  
CARE CIIP. Monitoring Formats (20 formats)  
CARE CIIP. Advocacy Strategy for CIIP. September, 2012  
CARE CIIP. Third Annual Work Plan: April 2013 – March 2014  
CARE CIIP. Annual Progress Report, 2013 (April, 2012 to March, 2013)  
CARE CIIP and Shell Tameer. Concept Paper: Capacity building and business  
facilitation for establishment of sustainable micro-enterprises. 2013  
CARE CIIP and Engro. Strengthening Fresh Milk Collection Value Chain in  
Mirpurkhas, Sind. April, 2013  
Takhleeq Foundation. CIIP Quarterly Progress Report, September – December,  
2013  
CARE CIIP. Benefit Cost Analysis of Community Infrastructure Project in Pakistan,  
September, 2013 (draft)  
CIIP Semi-Annual Report (April-September, 2013), November, 2013  
CARE. Impact of Business Education on Savings of Community Women, 2013  
Awaz Foundation Pakistan WEE-CIIP Presentation, March 7, 2014  
CARE CIIP. Annual Progress Report, 2014 (April, 2013 to March, 2014)

## **Annexure 3: Persons Met**

### **DFATD**

1. Ms. Nathalie Rainville, Team Leader, Pakistan Program, DFATD HQ
2. Ms. Anushka Shibcurn, First Secretary, Development, Canadian High Commission, Islamabad,

### **CARE International in Pakistan, Islamabad**

1. Mr. Waleed Rauf, Country Director, CARE, Pakistan
2. Mr. Jay Shankar Lal, Chief of Party, CIIP
3. Mr. Mirza Amir Ahmed Rafiq, Technical Advisor, and Deputy Chief of Party, CIIP
4. Ms. Kaneez Fatima, Gender Equity and Advocacy Advisor, CIIP
5. Ms. Sammiya-Tur-Rauf Malik, Entrepreneurship Development Advisor
6. Mr. Ghufuran Elahi Hashmi, M&E Manager, CIIP
7. Mr. Amjad Mian, Project Finance Manager, CIIP
8. Mr. Saeed Ahmed Abro, Project Data Management Officer, CIIP
9. Mr. Shamsuddin Khokhar, Enterprise Development Officer, CIIP
10. Ms. Sharon Chen, Project Admin & Finance Officer, CIIP
11. Mr. Samiullah, Security Officer, CARE

### **Takhleeq Foundation**

1. Mr. Mohammad Yaqub, Executive Director, TF
2. Ms. Aisha Raheem, Director Programs, TF
3. Ms. Shahida Mangi, M&E Officer, TF
4. Mr. Mohsin Solangi, ex-Program Manager, TF (volunteering)
5. Mr. Shafiqur Rehman, District Coordinator, Thatta
6. Mr. Hashim, Technical Officer, Thatta
7. Ms. Sobia Baloch, Trainer, Thatta
8. Ms. Sorath Shah, District Field Coordinator, Mirpurkhas
9. Mr. Parvez Hussain, Technical Officer, Mirpurkhas
10. Ms. Soohan Rajpar, Social Mobilizer, Mirpurkhas
11. Ms. Halima Sammu, Social Mobilizer, Mirpurkhas
12. Ms. Kausar Parveen, Social Mobilizer, Mirpurkhas
13. Ms. Irum Annie, Social Mobilizer, Mirpurkhas
14. Ms. Shabana Ali, Trainer, Mirpurkhas
15. Ms. Amna Baloch, Business Promotion Officer, Mirpurkhas
16. Mr. Murtaza Thebo, Business Promotion Officer, Mirpurkhas
17. Ms. Zeenat Baloch, Trainer, Ghotki
18. Mr. Gul Bahar Chauhan, District Coordinator, Tando Allah Yar
19. Ms. Samina Bano, Business Promotion Officer, Tando Allah Yar
20. Ms. Farah Malik, Social Mobilizer, Tando Allah Yar
21. Ms. Naseem Akhtar, Social Mobilizer, Tando Allah Yar
22. Ms. Rukhsana Jarwar, Training Officer, Tando Allah Yar
23. Mr. Sajid Ali Zardari, Technical Officer, Tando Allah Yar
24. Ms. Sanam Rajput, Business Promotion Officer, Tando Allah Yar

### Awaz-CDS CIIP

1. Mr. Ziaur Rehman, Chief Executive, Awaz-CDS
2. Mr. Manzoor Hussain, Program Manager, Head Office (HO)
3. Ms. Sahar Maqbool, Project Coordinator, HO
4. Mr. Imran Zahoor, Monitoring & Reporting Officer, HO
5. Mr. Mohammad Kaleem Tariq, Field Engineer, HO
6. Mr. Sultan Mahmood, Enterprise Development Officer, HO
7. Mr. Mohammad Imran, Technical Officer, HO
8. Ms. Batool Bibi, FSO, HO
9. Ms. Bushra Kashif, FSO, HO
10. Ms. Munazza Azeem, Training Officer, HO
11. Ms. Aisha Naureen, HO
12. Mr. Syed Amir Abbas Gilani, Coordinator, Field Office, District Vehari
13. Ms. Ishrat Gill, EDA, consultant dairy, District Vehari
14. Ms. Aaliya Sundas, FSO, District Vehari
15. Ms. Kiran Chauhan, FSO, District Vehari
16. Mr. Nazar Mohammad, Field Engineer, District Vehari
17. Ms. Saeeda Ramzan, Field Coordinator, Tehsil Jampur, District Rajanpur
18. Mohammad Arshad, Field Engineer, Tehsil Jampur, District Rajanpur
19. Ms. Azra Parveen, FSO, Tehsil Jampur, District Rajanpur
20. Ms. Shumaila, FSO, Tehsil Jampur, District Rajanpur

### Private Sector Partners

1. Ms. Afshan Khan Nanji, Social Investments Manager, Shell Pakistan Ltd, Karachi
2. Mr. Saifullah Malik, Project Coordinator, Shell LiveWire Trust, Karachi
3. Mr. Imran Azeem, Manager Training & Development Manager, Shell LiveWire Trust, Karachi
4. Mr. Sheraz Safdar, Regional Support Executive, Telenor Pakistan Ltd, Islamabad
5. Mr. Syed Hashim Ali, Financial Services Sales Executive, Telenor Pakistan Ltd, Islamabad

### Women Development Department/Provincial Advisory Committee, Sindh

1. Mr. Badar Jamil Mandhero, Secretary, Women Development Department, Sindh, Karachi
2. Mr. Akhter Inayat Bhurgeri, Additional Secretary, Women Development Department, Sindh
3. Ms. Musarrat Jabeen, Deputy Secretary, Women Development Department, Sindh, Karachi
4. Mr. Khalid Akbar, Director, Women Development Department, Sindh, Karachi
5. Mr. M. Anis Danish, Advisor – Civil Society, Legal Rights Forum, Karachi

### DAC / Civil Society Members

1. Mr. Allah Warayo Buzdar, District Reporter, Kavish Television Network (KTN), Ghotki
2. Mr. Mumtaz Jawwar, Advocate, DAC member, District Mirpurkhas

3. Ms. Radha Bheel, Social Worker, LHW, DAC member, District Mirpurkhas
4. Mr. Khuda Buksh Bahrani, Deputy Director, WDD, SWD, CDD, District Thatta
5. Mr. Tanveer Iqbal, EDO Finance and Planning, District Muzaffargarh
6. Ms. Uzma Saleem, President, Women's Own, District Vehari
7. Mr. Rai Akhtar, District Officer Social Welfare, District Vehari
8. Ms. Munazza Kausar, Women Crisis Center, District Vehari

#### UC Secretaries

1. Sikander Ali Qazi, UC secretary, UC Bhetoor, Taluqa Khanpur Sharif, Ghotki
2. Mr. Ghulam Mustafa Leghari, UC Secretary, Mir Wah, District Mirpurkhas
3. Mr. Inayat Ali, UC Secretary, Makhan, District Mirpurkhas
4. Mr. Azam Nohani, UC Secretary, Pablan (also President, District Lawyers), District Mirpurkhas
5. Saleem Memon, Jar, District Thatta
6. Fayyaz Shah, Ali Bahar, District Thatta
7. Mohammad Kaleem, Tatarwala, Tehsil Jampur, District Rajanpur
8. Abdur Rashid, Kot Ladwan, Tehsil Jampur, District Rajanpur
9. Mohammad Issa, Sattar Alam, District Vehari

#### RMTs Punjab

1. Mai Bappi, Contract Farmer, District Multan

## Annexure 4: Summary Chart of CIIP Results, Indicators and Targets

Expected Results	Indicators (Contribution Agreement 2)	Targets (Contribution Agreement 2)	Targets Achieved up to September 30, 2013		Monitor's Comments
			Number	%	
<b>Ultimate Outcome</b>					
Improved socio-economic status of rural disadvantaged women in selected districts of Pakistan's Punjab and Sindh Provinces	1. % change in RMT women involved in decision making regarding marriage, education, control related to their children and assets at household level. 2. Change in the quality of life of RMT women and their families (e.g. changes in health and nutritional status). 3. "% increase in women's participation in community decisions in public fora compared to men.	To be determined (TBD)			
<b>Intermediate Outcomes</b>					
Improved year-round use of maintained rural roads by light traffic.	1. % increase in number of persons and different means of transport (tractors, bikes, animal- driven means of transport) using maintained roads. 2. Men and women state that roads now useable all year round (as compared to time before Project initiation)	TBD			According to the Cost Benefit Analysis study conducted by CARE in the summer of 2013, 77% respondents said that improved roads reduced travel time by 3-6 hours; 95% said that improved roads reduced time required for networking, connectivity and mobility; 93% said that availability of public transport increased because of improved roads. <sup>36</sup>  An interesting and unplanned development has been the paving of 21 kilometers of earthen roads originally

<sup>36</sup> CIIP Semi-Annual Report (April-September, 2013), November, 2013

					maintained by RMTs.
Increased and diversified income base for RMT women through participation in income generating activities	1. % of RMT women graduates earning an income equal to RMT wages 2. % of RMP women spending at least 15% of gross expenditure on housing, health, education and sanitation	1. 30-40% of graduates earning 4,800-6,000 per month 2. 15% of gross expenditure	1. 189 (out of 900)	1. 21%	
Increased ability to plan and monitor gender-responsive community-based development initiatives at local government and community level.	1. # of UCs that have developed road maintenance plans 2. Extent to which local government programs and plans incorporate the need for women's participation 3. # of UCs creating employment programs for women	1. 50% UCs in target areas			No progress as Local Government system non-functional
<b>Immediate Outcomes</b>					
100 Improved rural roads and other community infrastructure	1. % of communities expressing that the RMT-maintained infrastructure is more usable than before the involvement of RMT 2. # and type of roads and community infrastructure improved 3. Kilometres of rural community infrastructure maintained; quality and cost-effectiveness of the community infrastructure maintained	1. 90% of the communities where RMT operated 2. 1669 3. 12,000 Kms of rural community infrastructure in 100 UCs	1. 2. 1468 3. 8354	1. 2. 87% 3. 70%	The data on kilometres of road maintained was obtained from the CIIP MIS database on 19.4.2014
200 Increased employment opportunities for local women through engagement in maintenance of rural earthen roads and community infrastructure	1. # of women directly engaged in maintenance of rural roads and other community infrastructure	3,750	3750	100%	
300 Improved capacity among poor rural women to start viable income-generating activities	1. % change in women applicants applying for jobs of RMT 2. % of RMT women starting income generating activities after three months of graduation; type of	1. TBD 2. 60-70%	1. 3.0 2. 570, 32 types of activities	1. 2. 95%	

	income-generating activities started				
400 Increased support from local government institutions and CBOs for women engaged in maintenance work and entrepreneurial activities	1. # and % of UC Monitoring Committees monitoring the work of the RMT women in their respective UCs 2. # and type of RMT project-related problems resolved through local government institutions at district, Tehsil and UC level 3. Change in knowledge and awareness of local government representatives on issues related to women's economic activities	1. 200 monitoring committees 2. To be determined during PIP stage			No progress as Local Government system non-functional
<b>OUTPUTS</b>					
110 Rural earthen roads and other community infrastructure selected and mapping and surveys undertaken to identify maintenance needs	# and quality of surveys conducted, and maps prepared, for each UC and handed over to RMT, UC and IP	100% of UC Maps	100	100%	
120 Legally binding agreements with RMTs and UCs	# of agreements with RMTs and UCs	200 agreements with RMTs and 100 agreements with UCs	200, 100	100%, 100%	
130 Rural earthen roads and other community infrastructure maintained and repaired in selected districts (i.e., cutting bushes, repairing potholes, clearing of drainage areas)	# and type of community infrastructure and rural earthen roads maintenance sub-projects work undertaken	1669	1468	87%	
210 Social mobilization campaigns planned and delivered to communities and stakeholders to promote women's involvement in the workforce	# and quality of social mobilization activities, orientation sessions, and media campaigns undertaken	100 Broad Based Community Meetings (BBCMs) in each quarter, one per UC	105 during July-Sept 2013	105%	BBCMs were not included in the original project, so there are no targets in the project logframe.
220 Rural women selected	1. # of women selected for RMTs	1. 3750	1. 3750	1. 100%	

and employed on Road Management Teams (RMTs)	2. # of RMTs formed	2. 200 RMTs	2. 200	2. 100%	
230 Technical training (road maintenance techniques, group management, roles and responsibilities, problem solving, environmental protection) delivered to RMTs	1. # of technical trainings conducted in maintenance of community infrastructure and roads 2. Quality of training conducted, determined by % change in pre and post scores of the trainees	1. 3,750 women trained through 1200 technical trainings with one wk. duration; 2. 60% increase in pre and post training scores	1. 1005 2.	1. 84% 2.	
310 Completed baseline survey assessing skills and knowledge of women	Status and quality of baseline assessment	1225 women to be interviewed for baseline assessment	1225	100%	
320 Life skills training (health, nutrition, human rights, gender equality) developed and delivered to RMTs	1. # trainings conducted in life skills 2. Quality of training conducted, determined by % change in pre and post scores of the trainees	1. 3,750 women trained through 1200 technical trainings (1 wk duration); 2. 60% increase in pre and post training scores	1. 800 2.	1. 67% 2.	
330 Business management training developed and delivered to RMTs	1. # of trainings conducted in business management 2. Quality of training conducted, determined by % change in pre and post scores of the trainees	1. 3,750 women trained through 2400 technical trainings (one week duration); 2. 60% increase in pre and post training scores	1. 1127 2.	1. 47% 2.	
340 Completed inventory of environmentally-sound income-generating activities appropriate for rural women	# and type of appropriate enterprise identified for women	IGA inventory developed that contains a list of potential businesses for rural women.			
350 Skills training and exposure visits facilitated for the women specific to their identified businesses	1. # and type of skills training facilitated; organizations involved 2. # and type of exposure visits; organizations involved	To be determined after first cycle of business operation			
360 Women's savings invested in new environmentally-sound income-generating activities	Amount of start-up funds available to invest in identified businesses	Each woman having at least 22,750 PKR as paid-up capital	22,750 PKR		This target, given in the Annual Report, 2012-13, was 20,000 PKR in the Contribution Agreement Amendment 2.
410 Completed baseline	Status and quality of baseline	Targets for results 410,			Result 410 was added in the



survey assessing knowledge and attitudes of local government officials and CBOs of women.	assessment	420, 430 and 450 will be finalized once the local government system is in place.			Contribution Agreement Amendment 2.
420 Training on gender equality delivered to Union Councils and CBOs	# and quality of training delivered # and type of local government representatives and officials participated in training	To be determined			
430 Training on managing, implementing and monitoring rural road work and other rural infrastructure projects delivered to UCs and CBOs	# and quality of training delivered # and type of organizations involved	To be determined			The original result was "Training on environmentally-sound community based development delivered to Union Councils and CBOs."
440 Linkages with district administration, Taluka (sub-district), Union Councils, micro-credit institutions, skills training centres and business development centers facilitated	# of meetings and workshops conducted with local government representative and officials at district level	15	8	53%	
450 Knowledge-sharing workshops with all stakeholders implemented at district and UC levels to review progress and develop quarterly plans	# of workshops; institutions participating	To be determined			