



Improved Nutrients Intake through Crop Variety and Supplementation Project

shiree

Lesson Learning Report: NDP

Innovation Fund Round Two



Submitted by:

**National Development Programme-
NDP**



Table of Contents

Chapter One: Summary of Project 2009-2012	2
Documents Cited.....	
Introduction	
Year One.....	
Year Two.....	
Year Three	
Conclusion.....	
Issues Regarding Scalability	
Chapter Two: Endline to Baseline Findings	
Chapter Three: Beneficiary Focus Group Discussion	
Introduction	
FGD One	
FGD Two.....	
Case Study.....	
Conclusion.....	
Chapter Four: NGO Lesson Learning Workshop	
Introduction	
NGO Self Reflection.....	
Challenges and Successes	
Key Lessons Learnt.....	
Issues Regarding Scalability	
Reflection on Original Concept Note	
Conclusion	
Annex	
CMS 2 and CMS 4 Findings.....	
FGD Questionnaire.....	
Exit Strategy	



Chapter One Summary of Project 2009-2012

DOCUMENTS CITED

- Inception Report, 2009; shiree and NDP
- Mid-Term Evaluation Report, 2010; shiree
- Shiree Annual Reports 2010 and 2011; www.shiree.org
- Project Memorandum, 2009; shiree and NDP
- Innovation Fund 2 Evaluation Report, 2010; shiree
- Monthly and Quarterly Progress Reports; NDP
- Quarterly Change Reports and Self-Review Workshops; shiree
- Innovation Fund Output-to-Purpose Review, 2010; shiree
- Nutritional Survey, 2011; shiree

INTRODUCTION

CMS 6: Summary of NDP Interventions

Beneficiary Information	2009	2010	2011	2012	Cumulative	Target (according to log frame)
BHH selection complete	1055	0	0	0	1055	1055
BHH profiles (CMS 1) complete	0	1055	0	0	1055	1055
BHH who dropped out or migrated	0	36	26	0	62	0
BHHs receiving asset transfer	0	0	1019	993	2012	1055
BHHs receiving cash transfer	0	1055	0	0	1055	1055
BHHs receiving IGA/skill training/other capacity building	0	1055	0	0	1055	1055
BHHs participating in Micro Nutrients Programme						
Total value of assets/cash distributed					20,328,901	20,177,393

NOTE: this data is collected and reported by the NGOs to shiree as CMS 6 (reporting requirements to the Government of Bangladesh)

In 2009, the National Development Programme (NDP) launched an EEP-shiree project titled “Improvement of Nutrient Intake through Crop Varieties and Supplement” that would improve the nutritional status and livelihood opportunities of 1,055 extreme poor households. The project will run from 2009-2012. The 2009 Project Memorandum summarizes the project goal, purpose, activities and outputs as such:

Goal

The goal of the project is to reduce extreme poverty and hunger in the proposed working area. The project will enable the British and Bangladeshi Governments to fulfill their commitment to the UN



Millennium Development Goals, and specifically for shiree, Goal 1 (eradicate extreme poverty and hunger) and goal 2 (achieve primary universal education), by 2015.

Purpose

The purpose of the project is to improve the nutritional status and strengthen livelihood opportunities of 1,055 extreme poor households in 3 unions – Gosaibari, Bhandarbari and Chikashi in DhunotUpazila of Bogra district by 2012. The project links the importance of nutrition and education to achieve sustainable livelihoods in monga affected areas.

Activities

To improve the nutritional status of the beneficiaries, NDP:

- Provides protection from nutrition loss through regular deworming and the promotion of appropriate food processing techniques;
- Provides direct nutrition supplementation for quick recovery from chronic malnutrition;
- Provides flip-flops to all the participants over two years old to prevent hookworm;
- Enhances nutritional intake through the production of diversified, high nutrient value vegetables.

To create economic opportunities at the household level, NDP:

- Introduces crops harvestable during monga and throughout the year and assists the BHHs to cultivate them;
- Provides inputs and technical support to households to start cultivation;
- Provides economic management training to ensure that the project participants can become economically self-sufficient.

NDP disbursed 192 bighas of leased land to 1055 BHHs – an average of six decimals of land per household – to produce crops by themselves with the aim of bringing both economic and social empowerment. Training and input support (land, wages, seeds and fertilizer) as well as training on financial management enable beneficiaries to cultivate and harvest diversified crops and effectively manage their earnings, resulting in economic self-sufficiency. The project takes a group approach with beneficiaries planting, harvesting and selling vegetables together, splitting the revenue equally among all group members, including the elderly and disabled. To ensure sustainability, the beneficiaries have been given inputs and cash support – 100 percent during the first year and 50 percent during the second year to help them generate enough financial resources to continue their economic activities. Training includes skill and technical know-how as well as accessing suppliers and local market actors.

Project Outcomes/Outputs

1. Nutritional, health and hygiene education provided to 1,055 mothers.
2. Micro-nutrient supplementation service provided to children under five years old and pregnant and lactating mothers of the 1,055 households.
3. Technical knowledge, inputs and cash transferred to 1,055 households to cultivate diversified vegetables harvestable during Monga and beyond.

The project was initially planned for two years, but a third year extension was granted one year into the project based on the assumption that two years would not be sufficient to effectively test the innovation.



YEAR 1: OCT 2009-SEPT 2010

The first year experienced start-up delays with beneficiary selection. According to NGO staff they did not foresee such a stringent selection procedure or verification of BHHs by shiree staff. 80% of BHHs were selected in February 2010 and the rest were done in March of the same year. These delays in inception meant that the NGO could not start the first season's crop on time, resulting in low prices for BHH produce. The initial selection period took 25 percent of the project time and delayed project interventions by nearly one year. This highlighted the importance of timely planting and harvesting to the success of the project.

The Inception Report drafted from October to December 2009 provided a clear summary of NDP's progress three months into the project. It highlighted challenges faced, specifically focusing on targeting the extreme poor and the importance of specifying essential and supplementary criteria during the selection process. The Inception Report also indicated that a key reason for the delay in beneficiary selection was that a local NGO was selecting beneficiaries during the same period and some households were duplicated. Once the problem was realized, however, NDP sat with the local NGO to identify the duplications and demarcate respective jurisdiction.

Other issues that were identified in the inception report concerned office security and the project working area. Initially, the project memorandum proposed the working area to cover two unions in the DhunotUpazila. After various negotiation meetings with shiree, it was finally decided that NDP would work in three unions as they had already found the stipulated number of beneficiaries within those areas.

Once the inception period was completed and 1055 extreme poor BHHs were selected and verified by shiree staff, NDP began project interventions. Within the first year, 42 groups were formed which provided a platform for discussions and training on financial management. The groups collectively manage financial transactions and provide emergency loans to members when needed. 14 mother groups were also formed with 280 mothers participating. Both groups focus on food processing and techniques to raise nutrition awareness.

A summary report written by NDP in June 2010 indicated various successes and challenges of the project to date. One difficulty that was raised concerned social threats to female beneficiaries working in the field. Prior to the project, women were not involved in agricultural product cultivation. Therefore, once they began field activities, NDP began to face difficulties with the local government and elite community members. Through extensive engagement and inception workshops with the upazila administration, union representative and community elite, NDP was able to gain their support and continue with project interventions smoothly.

In July 2010, an Output-to-Purpose Review was conducted to evaluate project progress by a two-member shiree team. Some key findings from the OPR included the effect of high transport costs and prevailing market syndicates on beneficiaries' ability to access outside markets, increasing BHHs' dependency on local buyers. It was concluded that a sound marketing channel was yet to develop and this should be a focus for NDP and integrated into project interventions. It was also realized by NDP that a six decimal land transfer might not be enough to lift BHHs out of extreme poverty. Rather, 15 to 20 decimals over a project period of three years would be more successful. This issue was addressed at a later stage during the 2nd year budget negotiations. The OPR also indicated that leasing land in large



clusters has proven to be difficult. The price of land increased when the project started leasing larger amounts of land, suggesting that clustered beneficiaries will be required to pay more if they want to lease land in the future. Some of the leased land was situated far from the BHH homesteads, providing difficulties in efficient land management.

The evaluation of the project design indicated that NDP was delayed in implementing Output 1 and 2 in the first year of the project. It was expected that NDP would help BHHs raise their income by 239% (BDT 40,000 per year) from an average of six decimals of land as well as extra income from sales of vegetable and fruit grown on homestead land. This may have been overly optimistic. However, the land transfers had given BHHs an improved sense of social status. BHHs were also found to have increased their vegetable intake and improved their bargaining power at the market. BHHs were already seeing an increase in income from vegetable selling. NDP had created a crop production plan and later on during the third year they drafted a business plan. Without a business plan it would difficult for NDP to tell BHHs how much they should invest and how much they would gain.

Further recommendations for the end of Year One included:

- NDP should support the groups in developing group management strategies. The principles, rules and regulation of group operation need to be developed. In particular groups must be encouraged to re-invest in commercial cultivation procedures.
- BHHs would benefit from more information and consultation from the NGO on the next steps of the project, such as through a cost-benefit analysis for each BHH.
- NDP should do more to build independence and sustainability of new activities after the end of the project to mitigate the risks of BHH dependency on project inputs and support.

By September 2010, 192 Bighas land had been prepared and were leased for early crop harvest. More than 121,000 kg of vegetables worth BDT 523,000 were sold to the market and more than 93,000 kg of vegetables were consumed by all 1055 BHHs, averaging 93 kg per family. All of the BHHs had been given different materials, assets in the form of lease money, seeds and seedlings/saplings of different vegetable and fruit trees, as well as cash support for the *monga* period. The total savings for all the groups was BDT 523,208 out of which BDT 435,484 was deposited in the bank, with an average income for one season of BDT 962 per BHHs. 14 mother groups 42 farmer groups had been formed, both with regular trainings and meetings underway. The project also provided fruit tree saplings such as papaya, lemon and guava for enhanced nutrition.

YEAR 2: OCT 2010-SEPT 2011

In 2010, NDP added a specific direct nutritional support component to the intervention design. An additional monitoring framework including anthropometric measuring has been developed (based on CMS3) to capture the impact of this intervention. The baseline NDP/shiree Nutrition Impact study was completed between 27 September and 17 October 2010, including the training of field staff on data collection on anthropometry, blood haemoglobin levels, morbidity status, food intake and food security. The study involved two randomized groups of mothers and their children aged <5 years old: an intervention group receiving deworming at 6 monthly intervals, daily micronutrients (using new sprinkles with 15 ingredients) and flip flops, and a control group receiving no intervention but at the end of the trial to receive deworming, flip flops and micronutrients for 3 months. This study was a 24-week cluster-randomized trial aiming to determine, (a) Household annual change in nutritional status as a result of the NDP/shiree package, (b) Intra-individual (mother and <5 year old children) biannual change



in nutritional status as a result of the micronutrient supplements, deworming and use of flip-flops, (c) differences in nutritional status between the control group and intervention group at the end of the study, through a baseline and an end-line survey. Data from the study was processed at a later stage in the project.

The first CMS 4 Quarterly Report conducted in December 2010 indicated that 84.5% of BHHs had saved money and over half were regularly attending group meetings, receiving support from other community members and help from the government health clinic. Over half of the BHHs also said they felt empowered to regularly attend and participate in group meetings, felt confident to move outside of their para and bargain at the market. However, only 36% of BHHs felt empowered enough to make their own decisions. There was a general consensus that income, assets and savings, nutrition and health and service access had not seen significant changes. Over 30% of BHHs did claim that their life was better post-project interventions and 37.7% of BHHs felt that they were better equipped to deal with a problem.

The Self Review Workshop conducted at the beginning of January 2011 identified recurring problems that were also seen during the first year, including: inadequate market opportunities, insufficient land allocation (6 decimals has been found to not be enough to graduate BHHs from extreme poverty) and crop damage due to rains. In response, NDP was encouraged to assess market needs during planning, increase cultivation so that it is year round and introduce land or vegetables suitable to withstand flooding. In the subsequent Self Review Workshop it was found that many of the issues raised in the previous self-review had been addressed by NDP through project interventions. Religious and social barriers that were restricting women from working in the field were reduced, as well as sanitary coverage and safety net support. However, there were some new problems that needed addressing, including a drought that had affected BHHs' crops and security issues with safeguarding crops from being stolen. CMS 4 data also indicated that income, health and sanitation were still problems, and the lack of available work, illness, and high food prices were all contributing to further income erosion. NDP was encouraged to introduce multiple IGA options and invite health workers to group meetings to provide suggestions on health related issues. There was also some conflict between group members over plot land. Many group members repeatedly expressed the need for individual plots as their fieldwork was being hampered with. NDP was forced to change the way in which they mitigated group conflicts.

The Second Quarterly Change Report conducted during the second year did highlight some encouraging factors of NDP interventions, such as: good facilitation and technical supports that inspired BHHs to maintain focus and interest in agriculture; diversity in dietary intake and improved nutritional status due to increased vegetable consumption; and, increased return from vegetable production as well as increased group savings.

YEAR 3: OCT 2011-JAN 2012

The July 2011 Review Report on Innovation Round 2 summarised output progress and the effectiveness of the project in having a sustainable impact. It was an independent review conducted by an external consultant, Mohammed Khairul Islam, and a shiree staff member, Abdus Salam, to evaluate Innovation Round 2 projects for a third year extension. NDP was recommended for extension primarily because two years would not be enough to effectively test the innovation and positively impact BHHs.



The Review Report looked at the effectiveness of project interventions, concluding that:

- NDP had made significant progress in improving the nutritional status of BHHs; however, it was struggling with its target of improving food security and income of BHHs.
- NDP had adopted a group approach rather than a family-based approach and it has been found that a family-based approach is more effective in any economic activities mainly because it provides project participants with a sense of ownership. Project participants have been found to lack ownership which can negatively affect the sustainability of the project. Developing group leadership and coherence will be essential elements for proper functioning, continuity and prosperity of the groups. Only one group out of six visited was vibrant and viable mainly because of dynamic leadership. The other groups appeared to be extremely fluid and likely to fall apart once the project has phased out.
- NDP would need to develop an exit strategy that ensures beneficiaries will continue their activities beyond the project phase. NDP would also need to either develop and/or establish village level entrepreneurs for input supplies and services for BHHs as well as effective linkages with government agencies, local governments and markets.
- BHHs will need some extra support in IGA skill training to ensure sustained income and employment.

The Review Report concluded that NDP should consolidate its project activities based on the project's and BHH's experiences; re-adjust its project approach to establish BHH ownership; and develop/establish local service providers as entrepreneurs for input supplies, basic technical knowhow, other services, and as a market linkage.

The Third Quarterly Change Report conducted at approximately the same time as the Review Report had similar recommendations. Additionally, it noted that NDP's individual approach inspired BHHs to manage vegetable gardens in a more efficient way; BHHs have shown interest in growing rice along with vegetables; and, land ownership diverts BHHs from contributing to vegetable production. Monthly reports from August through October all indicated heavy rainfalls were damaging BHHs' crops and flooding the land. As such, it was recommended that beneficiaries either have land on higher ground to mitigate flooding or engage in an alternative IGA during that rainy season. Based on the increased interest among BHHs in homestead vegetable and rice production, in the third year focus was given to homestead gardening which gave good results. 93 percent of BHHs undertook vegetable gardening in their homestead during the winter season. Additionally, the fruit trees that were planted during Year 1 produced significant yield in the third year, helping to increase income and enhance nutritional levels. A major aspect of the project this year has been an additional nutritional component in the form of direct nutritional support including micronutrient sprinkles and de-worming treatment. Half of all the beneficiaries received the nutrient sprinkles and de-worming treatment and half did not – this is part of a randomized control trial (RCT) methodological approach. The beneficiaries that did not receive this support (the control group) have started receiving this at the end of 2011, while the beneficiaries receiving interventions will not continue receiving support. The participating HHs reported that their health had improved enabling them to work for longer hours. The additional nutritional component will continue in 2012, with analysis and impact studies to be undertaken by the shiree Nutrition Coordinator.

In the final quarter of the project, NDP began strategizing its exit plan to phase out project activities. 428 group sessions were organized with mothers on appropriate sharing of food within the household. Consequently, BHHs have developed the practice of sharing equal food among all members of the



family. In addition, other essential topics such as health, nutrition, homestead gardening, etc were discussed in the group sessions. NDP has also linked BHHs with local services providers and raised their awareness of the available quality inputs and services. With the help of the Livestock Department, 8 poultry vaccinators were also developed for vaccinating poultry in the community. Other essential linkages were formed between the BHHs and local service providers, including DAE and the community health clinic.

CONCLUSION

NDP's project has been successful on a number of counts, particularly in encouraging BHHs to invest in alternative IGAs other than the ones proposed in the intervention plan, such as rice cultivation. Additionally, the nutrition intervention has resulted in improved health for many of the BHHs, allowing them to work for longer hours. The project has helped mobilize female beneficiaries to engage in income generating activities and work outside their home. Approximately 50 percent of female beneficiaries are now engaged in labor employment and as a result of the nutrition intervention they have the strength and energy to work. Some of the key lessons to be realized from this process are: 1) the difficulties in targeting extreme poor households; 2) six decimals of land has been found to not be sufficient enough to graduate BHHs from extreme poverty; 3) a lack of market linkages can severely impact the sustainability of project interventions and hinder BHHs' ability to profit from their produce; and 4) beneficiary ownership of their IGAs is an important part of engaging the extreme poor in newly adopted IGAs and without ownership the sustainability of the interventions can be compromised. Understanding these factors and their affect on project success has been an important and difficult task for NDP. However, project interventions have so far appeared to make a positive impact on the lives of beneficiaries with improvements in income, confidence and health. One important achievement of the project is asset building by the beneficiaries. A recent study has shown the average annual income of BHHs to be 37,000 Tk. per year with an average productive asset value of 28,000 Tk. (including the asset given from the project).

ISSUES REGARDING SCALABILITY

- Market access has appeared to be a key constraint for NDP throughout the project and may affect possible scale up of the interventions unless adequately addressed.
- Land allocation has also been too small to effectively graduate BHHs from extreme poverty. If the project were to be scaled up, increased land plots (more than 6 decimals) would need to be distributed to BHHs in order for them to effectively cultivate sufficient levels of produce and receive enough of a return in income.
- The price of leasing land has increased and it will be unlikely that NDP will be able to lease land at similar prices as before.



Chapter Two: Endline to Baseline Findings

INTRODUCTION

A total of 12 projects have received funding under Innovation Fund Round One and Two and the project period will come to a close at the end of August 2012.¹ The present section seeks to analyse the efficiency and effectiveness of these innovation modalities in uplifting people from extreme poverty in the given communities and regions through comparing present socio-economic conditions with baseline information using specific indicators.

Objective: The objective of the Endline Study is to assess the change in socio-economic status of the project beneficiary households since the baseline in 2009.

Study design: From each organization 64 representative sample households were randomly selected to carry out an endline study. Taking advantage of the uniqueness of the household identities, the same 64 households were selected from the baseline database to compare change. It is important to note that the baseline study was a census.

Field Work: A total of 28 enumerators, 9 Research Assistants from Scale Fund organizations, 3 M&E/MIS personnel, and 1 Bengali Young professional, under the guidance of a researcher from Cambridge University carried out the data collection for the endline study in 30 days from 16th March 2012. The entire study was managed by the Decision Support Unit at shiree and for the purpose of smooth implementation considering travel time and availability of accommodation and accessibility of sample households, the study team was divided into two smaller teams. The two smaller teams collected the data after 14 days of orientation on the questionnaire and methods.

Trained enumerators carried out interviews primarily of household heads on their socio-economic conditions using a pre-tested semi-structured questionnaire focusing on the following indicators:

- Demographic characteristic
- Household Assets
- Household income
- Household expenditure
- Loan and saving status
- Access to safe water, sanitation, electricity
- Housing condition
- Food security
- Access to safety net

¹ For details on the projects and modalities see Chapter One.



The endline questionnaire was developed by a faculty member of Cambridge University. As the baseline questionnaire is to some extent different to the endline study questionnaire, data analysis has been done only on the common indicators existing in both of the questionnaires.

Constraints: It should be noted that the data for the endline study for all the projects was collected during the same time period, but the baseline data was collected phase by phase at different times and seasons. Moreover, the data collected for the endline study was conducted by more trained enumerators in comparison to the data collectors of the baseline information. Therefore, the data may contain seasonal variations particularly related to economic activities in the rural context where agriculture is the single largest employment sector. It may also contain some variation due to the different levels of perception of data collectors.

Organization of the chapter: The report does not aim to compare effectiveness of innovation projects to each other but rather the socio-economic changes of BHHs of specific projects since baseline. Therefore, an analysis of each project has been done separately considering the fact that each project is different in terms of modalities, locality and targeted communities. In the following section findings from NDP's project are presented.

HOUSEHOLD BASIC DEMOGRAPHIC CHARACTERISTICS

Table 1.1: Basic socio-demographic characteristics according to sex of household head.

Category	Baseline		Endline	
	N	%	N	%
Male headed household	37	57.8	38	59.4
Female headed household	27	42.2	26	40.6
Both	64	100	64	100

Endline findings do not indicate change in the sex of household heads since the baseline. During the baseline, 42% of household heads were female and 58% were male, while in the endline 41% of household heads are female and the remaining (59%) are male.

Household size

Table: 1.2: Distribution of household average size according to sex of household head.

Baseline						Endline					
Male		Female		Both		Male		Female		Both	
Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
3.54	1.09	2.30	1.51	3.02	1.42	4.32	1.29	2.46	1.72	3.56	1.73

Endline findings indicate change in mean household size since the baseline. Among male headed households the mean household size has increased to 4.32 (endline) from the baseline size of 3.54. Mean household size of female headed household has increased to 2.46 (endline) from 2.30 (baseline)².

OCCUPATION

² An increase in family size over the period of economic empowerment interventions is consistent with findings from across the entire shire portfolio (ie Innovation and Scale Fund projects)



Table 2.1: Change in primary occupation of household head

Occupation	Baseline		End line	
	N	%	N	%
<i>Agricultural day labour</i>	4	6.3	19	29.7
<i>Other Day labour</i>	21	32.8	6	9.4
<i>Domestic maid</i>	-	-	2	3.1
<i>Rickshaw/van/boat/bullock/push cart</i>	-	-	6	9.4
<i>skilled labor (manual)</i>	-	-	7	10.9
<i>Fishing in open water</i>	-	-	1	1.6
<i>Petty trade</i>	-	-	4	6.3
<i>Other business</i>	-	-	1	1.6
<i>Begging</i>	-	-	2	3.1
<i>Others</i>	33	51.6	2	3.1
<i>Does not work</i>	4	6.3	-	-
<i>Housewife</i>	2	3.1	-	-
<i>Own agriculture</i>	-	-	5	7.8
<i>Cottage industry</i>	-	-	1	1.6
<i>Livestock/poultry</i>	-	-	7	10.9
<i>Service</i>	-	-	1	1.6
Total	64	100	64	100

Endline findings for the primary occupation of beneficiary household heads indicate that the innovation project intervention had a considerable effect in changing the occupation from its baseline status. One of the major interventions of the NDP project was to involve its beneficiaries in agricultural activity and endline findings indicate increases in engagement with agricultural activities among beneficiary households.

During the baseline the primary occupation for most of the beneficiary household heads was other category (52%) and other day labour (33%). In the endline both those categories have reduced considerably and agriculture day labour has risen to 30% from 6% in the baseline. Endline findings further indicated that 8% of households are presently involved in their own agriculture while in the baseline not a single household was found under this occupational category (*for details see table 2.1*).

Besides change in primary occupation, the endline findings also indicate that the majority of households have additional income sources besides the primary source (*see table 2.2*). During the endline, nearly 80% of households have additional income sources other than the primary one. Nevertheless, 20% of households do not have any additional occupations other than the primary one.

Table: 2.2: Distribution number of other occupations of household head according to sex of household head.

Number of other jobs	Endline					
	Male headed household		Female headed household		Both	
	N	%	N	%	N	%



0	10	26.3	3	11.5	13	20.3
1	14	36.8	11	42.3	25	39.1
2	11	28.9	7	26.9	18	28.1
3	3	7.9	3	11.5	6	9.4
4	-	-	2	3.1	2	3.1
Total	38	100	26	100	64	100
Test	X ² =4.94, p= 0.029					

NB: Number of occupation other than household main occupation.

INCOME

Table 3.1: Mean distribution of household monthly income (cash and kind).

Baseline		Endline		Differences		Test
Mean	SD	Mean	SD	Mean	SD	
1255.26	415.82	8298.17	10071.61	7042.91	10136.08	T=5.559, p=5.882

Endline findings indicate change in income since the baseline. The mean income at the baseline was 1255 BDT and SD 416 BDT while in the endline, mean monthly income is 8298 BDT and SD is 10072 BDT. The mean increase in income is 7043 BDT. Here income includes both cash and in kind (*for details see table 3.1*).

Table 3.2 provides information on cash and in kind income separately. The mean monthly household cash income at the baseline was 1232 BDT which increased to 7297 BDT in the endline. Similarly, change is also observed in kind income. The mean in kind income at the baseline was 23 BDT while at the endline it is 1001 BDT. Increased involvement in agriculture related activity might be responsible for the considerable increase in kind income which requires further investigation

Table 3.2: Mean distribution of household monthly income

Variables /Categories	Baseline		Endline		Differences		Test
	Mean	SD	Mean	SD	Mean	SD	
Cash income	1232.36	437.11	7297.05	9811.68	6064.69	9881.18	T=4.910, p=6.771
Kind income	22.90	167.21	1001.13	974.23	978.22	974.67	T=8.029, p=3.172

Moreover, the daily per capita mean income also increased considerably between baseline and endline. The daily mean per capita at the baseline was 21 BDT which increased to 82 BDT during the endline (*for details see table 3.3*).

Table 3.3: Mean distribution of household monthly regular cash income per capita/day.

Variables /Categories	Baseline		Endline		Differences		Test
	Mean	SD	Mean	SD	Mean	SD	
Cash income	19.51	15.71	68.36	68.3	48.85	70.85	T=5.515, p=6.947
Kind income	1.24	1.64	13.56	20.77	12.31	19.39	T=5.082, p=3.586



Total	20.75	17.35	81.92	89.07	61.16	90.24	
-------	-------	-------	-------	-------	-------	-------	--

Income change in percentage

The endline findings indicate that income (cash and in kind) of nearly 84% of households increased more than 55% in comparison to the baseline; however increases in income of 11% of households remain within 15% (for detail see table 3.5).

Table 3.5: Household income increase according to household regular income and total income in percentage

Income increase (%)	Cash income		Income include kind	
	N	%	N	%
Up to 15	12	18.8	7	10.9
16 - 25	1	1.6	1	1.6
26-35	1	1.6	-	-
36 -45	-	-	1	1.6
46 - 55	2	3.1	1	1.6
55+	48	75	54	84.4
Total	64	100	64	100

CHANGE IN POVERTY THRESHOLDS

Table 3.6: Distribution of household poverty level according to cash income per capita/day and sex of household head.

Variables (sex)	Baseline								Endline							
	Extreme poverty (48)		Poor (49-55)		Non poor (55+)		Total		Extreme poverty		Poor		Non poor		Total	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Male	37	100	-	-	-	-	37	100	21	55.3	2	5.3	15	39.5	38	100
Female	21	77.8	2	7.4	4	14.8	27	100	14	53.8	2	7.7	10	38.5	26	100
Total	58	90.6	2	3.1	4	6.3	64	100	35	54.7	4	6.3	25	39.1	64	100
Test	X ² =9.073, p= 0.011								X ² =0.155, p=0.925							

NB: Inflation adjusted to 2011 according to rural food index inflation 12.03%

After inflation adjustment for 2011, the percentage of households remaining below the extreme poverty line (daily per capita income below 48 BDT) at the endline is 55%; however, 39% have crossed not only the extreme poverty line but also the poverty line and their daily per capita income is more than 55 BDT (for details see table 3.6). The percentage of non poor households increases further if kind income is included along with cash income. In the endline 53% of households fall under the non poor category and the percentage of households earning less than 48 BDT drops to 42% (for details see table 3.7).

Table 3.7: Distribution of household poverty level according to total income (cash & kind) per capita/day

Variables (sex)	Baseline								Endline							
	Extreme poverty		Poor		Non poor		Total		Extreme poverty		Poor		Non poor		Total	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Male	37	100	-	-	-	-	37	100	18	47.4	2	5.3	18	47.4	38	100



Female	21	77.8	2	7.4	4	14.8	27	100	9	34.6	1	3.8	16	61.5	26	100
Total	58	90.6	2	3.1	4	6.3	64	100	27	42.2	3	4.7	34	53.1	64	100
Test	X ² =9.073, p= 0.011								X ² =1.245, p= 0.537							

NB: Inflation adjusted to 2011 according to rural food index inflation 12.03%

EXPENDITURE

Table 4.1: Mean distribution of household monthly expenditures.

Baseline		Endline		Differences		Paired t-Test
Mean	SD	Mean	SD	Mean	SD	
1525.40	454.81	5207.49	6555.48	3682.09	6465.90	T=4.556, p=2.452

Endline findings indicate change in monthly expenditure. The mean expenditure at the baseline was 1525 BDT while in the endline, the mean monthly expenditure is 5207 BDT. The mean increase in monthly expenditure is 3682 BDT. Here expenditure means only cash expenditure and includes irregular expenditure such as house repairs, purchasing of furniture etc. The daily per capita expenditure in the endline is 32 BDT while in the baseline it was 23 BDT.

Table 4.2: Mean distribution of household monthly regular expenditures per capita/day.

Baseline		Endline		Differences		Test
Mean	SD	Mean	SD	Mean	SD	
22.55	16.74	32.49	20.18	9.94	21.61	T=3.681, P=4.842

Percentage increase in expenditure

The endline findings indicate that the total monthly expenditure including irregular expenditure of nearly 72% of households has increased by more than 55% in comparison to the baseline; however increases in the total monthly expenditure for 27% of households remains within 15%

Table 4.3: Percentage of increase in household monthly regular and total expenditure including irregular expenditure

Income increase (%)	Regular expenditure		Total expenditure (include irregular expenditure)	
	N	%	N	%
Up to 15	23	35.9	17	26.6
16 - 25	1	1.6	-	-
26-35	1	1.6	1	1.6
36 -45	2	3.1	-	-
46 - 55	3	4.7	-	-
55+	34	53.1	46	71.9
Total	64	100	64	100

ASSETS

Endline findings indicate change in the ownership of assets particularly under poultry and livestock categories. In the baseline 100% of households did not own any poultry; however, currently 77% of households have poultry of which 50% have more than 3, 20% have more than 2, and 6% have more



than 1 poultry. Moreover, at the endline 86% of households reported having livestock of which 42% have more than 3. At the baseline only 3% of households had livestock

Table 5.1 Ownership of asset household according to household head categories in percentage

Assets type	Number of items	Baseline						End line					
		Male		Female		Both		Male		Female		Both	
		N	%	N	%	N	%	N	%	N	%	N	%
Livestock	0	36	97.3	26	96.3	62	96.9	6	15.8	3	11.5	9	14.1
	1	1	2.7	1	3.7	2	3.1	7	18.4	5	19.2	12	18.8
	2	-	-	-	-	-	-	10	26.3	6	23.1	16	25.0
	3+	-	-	-	-	-	-	15	39.5	12	46.2	27	42.2
	Total	37	100	27	100	64	100	38	100	26	100	64	100
Poultry		N	%	N	%	N	%	N	%	N	%	N	%
	0	37	100	27	100	64	100	10	26.3	5	19.2	15	23.4
	1	-	-	-	-	-	-	3	7.9	1	3.8	4	6.3
	2	-	-	-	-	-	-	7	18.4	6	23.1	13	20.3
	3+	-	-	-	-	-	-	18	47.4	14	53.8	32	50.0
Total	37	100	27	100	64	100	38	100	26	100	64	100	
Working equipment	0	6	16.2	2	7.4	8	12.5	1	2.6	4	15.4	5	7.8
	1	3	8.1	-	-	3	4.7	2	5.3	-	-	2	3.1
	2	3	8.1	2	7.4	5	7.8	1	2.6	-	-	1	1.6
	3+	25	67.6	23	85.2	48	75	34	89.5	22	84.6	56	87.5
	Total	37	100	27	100	64	100	38	100	26	100	64	100
Household belongings	0	-	-	-	-	-	-	-	-	-	-	-	-
	1	-	-	-	-	-	-	-	-	-	-	-	-
	2	-	-	-	-	-	-	-	-	-	-	-	-
	3+	37	100	27	100	64	100	38	100	26	100	64	100
	Total	37	100	27	100	64	100	38	100	26	100	64	100

The value of assets

Table 5.2: Mean asset value of asset transferred from shiree supported project

Variables /Categories	Endline					
	Male		Female		Both	
	Mean	SD	Mean	SD	Mean	SD
Shiree livestock	-	-	-	-	-	-
Agriculture	6786.75	-	6786.75	-	6786.75	-
Business support	-	-	-	-	-	-
Capital IGA	3997.6	-	3997.6	-	3997.6	-
Khas land decimal	-	-	-	-	-	-
Lease or mortgaged land	3134.41	-	3134.41	-	3134.41	-
Total	13918.76	-	13918.76	-	13918.76	-



Note: Same amount of distribution to all beneficiaries

The value of assets was not collected during the baseline. Furthermore, endline information includes the value of the assets transferred under the project. As such, it is very difficult to mention anything about change in the value of assets since the baseline.

Nevertheless, the general shree selection criteria is that all beneficiary households do not own assets that value more than 5000 BDT and the mean asset value of NDP transferred assets is 13919 BDT which mostly includes agriculture inputs (see table 5.2). However, the mean value of assets for NDP beneficiaries is 27817 BDT (see table 5.3).

Table 5.3: Mean distribution of households according to mean asset value and sex of HH head.

Variables /Categories	Endline					
	Male		Female		Both	
	Mean	SD	Mean	SD	Mean	SD
Livestock	11680.79	10534.98	6532.69	5977.96	9589.38	9265.92
Poultry	666.32	767.27	636.54	514.31	654.22	671.52
Working equipment	1817.89	2328.15	726.73	2433.94	1374.61	2413.69
Household belongings	11143.24	7456.90	8803.85	10850.83	10177.78	9006.16
Total	32887.57	25935.81	20602.12	28792.40	27817.38	27604.86

HOUSEHOLD SAVINGS AND LOAN

The endline findings on savings indicate change since the baseline. During the baseline not even a single household had savings but the endline shows that 91% of households have some amount of savings among which 5% have between 15001-20000 BDT, 11% have between 10001-15000 BDT, 17% have between 5001-10000 BDT, and 25% have between 1000-5000 BDT; 30% of households practice savings but the amount is less than 1000 BDT and 8% have more than 20000 BDT as savings

Table 6.1: Distribution of household reporting to have savings as per household head category.

Category (BDT)	Baseline						Endline					
	Male		Female		Both		Male		Female		Both	
	N	%	N	%	N	%	N	%	N	%	N	%
0	37	100	27	100	64	100	2	5.3	4	15.4	6	9.4
<1000	-	-	-	-	-	-	12	31.6	4	15.4	16	25.0
1000-5000	-	-	-	-	-	-	9	23.7	7	26.9	16	25.0
5001-10000	-	-	-	-	-	-	7	18.4	4	15.4	11	17.2
10001-15000	-	-	-	-	-	-	2	5.3	5	19.2	7	10.9
15001-20000	-	-	-	-	-	-	2	5.3	1	3.8	3	4.7
20000+	-	-	-	-	-	-	4	10.5	1	3.8	5	7.8
Total	37	100	27	100	64	100	38	100	26	100	64	100
Test							X ² =7.155, p=0.307					



In regards to taking loans, endline findings indicate some change. During the baseline not even a single household reported having any loans, not surprising since this was an exclusion criteria during selection, while in the endline 11% of households informed having a loan.

Table 6.2: Distribution of household reporting to have outstanding loans and sex of household heads.

Sources of loan	Baseline					Endline					Outstanding mean in taka (mean of only those who have taken loan)
	Yes		No		Outstanding mean (BDT)	Yes		No			
	N	%	N	%		N	%	N	%		
Informal without interest	-	-	64	100	-	3	4.7	61	95.3	2,325	
With interest informal loan	-	-	64	100	-	-	-	64	100	-	
Formal loan with interest MFI	-	-	64	100	-	4	6.3	60	93.8	5,500	
Formal loan with GoB	-	-	64	100	-	-	-	64	100	-	
Loan from shomity or CBO With interest	-	-	64	100	-	-	-	64	100	-	
Other loan	-	-	64	100	-	-	-	64	100	-	

HOUSING CONDITION AND ACCESS TO WATER SUPPLY, SANITATION AND ELECTRICITY

Change in wall and roof material of house

Table 7.1 Distribution of households according to wall construction materials and sex of household heads.

Materials (walls)	Baseline						Endline					
	Male		Female		Both		Male		Female		Both	
	N	%	N	%	N	%	N	%	N	%	N	%
Grass/jute stick/leaves/plastic	-	-	-	-	-	-	8	21.1	4	15.4	12	18.8
Bamboo	37	100	27	100	64	100	-	-	-	-	-	-
Wood	-	-	-	-	-	-	-	-	-	-	-	-
Mud	-	-	-	-	-	-	1	2.6			1	1.6
Tiles	-	-	-	-	-	-	-	-	-	-	-	-
Tin/Cl sheets	-	-	-	-	-	-	29	76.3	22	84.6	51	79.7
Cement/brick	-	-	-	-	-	-	-	-	-	-	-	-
Others	-	-	-	-	-	-	-	-	-	-	-	-
Total	37	100	27	100	64	100	38	100	26	100	64	100
Test							X ² =1.08, p= 0.58					



Endline findings indicate change in the quality of wall materials for the majority of households. During the baseline almost all house walls were made of bamboo (100%). However, during the endline it was found that house walls for 80% are made of tin/CI sheets and 19% are made of Grass/jute stick/leaves/plastic (for details see table 7.1)

Change is also reported on the quality of roof materials. During the baseline only 20% of houses have roofs made of Tin/CI sheet while in the endline it increased to 100% (see table 7.2).

Table 7.2 Distribution of households according to roofing materials and sex of household heads

Materials (roof)	Baseline						Endline					
	Male		Female		Both		Male		Female		Both	
	N	%	N	%	N	%	N	%	N	%	N	%
Grass/jute stick/leaves/plastic	27	73.0	23	85.2	50	78.1	-	-	-	-	-	-
Bamboo	1	2.7	-	-	1	1.6	-	-	-	-	-	-
Wood	-	-	-	-	-	-	-	-	-	-	-	-
Mud	-	-	-	-	-	-	-	-	-	-	-	-
Tiles	-	-	-	-	-	-	-	-	-	-	-	-
Tin/CI sheets	9	24.3	4	14.8	13	20.3	38	100	26	100	64	100
Cement/brick	-	-	-	-	-	-	-	-	-	-	-	-
Others	-	-	-	-	-	-	-	-	-	-	-	-
Total	37	100	27	100	64	100	38	100	26	100	64	100
Test	$\chi^2 = 1.72, p = 0.42$											

House size

The mean size of houses has reduced considerably in the endline in comparison to the baseline. During the baseline the mean house size was 184 sqft while in the endline it is 95 sqft.

Table 7.3: Mean distribution for size of house and per capita housing space according to sex of household head.

Categories	Mean of house size (sqft)		Mean of per capital floor space (sqft)	
	Mean	SD	Mean	SD
Baseline	183.78	57.32	83.92	37.65
Endline	94.96	26.08	63.80	30.33

The change in house ownership pattern may provide some kind of explanation for why there is mentionable change in housing conditions in regards to roof, wall and size. The house ownership information indicates that since the baseline a considerable number of houses have been built or renovated.

The house ownership table indicates that at the baseline 95% lived in their own house; however, in the endline 36% now live in their own house and 55% have constructed a house on khasland (41%) or on someone else's land (14%) (see table 7.4).

Table 7.4: Ownership distribution of house according to sex of household head.

House ownership	Baseline			Endline		
	Male	Female	Both	Male	Female	Both



	N	%	N	%	N	%	N	%	N	%	N	%
Owned	36	97.3	25	92.6	61	95.3	17	44.7	6	23.1	23	35.9
Rented	-	-	-	-	-	-	-	-	-	-	-	-
Parent	-	-	2	7.4	2	3.1	2	5.3	1	3.8	3	4.7
Parent in law	1	2.7	-	-	1	1.6	-	-	-	-	-	-
Live rent free with family	-	-	-	-	-	-	-	-	1	3.8	1	1.6
Live rent free with non family	-	-	-	-	-	-	-	-	-	-	-	-
Own house on khas land	-	-	-	-	-	-	13	34.2	13	50.0	26	40.6
Someone else's land	-	-	-	-	-	-	5	13.2	4	15.4	9	14.1
Son-daughter	-	-	-	-	-	-	1	2.6	1	3.8	2	3.1
Total	37	100	27	100	64	100	38	100	26	100	64	100
Test	X ² =3.50, p=0.173						X ² = 4.61, p= 0.46					

Access to safe water

The endline findings in regards to access to improved water sources indicate improvement. At the endline 100% of households reported that they collect drinking water from hand tubewells; however, at the baseline 22% of households used to collect water from unprotected sources such as open wells (8%) and pond-rivers (14%) (*for details see table 7.5*).

Table 7.5: Distribution of households according to sources of drinking water and sex of household heads.

Sources of drinking water	Baseline						Endline					
	Male		Female		Both		Male		Female		Both	
	N	%	N	%	N	%	N	%	N	%	N	%
Piped	-	-	1	3.7	1	1.6	-	-	-	-	-	-
Hand tube well	25	67.6	24	88.9	49	76.6	38	100	26	100	64	100
Open well	3	8.1	2	7.4	5	7.8	-	-	-	-	-	-
Pond-river	9	24.3	-	-	9	14.1	-	-	-	-	-	-
Rain water	-	-	-	-	-	-	-	-	-	-	-	-
Purchased water	-	-	-	-	-	-	-	-	-	-	-	-
Others	-	-	-	-	-	-	-	-	-	-	-	-
Total	37	100	27	100	64	100	38	100	26	100	64	100
Test	X ² =8.87, p= 0.31											

Protected water source ownership

During the baseline no households owned any protected water sources and the majority of households used to collect water from community owned sources supplied by NGOs (93%). However, endline findings indicate that 62% of beneficiary households own tubewells which also includes households having shared ownership (19%) (*for details see table 7.6*).



Table 7.6: Distribution of households according to ownership of hand tube wells and sex of household heads.

Sources of drinking water	Baseline						Endline					
	Male		Female		Both		Male		Female		Both	
	N	%	N	%	N	%	N	%	N	%	N	%
Owned by household	-	-	-	-	-	-	19	50.0	10	38.5	29	45.3
Shared ownership	-	-	-	-	-	-	7	18.4	5	19.2	12	18.8
Own by others	8	21.6	2	7.4	10	15.6	12	31.6	11	42.3	23	35.9
Not applicable	-	-	-	-	-	-	-	-	-	-	-	-
Public (Government)	1	2.7	-	-	1	1.6	-	-	-	-	-	-
NGO Supplied	24	64.9	25	92.6	49	76.6	-	-	-	-	-	-
Others	4	10.8	-	-	4	6.3	-	-	-	-	-	-
Total	37	100	27	100	49	100	38	100	26	100	64	100
Test	X ² =7.235, p=0.065						X ² =0.953, p=0.620					

Sanitation

Endline findings indicate a positive shift in defecation practices since the baseline. During the baseline nearly 95% of households used to defecate in open spaces/hanging latrines. Only 5% had ring slab latrines. However, endline findings report that 91% of households defecate in ring slabs and 6% of households use pit latrines for defecation (see table 7.7). Nonetheless 3% still defecate in open spaces or hanging latrines.

Table 7.7: Distribution of household according to place of defecation and sex of household heads.

Place of defecation	Baseline						Endline					
	Male		Female		Both		Male		Female		Both	
	N	%	N	%	N	%	N	%	N	%	N	%
Open spaces/ Hanging latrine	35	94.6	26	96.3	61	95.3	-	-	2	6.6	2	3.2
Pit latrine	-	-	-	-	-	-	1	2.6	3	11.5	4	6.3
Ring/slab latrine	2	5.4	1	3.7	3	4.7	37	97.4	21	80.8	58	90.5
Complete Sanitary	-	-	-	-	-	-	-	-	-	-	-	-
Others	-	-	-	-	-	-	-	-	-	-	-	-
Total	37	100	27	100	64	100	38	100	26	100	64	100
Test	X ² =0.10, p=0.61						X ² =5.35, p=0.14					

Electricity

In regards to access to electricity change has been observed since the baseline. During the baseline no households had connections to electricity but in the endline 5 households reported having a connection to electricity and a percentage of households also have access to a generator. Moreover 2% of households reported to have a solar power supply

Table 2.8: Distribution of households according to connection of electricity and sex of household heads



Type of electricity connection	Baseline						Endline					
	Male		Female		Both		Male		Female		Both	
	N	%	N	%	N	%	N	%	N	%	N	%
No electrify	37	100	27	100	64	100	34	89.5	23	88.5	57	89.1
Connected to main line	-	-	-	-	-	-	2	5.3	1	3.8	3	4.7
Connected to other house	-	-	-	-	-	-	-	-	-	-	-	-
Connected to generator	-	-	-	-	-	-	2	5.3	1	3.8	3	4.7
Solar power	-	-	-	-	-	-	-	-	1	3.8	1	1.6
Other	-	-	-	-	-	-	-	-	-	-	-	-
Total	37	100	27	100	64	100	38	100	26	100	64	100
Test	$\chi^2= 3.99, p= 0.135$						$\chi^2=1.59, p= 0.66$					

CONCLUSION

Endline findings indicate that the situation of NDP beneficiary households has improved in the areas of income, expenditure, assets, savings and water and sanitation. However, 42% of beneficiary households still fall under the extreme poverty line. Although the income of nearly 84% of households has increased by more than 55% in comparison to the baseline. As with other shiree sub projects this may indicate the effectiveness in targeting the poorest of the poor, while they have improved their position considerably many still fall within the poorest 17.6% of the population counted as extreme poor according to HIES 2010 criteria.



shiree

Chapter Three:

Beneficiary Focus Group Discussions

INTRODUCTION

Part of the lesson learning process is to hear from the beneficiaries concerning how they perceive the impact of the interventions on their livelihoods. For NDP, two Focus Group Discussions (FGD) were conducted in which approximately 16 male and female beneficiaries, 8 in each group, were interviewed to gauge their experiences with the interventions. Each FGD took two to three hours and was conducted by a three-person team: one shiree Programme Manager; one shiree Young Professional; and one Research Assistant. The discussions focused on discovering key findings relevant to economic empowerment given the geographical and social contexts of the working area.

DAY ONE – FGD 1 AND 2

11 women

1. Zamirun- married, 1 daughter
2. Anu- married, 1 son
3. Renuka- married, 2 children
4. Shazeda- single
5. Shundori- single, 4 children
6. NurJahan- married, 1 son
7. MusammatSofura- married, 2 children
8. SelinaAkhtar-married
9. Murshida- married
10. MusammatShaplaAkhter- married
11. MusammatRenu Hassan- married

Before the Intervention

All the beneficiaries before the intervention lived in a state of dire poverty making approximately 200 BDT a week which was not enough for three proper meals a day or other basic needs. They often went to bed hungry and suffered from poor nutrition and health. Many worked in other people's homes and fields but were usually paid with food rather than money.

After the Intervention

After three days of training the beneficiaries were given 6 decimals of land along with supportive materials like seed, fencing, spades and other utensils. The beneficiaries have not made huge strides in being economically self-sufficient but their general standards of living and nutrition has improved greatly. They have vegetables readily available for them and they do not have to watch what they eat anymore.

Economic Security and Sustainability



Zamirun is part of a group saving scheme with 29 other people and they have managed to save about 40,000 BDT together hoping to buy or lease their own piece of land. She, like others, have bought ducks and chickens whose eggs they can eat or sell and she has also bought goats. She has her own savings with BIMA. She has also bought her own small piece of land on which she plants maize and has made a good profit from selling them. Many of the beneficiaries have entered savings schemes with BRAC where they put in money aside every month.

The beneficiaries have all bought other smaller assets like ducks, goats and chickens and some have bought cows. Some have also bought vans which are driven by their husbands or sons. As a result, they have different sources of income and small amounts of savings which indicate that they can gradually climb out of extreme poverty.

Empowerment and Confidence

They feel like they are more respected in the community and are invited to social events more often. It makes a huge difference to them that people stop and ask them how they are. They used to be too scared to talk to the chairman before and now they can assert themselves, identify needs of the extreme poor in the community and demand things from the local government. Now they give advice to other poor people in the community on how to handle their land.

The women used to work in other people's homes for food out of desperation. Some of them still do but they have become empowered enough to refuse if they are not paid in cash.

Shundori, who had been abandoned by her husband, had to give up her youngest daughter to an orphanage. Because of the intervention, she has been able to bring her back, take care of her and send her to school after the increase in income.

IGA suitability

After the initial advice on the land, they chose the supplementary IGAs themselves. Most of them chose land as an IGA and others took vansom cows. They struggled at first as they had very little experience but now they are excited to work. They feel like the land earns them the most and is most beneficial because they can eat and sell the produce from the land. They will continue to work with the same IGAs in the future. The elderly get group support and do easier work like looking after children or guarding the cows and goats. They are happy with the IGAs and will continue as they are now.

Gender Awareness and Household Dynamics

Things are more equal in households between men and women now. The husbands used to forbid them from going out late at night or working in the fields and now they all work together. The husbands and wives work the same hours and bring in the same amount of money so there is mutual respect in the relationship.

Improved Health and Nutrition.

Prior to intervention they were plagued by different ailments like dizziness and weak legs and their children would get sick and weak from malnutrition or poor hygiene. They were unable to work for too long out in the sun. Now, they are not affected by any of these sicknesses anymore and are able to work long hours during the day. They have been informed about where to go for medical help if they ever need it and they are all able to afford medical costs. They all said that they are no longer worried about



food – they can eat three proper meals a day. They have a constant source of vegetables and now can also eat fish, meat, eggs and lentils from time to time.

All the beneficiaries received flip flops as a part of the intervention and they all use them and feel like their hygiene practices have improved. Everyone has access to sanitary latrines and tubewell.

Community and Market Engagement and Mobility.

The women are all able to go to the markets and engage in trading, selling, bargaining and buying by themselves without support from their husbands. At first many buyers tried to cheat by charging them more than market price. They were afraid of what people might say about them before, but the advocacy sessions have taught them to be more assertive. In the beginning of the project the land was too far away for the women to access and they were berated by the community people. They used to be called to events to wash dishes before, and now because of their new status they are invited to weddings and other events. They feel like it is because now they have more. They no longer consider themselves to be the poorest in the community anymore.

Sofura had tried to lease land on her own before but the landowner would not agree to lease her any land because he did not feel like she could really use the land properly. She also felt like she did not have the right experience to take care of it on her own. The project itself had difficulty attaining land in the beginning and had to convince the landowners to look at the potential of the extreme poor. People were also wary of women working in the field and did not think it was a proper.

Access to Services

The beneficiaries are now linked with health facilities and Local Government Institutions such as the agricultural department. They know where to go for medical help whether it is for themselves or their livestock. Some of the beneficiaries whose children go to school get stipends from the government.

CASE STUDY

Zamirun was never able to find proper work and mostly stayed at home taking care of her young daughter. Sometimes she would work in the houses or fields of local elites for small amounts of food but had trouble working long because she felt physically weak. Her husband worked as an agricultural day labourer and made about 200 BDT a week. Their days passed in hardship where they would only manage one meal a day. Things were especially hard during the lean period when sometime they were not able to eat for days. She frequently complained of dizziness, headaches, night blindness, bleeding gums and weak legs but never knew where to go for medical help and also felt afraid to ask. With no education or skills they were unable to find proper work or even catch their own fish.

When NDP identified Zamirun as extreme poor and taken on as a beneficiary, she, along with the other beneficiaries received three days of training and 6 decimals of land to work on along with supportive materials like seeds, fencing, spades, etc. the project beneficiaries also received extra money during the munga period, with which Zamirun bought a goat, and now she has five of them. With her profits she has bought five ducks whose eggs she consumes or sells. She bought a small piece of land on which planted maize and made 9000 BDT and now has managed to buy a cow worth 20,000 BDT. Her husband still migrates during the lean season to find work but they no longer go hungry for days during the lean period because Zamirun saves money and vegetables and rice to eat. They do not have to buy vegetables anymore because they are right there for their consumption, they eat three proper meals a day and the added nutrition and improved her health immensely. She no longer feels weak or suffers from the same



ailments because of added nutrition and is able to work from 8 am to 4 pm. “I’m quite happy to do the work because I know the benefits are huge. I feel stronger mentally and physically. There was a time when I couldn’t sleep because of hunger and now I can take a nap anytime I want to.” Considering that she was afraid to talk to people before, Zamirun is able to go to the markets, bargain and assert herself in a way that she never dreamed would be possible.

Twenty nine of the project beneficiaries have opened a group saving account where they each put in some money every month in case of emergencies and she has own savings account with BIMA where she has 10,000 BDT saved. She now has a knowhow of how to harvest the crops and vegetables, take care of livestock and keep her home safe and hygienic. “I am confident that even after the project is gone I will be able to carry on by myself”.



Chapter Four:

Lesson Learning Workshop

INTRODUCTION

Part of the lesson learning process is to capture the experiences of the field staff involved in the innovation project. The field staff provide an essential view on the successes and challenges faced in the implementation of the innovation. They have worked closely with the beneficiaries and have had to mitigate the effect of a number of both small and large challenges on the livelihoods of the beneficiaries. In order to capture their experiences with the project, shiree held a day-long workshop with all project field staff present. The agenda consisted of:

1. Exploring challenges
2. Exploring successes
3. Summarising key lessons learnt
4. Review of the original innovation
5. Identifying potential challenges if the project were to go to scale
6. Discussing NGO feedback on report findings
7. Exit Strategy

CHALLENGES

All field staff were asked to identify three challenges they felt the innovation project faced in the last three years. The challenges identified were as follows:

- It was difficult to find land close to households
- They needed higher land for vegetable harvesting, which they could not find in time
- Marketing the vegetables
- Fluctuation in lease value
- Hard to find appropriate IGAs for elderly women
- Initially it was difficult to motivate women to work in the fields because of societal constraints and comments from community members
- Because it is an all male field staff it was difficult to talk about nutrition and hygiene things with some of the ladies because they were shy and were not familiar with them
- The group work approach did not work- there were ownership issues, poor division in labour during cultivation and conflicts within groups.
- Management changed a lot which hindered project activities

SUCSESSES

All field staff were asked to identify three successes of the project over the last three years. The successes identified were as follows:

- Homestead vegetable gardening has improved nutrition significantly which increased ability and desire to work



- Beneficiaries and their families do not get sick as often and even when they do they are able to access medical care
- Vegetable provided food and nutrition during monga period
- All female beneficiaries feel confident to work in the fields now and have control and decision making power over assets
- Household income has increased overall
- The combination of nutrition and income generation has been significant in economic empowerment
- Built community leaders who had established good relations with different stakeholders, service providers, local government
- All of the beneficiaries have savings
- Economic empowerment has garnered respect from the community. They do not have to work in other people's homes anymore and are invited to social events
- Education for children in households has increased significantly
- They have been able to ensure 100% homestead gardening

KEY LESSONS LEARNT

Project staff were asked to then reflect on the key lessons learnt over the last three years:

- When the beneficiaries have choice over their IGA they have a stronger sense of ownership
- Because they had their own gardens with vegetables in it, their consumption of vegetables increased and they did not have to buy as much. If they did not have the garden then they would not buy as many vegetables.
- The first year they gave a lot of support on land, the second year it was less, and the third year it was even less, but the beneficiaries continued their activities. This indicated that the training was significant and that they became more confident and their ideas increased.
- Elderly widow households need support from others and the project needs to consider special IGAs for them. Land-based IGAs that need a lot of care does not work for them.
- In a lot of families sons came back to mothers when their situations became better.
- Land selection and other processes should be up to the beneficiaries themselves.
- The best time for leasing land is December and to start implementation of project.
- Harvesting other crops alongside vegetables has led to higher income.
- If they scale up, before the project intervention they would investigate how many of the beneficiaries would actually be able to engage in vegetable cultivation before providing the materials.

REVIEW OF THE INNOVATION

NDP submitted its original concept note in May of 2009. However, as challenges came about due to unpredictable circumstances or a lack of understanding of the practical implications of the original interventions, alterations to the original innovation had to be made in order to maximize gains made by the beneficiaries and ensure their climb out of extreme poverty. Part of the lesson learning process is to reflect on changes to the original innovation and most importantly look at why those changes took place and what it can tell us about the innovation.

During the lesson learning workshop, NDP was asked to reflect on how the innovation has changed since the original project proposal was submitted in 2009.



The concept note and project memorandum included the intention to enhance technical knowledge and one of the activities was to introduce the construction and operation of solar driers and natural refrigerators but the activity was withdrawn when the project was implemented because they realized that it was not practical and they did not have the budget nor the technical support to carry it out. It should have been removed from the project memorandum. The original concept note meant for it to be a food based strategy to address Monga in the long term, however the approach was changed to a more IGA-based intervention. It was found that in addition to nutrition, an asset was needed to address their situation of extreme poverty. They had originally planned on facilitating access to both private and khas land, but they ended up leasing 100% private land as they were not able to go through the process of getting khas land. The project also initially started with a group approach, but because of a general lack of ownership and interest in working together amongst beneficiaries, they changed it to a household approach by year 3. The change also occurred because it was observed that many beneficiaries preferred other IGAs like livestock rather than engaging land based activities.

CHALLENGES: TAKING THE INNOVATION TO SCALE

NDP was asked to identify challenges they may face if they were to take their innovation to scale. They agreed that transferring knowledge and experience to new staff would be a challenge. Furthermore, in selecting the working area, they thought it would be difficult to find high ground in the chars. They would also need to expand their working area to find more extreme poor households. Marketing would also be a challenge as would introducing “elderly friendly” IGAs. However, it was concluded that all of these challenges could be overcome with strategic planning of all project activities.



shiree

Achievements against Logical Framework

Objectives	Verifiable Indicators	Means of verification	Achievement	Assumptions
<p>GOAL</p> <p>Contribute to Government of Bangladesh MDG targets 1 and 2 on income poverty reduction and hunger achieved by 2015</p>	<p>Reduction in the proportion of people living in extreme poverty from 28% in 1991/92 to 9.5% by 2015, in line with PRSP targets</p>	<p>Government of Bangladesh, National MDG Report, UNDP and World Bank statistics</p>		<p>Not needed</p>
<p>PURPOSE</p> <p>1,055 extreme poor households in Bogra district have sustainably strengthened their livelihood outcomes by 2011.</p> <p>Immediate Objective</p> <p>Target households have adopted improved livelihood strategies and</p>	<ul style="list-style-type: none"> ● 80% of target households experience a 35% increase in income after two years ● ● ● ● ● 80% of adult participants experience a minimum of a 1 unit increase in Body Mass Index after two years ● ● ● Average nutritional (wasting) status of children improve by 10% 	<ul style="list-style-type: none"> - Baseline survey - PME reports - Nutritional survey - Project completion reports - External evaluation 	<p>84% households experienced 55% increase in income</p> <p>25.7% adult participants experienced a minimum of 1 unit BMI</p> <p>Tn total population wasting reduced by 38.3% ; intervention group by 47.9% and</p>	



<p>health and nutrition practices, for monga mitigation</p>	<ul style="list-style-type: none"> • 80% of the beneficiaries consume more than 1805 k-cal per day • 25% reduction in prevalence rate of anemia within two years • 80% households consume home-grown vegetables round the year • Men and women work on their leased land during the monga period for a total of 31,650 days within the first year • Reduction of diarrheal diseases by 50% among children 		<p>control group by 33.7%</p> <p>NDP to respond</p> <p>In total population anemia under 5 children reduced by 67.55%; intervention group by 85.2%; control group by 48.19%</p> <p>100% households consumed home grown vegetable round the year</p> <p>993 beneficiaries worked on their leased land more than 6 months in the first year</p> <p>NDP to</p>	
---	--	--	--	--



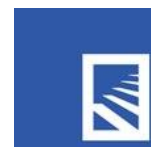
			responds	
<p>Output 1</p> <p>Nutritional, health and hygiene education provided to 1,055 mothers</p>	<ul style="list-style-type: none"> • 80% mothers are able to identify signs of nutrition loss • 80% of mothers can articulate at least three means of nutritional status improvement within two years • 80% mothers know appropriate cooking and preparation of foods within six months of project implementation • 80% mother knowledgeable about personal and food hygiene practices 	<ul style="list-style-type: none"> - Baseline survey report - Project report - PME reports - Nutritional survey (BMI and anthropometric measurement) - Mid-upper arm circumference (MUAC) testing - Hemoglobin test 	<p>NDP to responds</p> <p>NDP to responds</p> <p>NDP to responds</p> <p>NDP to responds</p> <p>15 Component micronutrient sprinkles distributed to both mothers and children U-5. However, because of the change in evaluation methodology : this whole supplementation procedure done as a Cluster Randomised Controlled Trial. So the intervention group (approximately half of the population. Only Mothers and Children</p>	<p>-Prices of agricultural inputs and outputs do not fluctuate extremely</p> <p>-No unprecedented period of flooding</p>
<p>Output 2</p> <p>Micro-nutrient supplementation service provided to children under five years old and pregnant & lactating mothers of the 1,055 households</p>	<ul style="list-style-type: none"> • 90% of eligible children and mothers received monthly micro-nutrient supplements- five micro-nutrient <i>sprinkles</i>, for a minimum of three months (daily dose formulation). (NB: When the 15 component variety is available, this will be utilised) 			



<p>Output 3 Technical knowledge, inputs and cash transferred to</p>	<ul style="list-style-type: none"> • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ • _____ <ul style="list-style-type: none"> • <u> </u>90% of the children and adults received De-worming tablets twice a year for two <u> </u> years, each round consisting of 3 doses Albenazol and equivalent syrup for children between 1 to 5 years. • <u> </u>90% of project participants received flip-flops within six months of the start of the project, and for children under 5, these flip-flops will have a heel strap. • <u> </u>1,055 person (50% women) received training in cultivation methods of six types of vegetables within 1 year of the project 		<p><u>U5 from 537 BHHs) received 1 years of supplementati on (micronutrient sprinkles) and deworming (Anthelmintics in every six months) for 12 months (starting from 2nd year of the project) and Control Group (503 BHHs) received the supplements after the trial is over.</u></p> <p><u>100% children and adults received deworming tablets twice a year</u></p> <p><u>50% project participants flip flops in year-1 and rest in year-2</u></p> <p><u>993 (about 50% women) received training in</u></p>	
---	--	--	--	--



<p>1,055 households to cultivate diversified vegetables harvestable during Monga and beyond</p>	<ul style="list-style-type: none">• 1,055 households each received Tk. 3,000 for the lease of land at an average size of 6 decimals for two years• 1,055 households received seeds/saplings, irrigation and fertilizer to cultivate crops (full support in 1st year and 50% support in 2ndyr)		<p>cultivation methods of more than 10 vegetables</p> <p>993 households each received taka 3000 for the lease of 6 decimal lands</p> <p>All households received seeds/saplings as per the project design</p>	
--	--	--	--	--



shiree

Annex: CMS 2 and CMS 4

NDP

CMS 1 BASELINE SUMMARY

Household Target:	1,000			(No.)	(%)
CMS1 data available:	1,055		Total Household Members	3,111	
Average HH Income:	908.1	<i>Tk. per month</i>	Average HH Size:	3.0	
Average HH Expenditure:	896.7	<i>Tk. per month</i>	Male Headed HH	632	59.9
Average HH Land:	3.3	<i>decimal</i>	Female Headed HH	423	40.1
<i>Khasland</i>	0.7		<i>No of under 5 children</i>	459	
<i>Owned land</i>	1.6		<i>No. of under 18 girls</i>	601	
<i>Not Owned land</i>	1.0		<i>HH having disabled member</i>	65	7.2

SUMMARY OF CMS 2 AND CMS 4

This annex provides a brief summary of change comparing CMS 2 data from the pilot study with CMS 4 findings.

CMS 2 is a monthly snapshot that allows tracking of household livelihoods and of events capable of impacting these livelihoods. It uses innovative mobile phone technology to collect data with the survey being delivered by NGO staff during their normal round of BHH visits. The survey is short and simple, focusing on beneficiary self-assessment of change using a multiple-choice format. The data collected from NDP beneficiaries was a part of the pilot study of CMS2. Therefore, the data only tracks an average of 300 BHHs over a 7 month period from June 2011-January 2012 and change from intervention impact cannot be accurately monitored using only this tool.

CMS 4 provides a forum for beneficiaries to explain changes in their lives and the reasons for these changes, as well as creating a platform for NGOs to adapt and improve their innovations according to the needs of the beneficiaries. This is implemented only by Innovation Fund NGOs. The objective of CMS 4 is to undertake a participatory evaluation and review of project experience at both the level of beneficiaries and for the implementing NGO. The focus on CMS 4 is in depth understanding of the innovation, enabling identification of successes and challenges and quick feedback into project management decisions. CMS4 began in the fall of 2010 and NDP has only carried out CMS 4 three times during the project with 10-12 HHs in a total of 10 groups. This has resulted in limited findings and therefore should not be used as a sole reflection of intervention impact, but rather an additional tool to track changes in beneficiaries' lives during their participation in the project.



Chapter Two provides a more accurate quantitative summary of intervention impact using an endline to baseline comparison of key indicators- income, expenditure, savings, assets, health and confidence.

CMS 2 METHODOLOGY

The CMS-2 pilot questionnaire used a 5-point scale for responses to questions on the following indicators: income, expenditure, health status, and self-confidence. The questions asked the beneficiary to assess the change in each indicator with qualitative responses. In order to take average readings across the project the qualitative responses were converted into quantitative ones. The weights range from +2 to -2 and are equivalent to the qualitative responses, as shown in the table below:

Income	Decreased a lot	Decreased a little	Remained the same	Increased a little	Increased a lot
Expenditure	Decreased a lot	Decreased a little	Remained the same	Increased a little	Increased a lot
Health	Significantly deteriorated	Deteriorated	Remained the same	Improved	Much improved
Self-Confidence	Highly decreased	Slightly decreased	Unchanged	Slightly increased	Highly increased
Weighted Scale	-2	-1	0	1	2

For questions on savings and assets, the CMS-2 questionnaire responses were binary, with only two possible answers. The questions asked whether the beneficiary had savings or had purchased any assets in that month. The weighted score are equivalent to the qualitative responses, as shown in the table below:

Savings	Have cash savings	No cash savings
Asset	Bought an asset	No asset bought
Weight Score	1	0

To obtain a monthly value for each of the six variables the weighted average was taken for each one. For example, the monthly income variable for NDP would be the sum average of all the converted responses given for income.

An 'Economic' index was created as a composite of four of the above variables: income, expenditure, cash savings and asset bought. The monthly scores from each of the economic variables can be added together to give a monthly economic composite value for each beneficiary. The absolute maximum score is +6 and the absolute minimum score can be -4. Hence the formula:

$$\text{Economic} = \text{Income} + \text{Expenditure} + \text{Savings} + \text{Asset Bought}$$

A monthly Economic index value for NDP beneficiaries is then calculated by taking the sum average of all of the 'Economic' scores. The scale is then converted to qualitative responses based on the weighted score given equivalent to the maximum and minimum possible scores:



Decreasing Fast		Decreasing Slowly		Same	Improving Slowly			Improving Fast		
-4	-3	-2	-1	0	1	2	3	4	5	6

A 'Socio-Economic' index was created as a composite of all six individual variables. The monthly scores from all of the variables can be added together to give a monthly socio-economic composite value for each beneficiary. It uses the same formula as the Economic index and adds the extra two variables: health status and confidence. The absolute maximum score is +10 and the absolute minimum score can be -6. Hence the formula:

$$\text{Socio-Economic} = \text{Income} + \text{Expenditure} + \text{Savings} + \text{Asset Bought} + \text{Health} + \text{Confidence}$$

A monthly Socio-Economic index value for NDP beneficiaries is then calculated by taking the sum average of all of the 'Socio-Economic' scores. The scale is then converted to qualitative responses based on the weighted score given equivalent to the maximum and minimum possible scores:

Decreasing Fast				Decreasing Slowly				Same	Improving Slowly					Improving Fast				
-8	-7	-6	-5	-4	-3	-2	-1	0	1	2	3	4	5	6	7	8	9	10

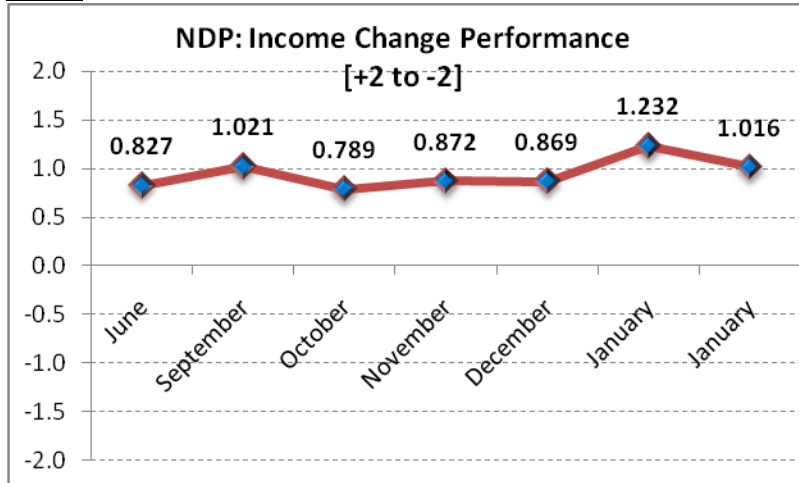
SUMMARY FINDINGS FROM CMS 2: JUNE 2011 TO JANUARY 2012

Row Labels	Income [+2 to -2]	Expenditure [+2 to -2]	Health Status [+2 to -2]	Confidence [+2 to -2]	Economic [+6 to -4]	Socio-Economic [+10 to -6]	No of Visits
NDP	0.943	0.232	1.400	1.097	2.227	4.724	
June	0.827	-0.080	0.947	0.940	2.293	4.180	150
September	1.021	0.094	1.609	1.068	2.323	5.000	192
October	0.789	0.367	1.313	0.981	2.141	4.435	313
November	0.872	0.326	1.343	1.055	1.972	4.371	399
December	0.869	0.196	1.359	0.948	1.771	4.078	153
January	1.232	0.219	1.666	1.437	2.752	5.855	311

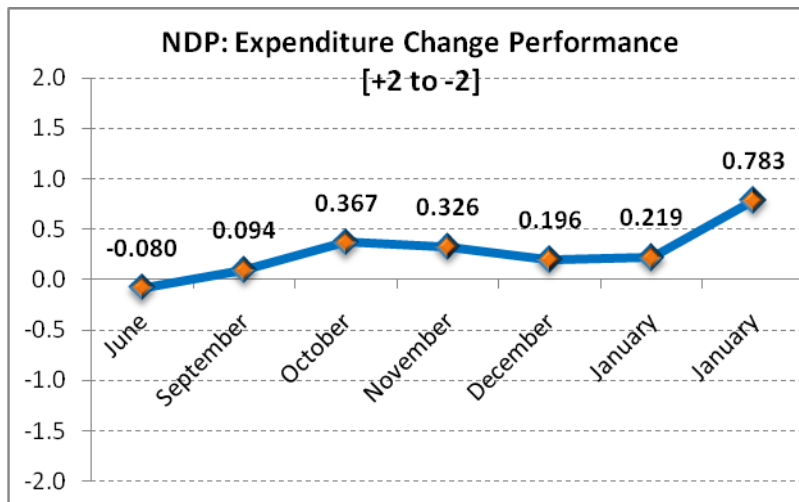


INCOME AND EXPENDITURE: CMS 2 AND CMS 4

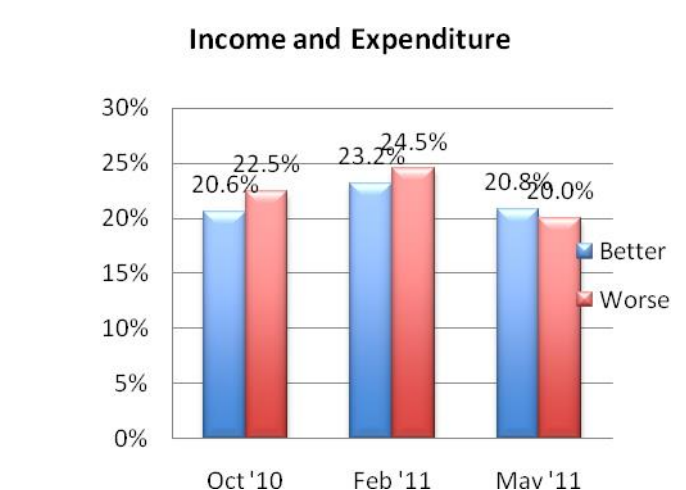
CMS 2



CMS 2 indicates that the majority of BHHs have seen slight positive change in their income from June through January 2012 with little variation. Change in expenditure is shown to be very low, with an actual negative change for June 2011. In January 2012, BHHs show slight positive changes in expenditure levels, indicating an improved level of expenditure since monitoring began.



CMS 4

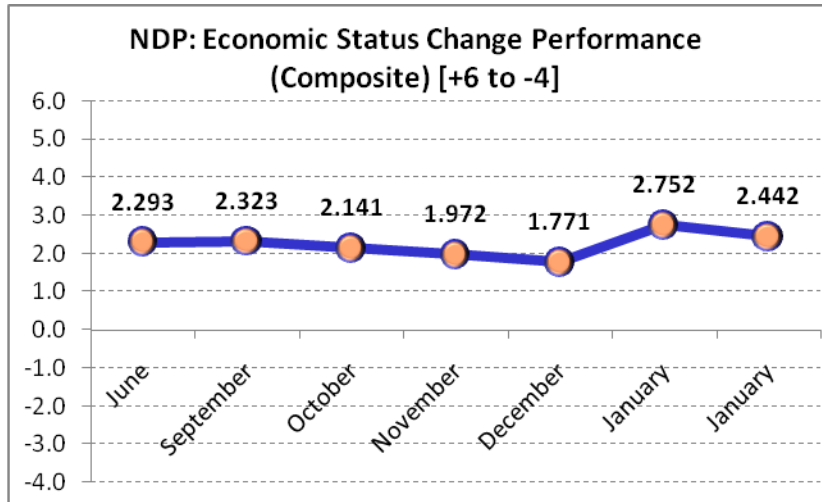


CMS 4 asked BHHs on a quarterly basis whether their income and expenditure were either getting better or worse in their life. The graph shows that an average of 20% feel their situation has both improved and gotten worse with little change in either since monitoring began.



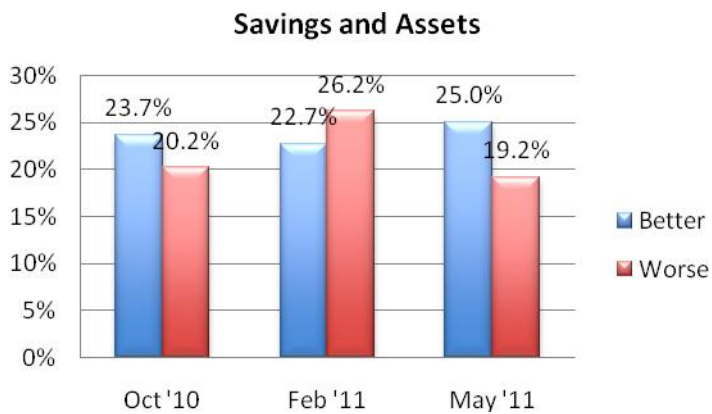
ECONOMIC STATUS: CMS 2 AND CMS 4

CMS 2



CMS 2 findings for composite changes in economic status, including: income, expenditure, cash savings and assets bought show small positive changes from June 2011 through January 2012, with little variation with the rate of change.

CMS 4

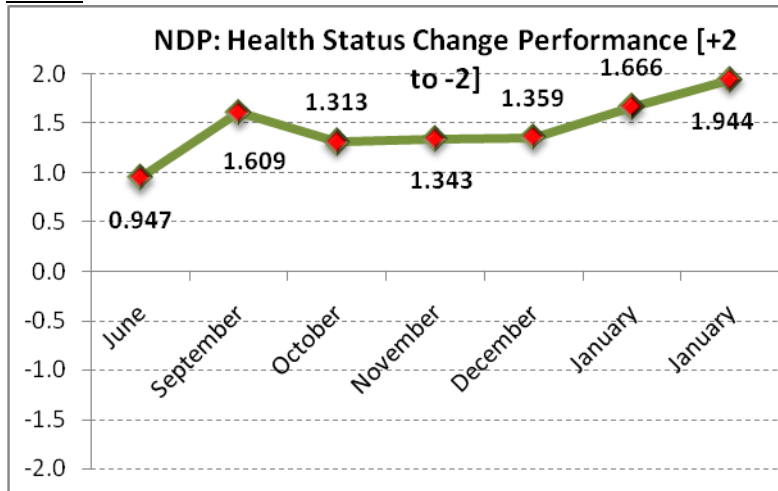


CMS 4 asked BHHs on a quarterly basis whether or not their assets and savings were getting better or worse. Similar to income and expenditure indicators, findings show that an average of 20% of BHHs feel their situation has both improved and gotten worse with little change since the project began.



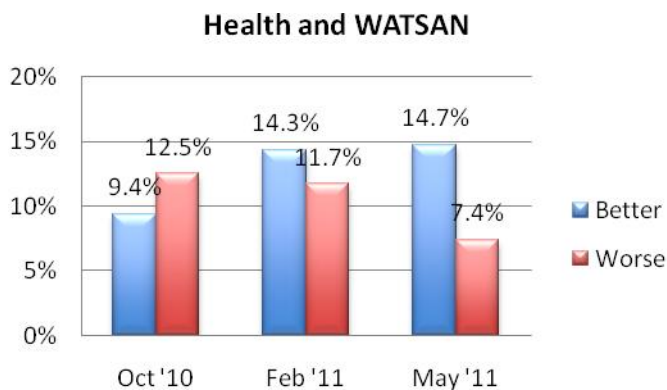
HEALTH STATUS: CMS 2 AND CMS 4

CMS 2



CMS 2 indicates that the majority of BHHs have seen small to significant changes in health status since June 2011, with a steady increase in the rate of change over the last 7 months.

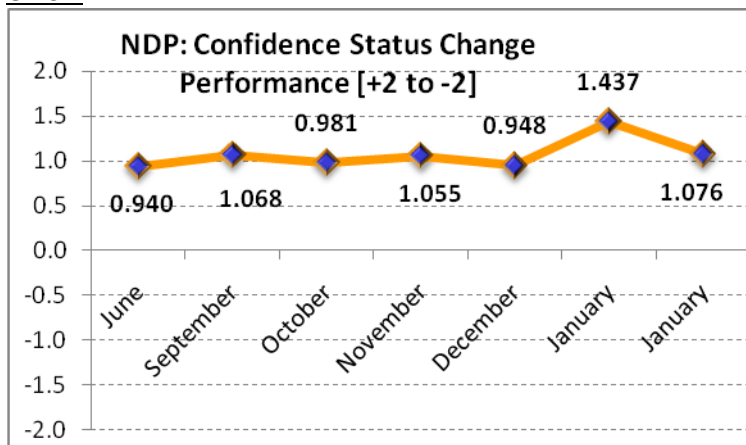
CMS 4



CMS 4 asked BHHs on a quarterly basis if their health and WATSAN was improving. The graph indicates that there have been some slight improvements in health and WATSAN with 14.7% of BHHs responding positively in May 2011.

CONFIDENCE STATUS: CMS 2 AND CMS 4

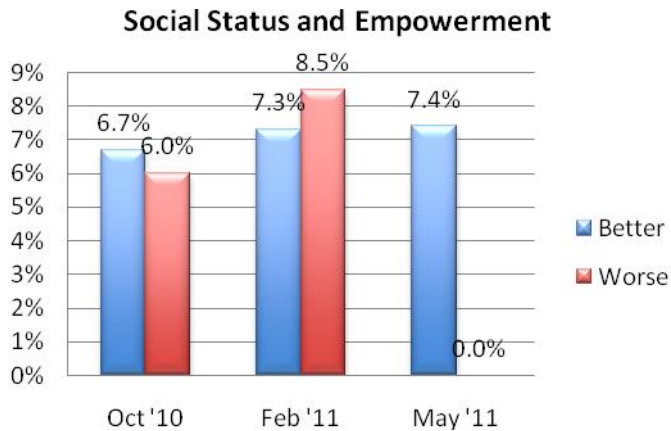
CMS 2



CMS 2 indicates that the majority of BHHs have seen slight improvements in confidence levels since June 2011 through January 2012.



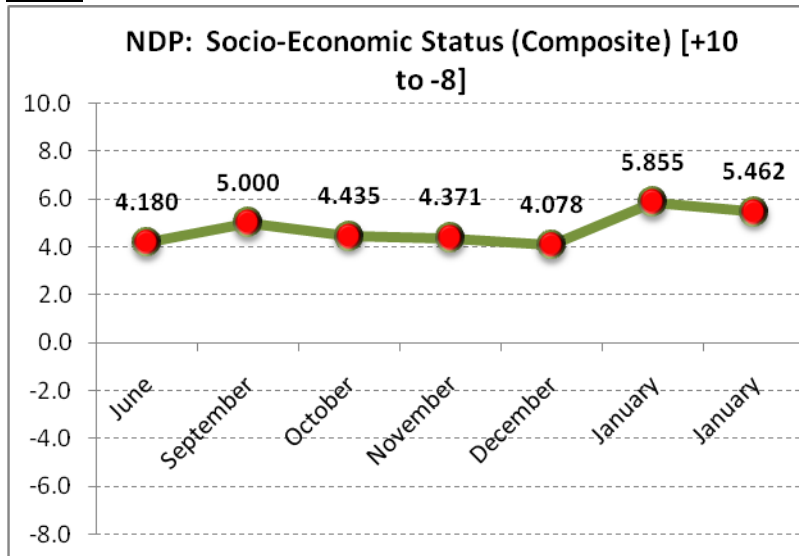
CMS 4



CMS 4 asked BHHs on a quarterly basis whether their social status and empowerment has improved. A very low percentage of BHHs responded (an average of 7%) positively or negatively, indicating that there has been little change since monitoring began.

SOCIO-ECONOMIC STATUS: CMS 2

CMS 2



CMS 2 findings for composite changes in socio-economic status, including: income, expenditure, cash savings, assets bought, health and confidence show positive change from June 2011 through January 2012, with a slight increase in the rate of change from 4.2 to 5.5 over a 7 month period.



shiree

Annex:

FGD Questionnaire

Aim: To reflect the BHHs' view on project's success and impact of interventions

- 1st year BHHs (ideally)
- 5 to 8 beneficiaries for in-depth analysis (one FGD in the morning and one in the afternoon; different locations)

Process in selecting households:

- 1) One where someone mentioned an interesting success story and why
- 2) One where it failed or didn't work so well

ALWAYS choose the stories that tell you something about the intervention that you didn't know already or which adds some interesting detail/nuance to the ideas you do have.

More advice in conducting an FGD:

- The respondents will sense in you any body language which might show superiority and they will not talk frankly if this is the case. Make them feel that their responses are good ones and they will feel free to talk more. Talk to them as good friends who have respect for, who you can learn from.
- Ask 'why' and 'explain' as often as possible.
- Probe/interrogate whenever they say something interesting or different or if you simply don't understand their answer – usually there is something behind it that is interesting. Here looking at the clock doesn't help – getting a few good insights is better than getting through 11 questions of your checklist.

Preamble: Thank you for taking the time to sit and speak with us today. We would like to talk to you about your experience participating in the NDP project and to understand what worked and what didn't work in the intervention. We are interested to know how the interventions have or haven't impacted your lives in different areas, what challenges you have faced over the last two-three years, and how you envision your future now that you have been a part of this project. Try to think of what you had before you joined this project and what you have now after two-three years of training and support. We will be asking questions regarding changes in your income, assets, savings, health, food intake, ability to overcome shocks (environmental or health related), relationships with key people – friends, family, moneylenders, shopkeepers, UP chairman/members, political figures – and overall well-being.

We are the students and you are the teachers today – only you know the truth and details of how the intervention worked for you. What we learn today will not directly change your position, however it will be used to improve other extreme poor programmes and better shape the way NGOs and the government work with the extreme poor. Our learnings will hopefully influence the government to sponsor programmes that actually work for the poor and improve their lives.



It is also important to understand that *“This is a safe place to share your thoughts and feelings in regards to the NDPproject and nothing you say will impact your relationship with the project field staff.”*

FGD Questionnaire:

Exploring IGA Impact

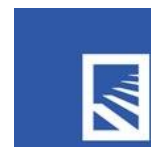
1. What was your life like one year before you joined the project? What is your life like now? Why?
2. What type of intervention(s) did you receive from the project/NGO? What is the status of your IGA now?
3. How was the IGA chosen for you? Did you ask for it or was it selected by the NGO?
4. Did you receive any previous experience or exposure to the intervention? If not, did you receive training? By whom?
5. What was your income, assets and savings before the interventions? Were there any changes in income, assets, and savings due to interventions?
6. *Where do you sell your produce? Do you get fair prices? (specific to type of IGA)*
7. Will you continue with the same types of IGAs?
8. What would you say worked best about the intervention you received? Why? What worked least well? Can you discuss why it didn't work? Would any of you have preferred to have another type of IGA? If yes, why?
9. What have been some of the key challenges you have faced during this project (regarding the implementation of the IGA)?
10. Would you recommend this IGA to other people? Why/why not? Will you be continuing with this IGA post-project involvement?
11. How long have you spent on this IGA and how has this impacted your daily routine? Did you have to give up other paid work or do less work at home? (Opportunity cost)
12. How suitable is this IGA for FHHs? Disabled? Elderly? If not, why?
13. **(For women)** If a husband operated the IGA, in what ways did his wife benefit and in what ways did she fail to benefit? What would happen if a husband or son who managed the asset later left this wife?

Other Indicators

14. What has been the community's perception of your involvement in this project? Has it improved or worsened your engagement within the community? Explain how and why it changed and what it means for you and your family.
15. How has this intervention impacted your resiliency- your ability to cope during the lean period? How has it affected your ability to respond and recover from environmental shocks?
16. Has the health conditions of your HH improved over the project period? Explain.
17. Do you have better access to health care services than before the intervention?
18. Have your food habits changed since you joined this project? Explain.
19. In general, what has this project intervention meant for you and your family? How have your kids benefitted or not?
20. *Do you feel you are more or less mobile than before? Specific for FHHs.*
21. Confidence- How mentally strong did you feel before the intervention? Do you feel more confident now? In what area are you confident and why?



22. Do you feel assured you can meet your basic needs regularly in the coming year? Why or why not? Do you feel you can prosper beyond your meeting your basic needs in the coming year? Why?
23. Empowerment- In negotiation with your husband, has your power in decision making improved since the intervention? In what areas and why? In what areas has your decision making not improved? Why?
24. Has your power in negotiations with family, community members, shopkeepers, employers, patrons, moneylenders, political official changed? If so how and why? Please explain.
25. Security/resiliency- Do you feel you are more or less able to cope with shocks? What kind of shocks and why?
26. Sustainability- Do you feel you need further assistance, such as safety net support? Why?
27. How has your future planning changed? Has your future outlook changed? How and why?
28. What has your relationship been like with the field staff? Do you feel the NGO staff respect you? Have they ever been rude to you? *This question should not be asked in front of the NGO staff to ensure honest answers.*
29. Has your access to local services improved? For example, access to sanitation and education services?



shiree

Annex:
Exit Strategy

<u>NGO Proposal</u>		<u>Lesson Learning Discussion with NDP</u>
<u>Component of exit strategy</u>	<u>Descriptions</u>	<u>Action Plan</u>
<u>Group Capacity Building</u>	<ul style="list-style-type: none"> - <u>Group dynamism, leadership, cohesion building and conflict management</u> - <u>Mobilization of their own resources</u> - <u>Use of individual and group savings</u> 	<p><u>Conduct capacity assessment of individual beneficiaries (who can do what, who is unable to do certain activities). Devise a questionnaire to assess skills and resources</u></p> <p><u>By Project staff</u></p> <p><u>+ M&E and PM and Sazzad</u></p> <p><u>Format By 25th July- assessment by 10th august</u></p>
<u>Handover of project documents to Groups</u>	<ul style="list-style-type: none"> - <u>Handover list of BHHs to LGs</u> - <u>Further skill development of the group leaders so that they can use the documents for their own planning and execution (for example – business plan)</u> 	<p><u>- handover list of BHHs to LGIS- by Sazzad</u></p> <p><u>By 16th August</u></p>
<u>Linkage building with local service providers (Private</u>	<ul style="list-style-type: none"> - <u>Mapping out local service providers</u> - <u>Bi-lateral meeting with the</u> 	<p><u>- provide list of service providers to beneficiaries and list of beneficiaries to</u></p>



<p><u>and Govt), especially with Community Clinic, Agriculture and Livestock Departments</u></p>	<p><u>service providers</u></p> <ul style="list-style-type: none"> - <u>Further capacity building of the existing service providers developed by the project (for example Vaccinators)</u> - <u>Bi-lateral meeting with the service providers</u> - <u>Promotion of joint planning and execution (immunization day, vaccination camp, etc)</u> 	<p><u>service providers</u></p> <p>- <u>by August 16th</u></p>
<p><u>Linkage building with Union Parishad</u></p>	<ul style="list-style-type: none"> - <u>Handover of the beneficiary list to UP</u> - <u>Area-based meeting with both Male and Female members</u> - <u>Bi-lateral meeting with UP to enlist beneficiaries for future support from the Union Parishad</u> 	<ul style="list-style-type: none"> - <u>Develop a MOU – to officially handover list of beneficiaries with agreement that local Govt. will ensure a minimum of services (including inclusion on safety nets) of beneficiaries.</u> - <u>By NDP</u>
<p><u>Incorporate with the existing programs of NDP</u></p>	<ul style="list-style-type: none"> - <u>Takeover the beneficiaries under various supports of NDP's core programs</u> - <u>eg. Proposed marketing project with SWISS, micro credit program, health program</u> 	<p><u>On going initiative</u></p>
<p><u>Follow up by NDP</u></p>	<ul style="list-style-type: none"> - <u>Continuous follow up of the beneficiaries by NDP's core staff and technical experts</u> 	<p><u>By technical staff of micro finance programs. On going</u></p>
<p><u>Catergorisation of BHHs by economic status and find out who needs more support</u></p>	<ul style="list-style-type: none"> - <u>Find out which BHH is in what level and what kind of supports is needed for them</u> 	<p><u>Project staff</u></p> <p><u>Assessment done by 25th August</u></p>



shiree

Annex: Financial Overview

Budget Line	Amount in BDT	
	Total Contract budget	Total Expenditure as on Jun'12
Human Resource Cost	7,713,927	6,941,063
Travelling Cost	99,127	83,001
Vehicles & Equipment	935,068	935,068
Office Rent & Utilities	447,231	395,861
Administration cost	648,851	535,084
Operational Cost	742,848	547,876
Direct Delivery to Beneficiaries	22,582,545	21,579,296
Total Direct Cost	33,169,597	31,017,249
Contingencies	147,992	-
Management Cost(Over head)	1,155,530	1,085,522
Total Cost	34,473,119.00	32,102,771.00
<i>No of Beneficiaries</i>	<i>1,055</i>	
<i>Total cost per BHH</i>	<i>32,676</i>	
<i>Direct cost per BHH</i>	<i>21,284</i>	