



2ND IMPACT REPORT

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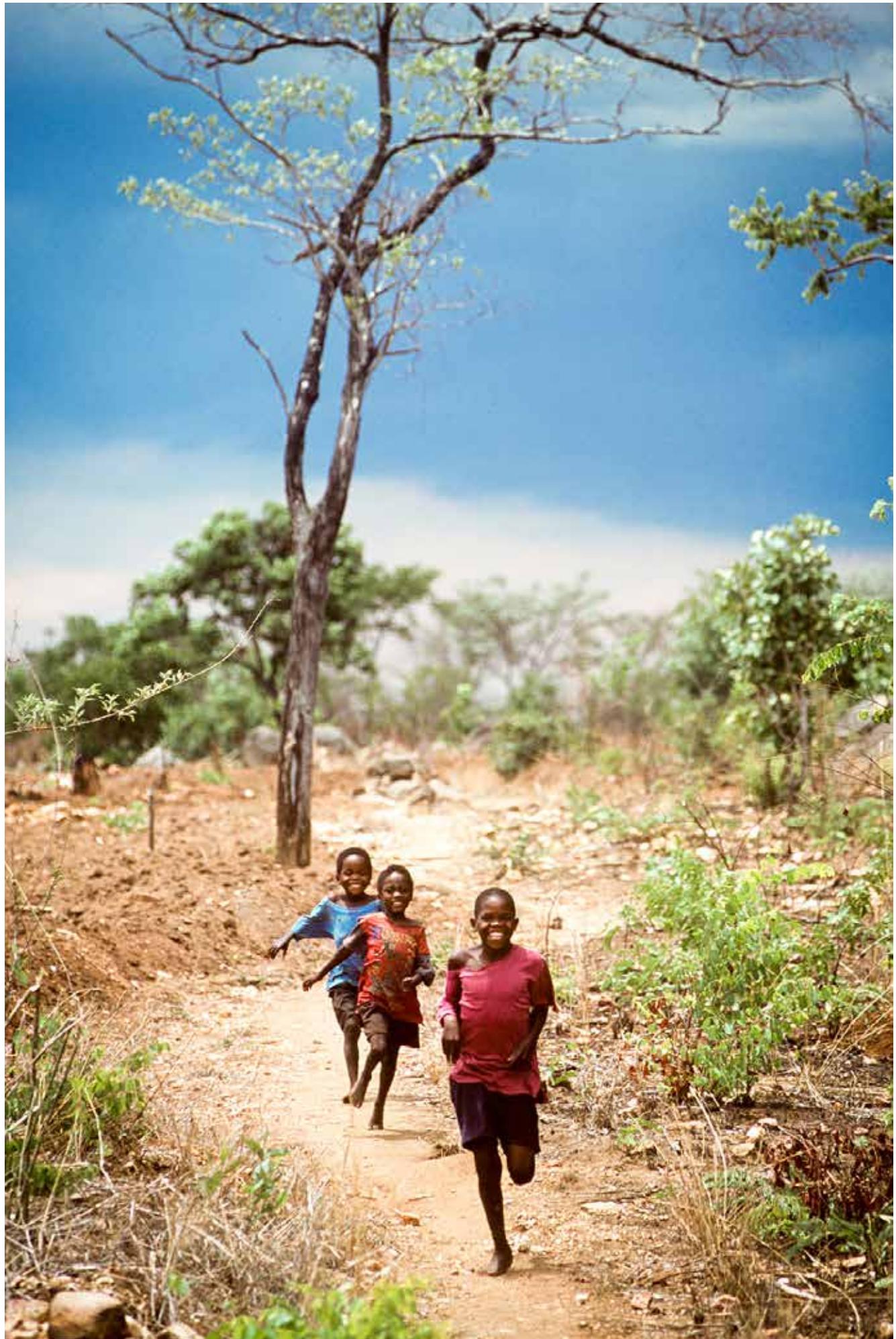
Design: Thorsten Bär, Judith Behrendt

Editors: Thorsten Bär, Judith Behrendt, Verena Bloch, Christina Grünewald, Stefanie Huisgen, Martin van de Locht

Diagrams: Yun-Mi Jo (pp. 7, 8, 10, 20, 22/23, 37, 38/39, 48, 56, 57, 66/67)

Typesetting and design: Michael Fritz





EDITORIAL

Dear Readers,

Our first Impact Report two years ago was gratifyingly appreciated by donors and the public, and by the same token provoked productive discussions with colleagues and partners in the projects. This second report is intended to take the results of evaluations from the past two financial years as a basis for elucidating the effects of our work and the methodological challenges of impact monitoring. In doing so, we would like to give you an idea of how impact monitoring works at World Vision and reflect on the results of some of the total of 29 evaluated projects. The experiences gained from the utilization of the first report have reaffirmed our conviction that the analyses help our organization to learn and to work even better on our vision of enabling children in need to have a better future. We hope very much that the information and topics in this report will also arouse your interest.

After illustrating specific projects in detail in our first Impact Report, we now present a larger number of projects in the areas of nutrition and education. In this way, we would like on the one hand to report more transparently on a larger number of projects, and on the other to indicate a broader range of various contexts, challenges, as well as approaches to solutions. Our aim in this report is not only to share the positive results with you, which naturally make us grateful and which we would also like to carry on, but also to address the challenges and difficulties, and to indicate the situations confronting the staff working on the projects and how these affect the changes that are possible to achieve.

New in this report is the "Taking a Closer Look" section. Here we would like to present interesting studies and assessments that have a particular subject-related or methodological focus. Hence we report on the insights gleaned from two ex-post evaluations (Malawi and Guatemala), and take up the question of "What remains after years of project work?" (page 52). Another topic we consider is the effectiveness of the child sponsorship approach (page 56), presented in seven evaluations. Furthermore, we present a study that World Vision undertook in collaboration with Columbia University on the effect of child protection centers (so-called "Child Friendly Spaces") in five countries in Africa and the Middle East (page 62). An interview with a member of our on-site staff is also included to provide additional insight into the practical challenges of daily work in refugee relief in Serbia.

As in the first report, the validity of the data very much depends on the quality of the available evaluation reports. It was important to us to subject ourselves to a critical external assessment (page 70). Therefore, the Center for Evaluation (CEval) analyzed the quality of 29 evaluation reports for us and compared it to the results of the 2014 analysis. This critical review by a scientific institute that conducts basic and

application-oriented research in the field of evaluation once again supplied us with important recommendations for our future work. We were also delighted that so many members of World Vision's regional office staff participated in an organization-wide online survey on the use and usefulness of evaluation results for our project work. Another innovation in this report is that we commissioned the CEVal to evaluate the quality of the impact transparency of this report. This is intended to help our organization develop as transparent a presentation as possible of the effects of our project work, while at the same time providing readers with a professional assessment. It is gratifying that our organization is steering the right course.

We very much hope that the transparent presentation of our successes and challenges will strengthen your confidence in our work. The successes we have achieved together would not have been possible without the help of you, our projects' supporters. We would like to offer you our heartfelt thanks for the many ways you have helped us and for the trust you have placed in us!



Martin van de Locht
Senior Director, International Program Department





2 / **THE WELL-BEING OF CHILDREN AS THE CENTRAL GOAL OF OUR WORK**

Children are always the focal point of our work – whether as part of emergency relief operations, long-term development or advocacy work. World Vision has set 15 so-called "child well-being outcomes" that substantiate our objectives for helping children. For each goal we either defined or adopted internationally recognized indicators that allow us to measure the extent to which the children's circumstances in a program have changed.

GLOBAL DATA COLLECTION – POSSIBILITIES AND LIMITATIONS

World Vision has summarized these indicators in a guidance document that is a helpful guide for our colleagues in the project countries. It is to help reduce measurement errors and improve the quality of the collected data to allow us to obtain meaningful information that will help us improve the well-being of children.

As part of the planning process, we determine, together with our local partners and the local population, which of the listed child well-being outcomes in a particular project area have not been met and whether the requirements for an effective long-term development cooperation have been fulfilled. Based on the objectives matching the context, we select the relevant and appropriate indicators from those that were proposed. We determine these selected standard indicators as part of project evaluations or data collections for the evaluation of the initial situation and analyze them at the country level as well.

Since these standard indicators are still relatively new, we do not yet have a continuous before-and-after comparison for all individual projects. Methodological challenges, such as surveys conducted before and after measurements at various points in time, lessen the validity of the collected data. We also take a critical stance toward a possible data aggregation from various projects. They initially describe only one situation at a specific moment in time and therefore have limited validity. Additionally, there is a danger of possible misinterpretation if we don't adequately consider contextual factors. Also, we cannot make any statements on our impact solely on the basis of standard indicators without an accompanying, more in-depth analysis of the correlation between causal effects.

However, introducing standard indicators has meant that in at least some countries it has been easier to obtain valid data, thus capturing how the children's circumstances are evolving. It then becomes clear in which areas our local employees might need to take action and what positive trends we can use to build on.

CHILD WELL-BEING ASPIRATIONS AND OUTCOMES

NUTRITION AND HEALTH

Children are well nourished

Children receive preventive health care and protection against childhood diseases

Children have access to medical care and treatment

EDUCATION AND LIFE SKILLS

Children learn life skills (e.g., communication, dealing with their emotions)

Children can read, write and use numeracy skills

Children/young people complete their education

Young people receive vocational training

SPIRITUALITY AND RESPONSIBILITY

Children feel the love of God and that of their brothers and sisters

Children enjoy good relationships with their families, friends and neighbors

Children have hope, confidence and a vision for their future

Children take responsibility for others and for their environment

CHILD PROTECTION AND PARTICIPATION

Children are safe and protected in their families, neighborhoods and during play

Children are adequately cared for and know their rights

Children are registered at birth and have citizenship

Children are involved in all decisions affecting them



3 /

IMPACT MONITORING AT WORLD VISION

In the following chapter we introduce the methods we use with our projects, our understanding of the impact concept and our approach to impact monitoring. We hope this helps our readers to better understand the described impacts in the individual examples and to assess the contribution of projects funded by World Vision in terms of potential changes.

TOGETHER WITH THE LOCAL POPULATION AND OUR PARTNERS – PROJECT MANAGEMENT AT WORLD VISION

The project management cycle (called LEAP – Learning through Evaluation with Accountability and Planning) that all development cooperation projects use is as follows:

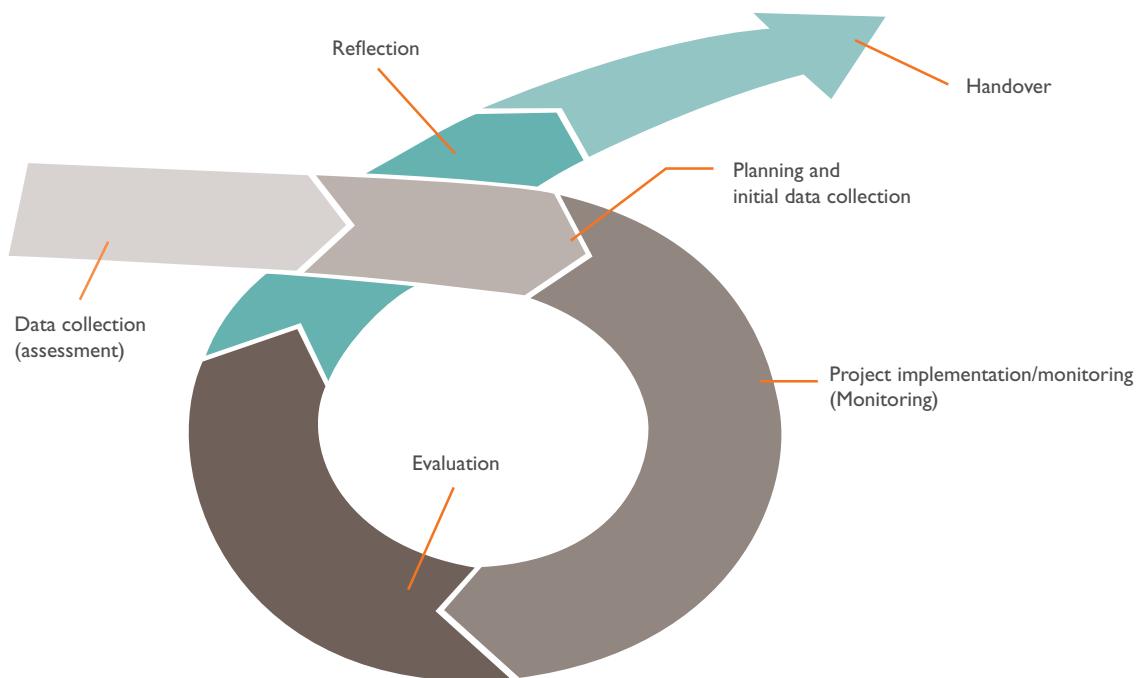


Diagram 1: A LEAP project cycle consists of six phases that are uniformly used worldwide.

The decision whether and where World Vision should start a project is made on the basis of a so-called assessment. This process examines whether the prerequisites for the implementation of a project are met. For example, we analyze the current well-being of the children to assess the need for a project and the priorities. We also examine which actors actively advocate for the well-being of children in the region and to what degree World Vision might be able to support them in their work. Next, the planning phase begins together with the local actors relevant to the project. During this process, we agree on project objectives, measures and indicators, which should then allow us to monitor the progress of project activities and impacts¹. Before project implementation starts, World Vision assesses the existing situation on the basis of the agreed upon indicators. After a time period that we agreed upon during the planning phase we conduct an evaluation.

¹For a more accurate presentation of the program management process, please see www.worldvision.de/development.org (Programming Tools)

VARIOUS PROJECT TYPES

Depending on the funding source, we differentiate between three project types at World Vision:

- Multi-sector regional development projects funded by sponsorships generally have three LEAP cycles of four to six years each. This means that throughout the duration of a project there are two interim evaluations followed by a final evaluation at the end.
- In projects financed by public sponsors the duration and project management depend on the sponsor's guidelines.
- Projects funded by private sponsors and/or companies are often added to regional development projects. Project management is based on World Vision's standards. In comparison to long-term projects funded through sponsorships, their duration is often much shorter.

Project management is based on World Vision's standards.



WHAT IS "IMPACT"?

We understand "impacts" as referring to all the intended or unintended, positive or negative, medium- and long-term effects triggered by our regional development projects. Hence, constructing a water well is not in itself an impact; we can only speak of impact when we notice, for instance, that the frequency of diarrhea in children drops after the well is in operation and is being put to use.

To illustrate the interrelated effects caused by various actions taken by World Vision, consider the following diagram showing the reduction in the number of underweight young children. The assumption is that parents attend courses where they learn about their children's diet, make use of what they have learned, and thus help see to it that their children get the nourishment they need. However, additional components are necessary to effect a genuine reduction in young children's malnutrition rates. For instance, we can assume that clean drinking water and proper treatment of illnesses also help. But even if parents are successfully educated in this respect, it does not necessarily mean that they will provide a better diet for their children. The parents may use available resources for purposes other than investing in a varied dietary plan for their children. Furthermore, newly drilled wells may no longer be working properly due to a lack of or incorrect maintenance. All this would have an effect on how many children are underweight when the project comes to an end. Therefore, attempts are made in the course of planning a project to identify and counteract any possible negative impacts before they can take effect. In addition, it is important to monitor any negative impacts our work may have in the further course of the project and, if appropriate, take countermeasures.

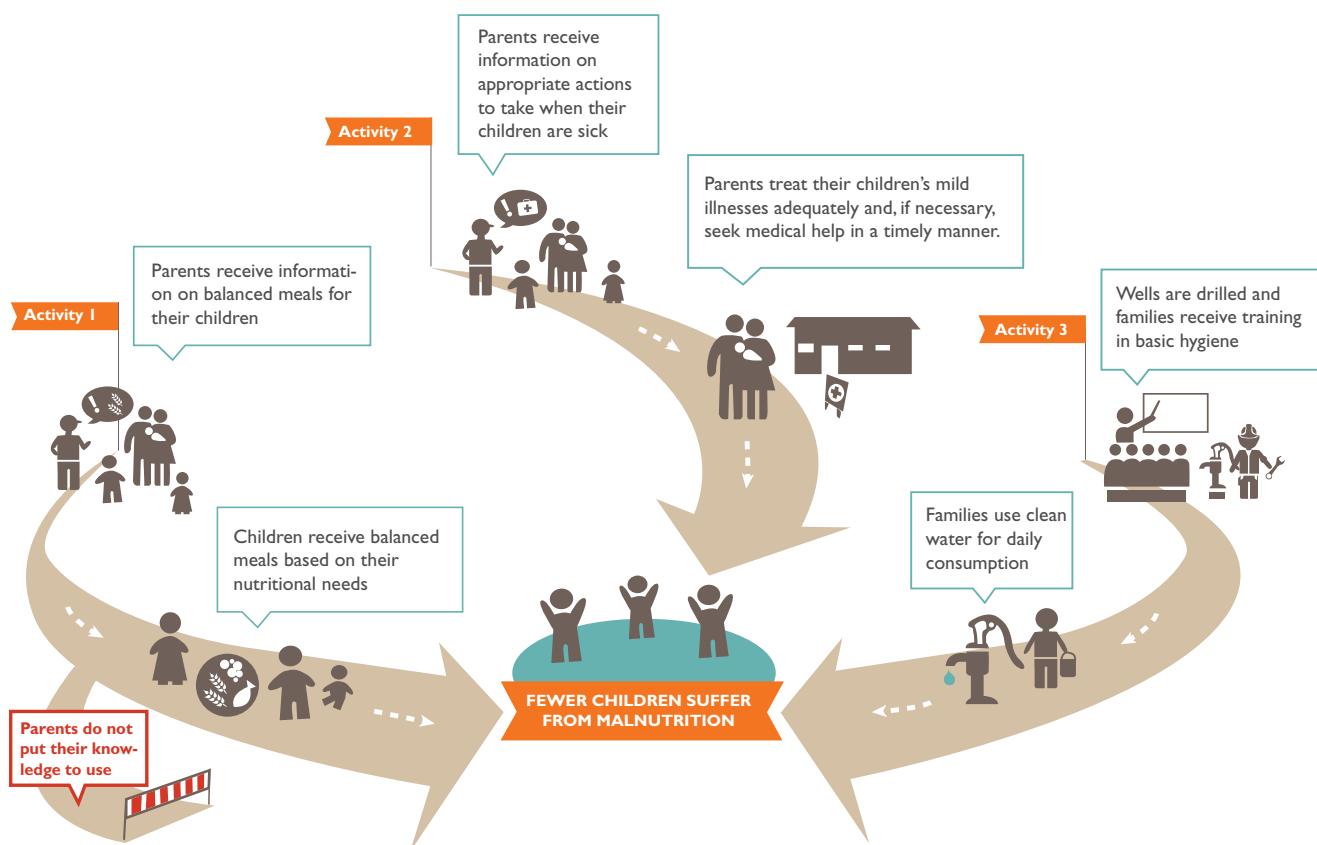


Diagram 2: Simplified representation of a causal network

When we report on the impact of our work, we must also detail our activities and demonstrate their contribution to any changes. If, in our project area, more children can read and write than at the beginning of the project, then this is a positive change, which, however, does not provide any information on World Vision's contribution. There are other factors to be taken into account, such as:

- > Did we successfully implement our activities? Does the work we built or have training sessions resulted in increased skills?
- > Which other actors have contributed with which measures to the better nutrition of children?
- > To what degree did factors in the environment of a plan change and influence the overall effects? Was there, for example, an extended drought phase or were there exceptionally favorable climate conditions?

World Vision's contribution to the overall effects can be illustrated in the following diagram:

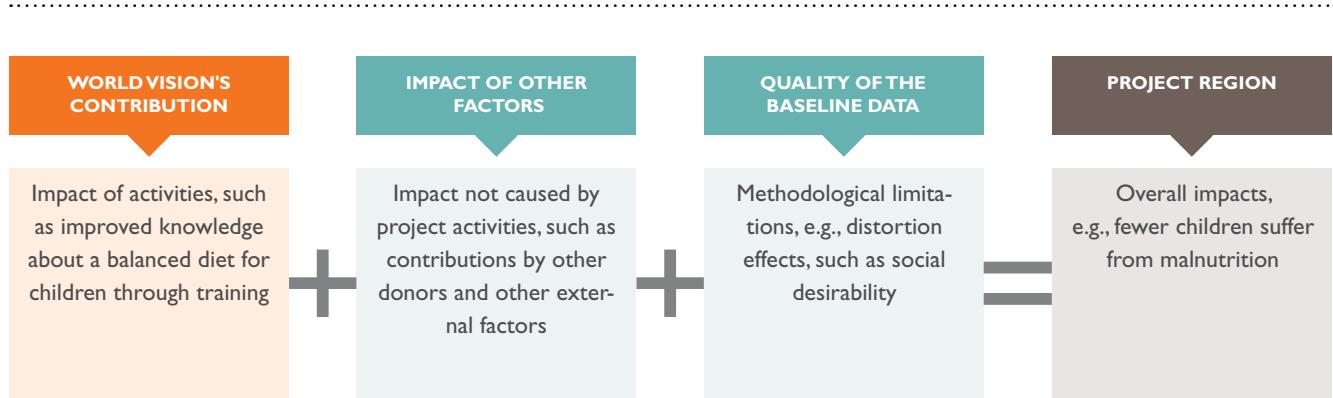


Diagram 3: Project contribution to overall impacts

To make a statement about the contribution of our project activities, we should not only take into account the effects of our activities, but also the changes World Vision does not cause. In addition, the quality of the available data influences the data's validity in regard to impacts. Therefore, we must consider the impact correlation as early as during the assessment, project planning and implementation. This is the only way to methodically ensure that the project's contribution to the changes can be substantiated.

WHY IS IMPACT MONITORING AN IMPORTANT TOPIC FOR WORLD VISION?

To monitor the impact of our work is an important issue for us for a number of reasons:

- > We want to learn about how our activities work and how effective they are.
- > Reflecting upon the changes should promote learning processes, particularly with target groups and partners, but also at World Vision. Also, learning new things makes it possible for us to make adjustments in ongoing projects.
- > Impact monitoring should help us be accountable to the target population, donors, sponsors and the public.
- > It should strengthen the ability of partners and target groups to take action. The more the actors are involved in data collection and analysis processes, the more they are enabled to design their own environment.
- > By collecting data on the effectiveness of the planned activities, we meet one of the DAC criteria², which consist of relevance, effectiveness, efficiency and sustainability.

²Development Assistance Committee of the Organization for Economic Co-operation and Development (OECD)

BUILDING ON EXPERIENCE – PROJECT MODELS AND IMPACT HYPOTHESES

For the most important areas of our work, such as education, health and nutrition, as well as child protection, World Vision has developed project models with impact hypotheses on the basis of its experience and expertise gained in previous projects. These models demonstrate how the desired impact can be achieved and what factors have to be taken into account during implementation³. A linear impact hypothesis for the causal network shown on page 10 (Diagram 2) could be as follows:



Diagram 4: Project contribution to overall impacts

Unlike what is shown in the theoretical example, we actually propose a complementary set of activities and impact hypotheses that in many different contexts have proven successful. However, it is important that in any project we analyze and, if necessary, modify the assumptions, conditions and risks the hypotheses are based on together with the local actors of a project.

There are a number of important factors in this process that have an effect on the implementation of the project models (selection):

- > What are the biggest challenges for the well-being of the children in a project region?
- > Who are the relevant actors and what are the relevant structures in the project environment?
- > What have local actors, such as non-governmental organizations and smaller local organizations, governmental structures and the target population, done for the well-being of the children?
- > What can we implement in this area in the future (objectives of local actors)?
- > How can we support local structures and actors to achieve these objectives?
- > Which resources and skills are available to the local partners and actors?
- > What are the potential risks that might jeopardize the achievement of the project objectives?
- > Which external factors (economic, political, social and ecological) might influence the achievement of the project objectives either positively or negatively?

MAKING IMPACTS MEASURABLE

For the envisioned assistance and intended impacts, we define so-called indicators that are to highlight if the planned activities have been carried out and the expected impact has occurred. On the one hand, indicators are designed to allow the local actors to monitor and evaluate changes independently. On the other hand, we as an organization want, to the best of our ability, assess indicators to meet international methodological standards so that we can report on the impact of our work. For the goal formulations we showed in Diagram 4, we can now define the indicators in Diagram 5.

³The graphs in the chapters on health and education give an overview of the overall impact hypotheses of our work.



Indicators are defined for the individual levels of an impact sequence, and they are used to assess whether the impact hypothesis is true or if adjustments have to be made. With this process, we evaluate with the help of collected data how the impact hypothesis was implemented. While it should take less effort to measure activities and services, indicators on the impact level often are more difficult to assess. In our example (Diagram 5), one would have to define exactly how to monitor whether parents use their knowledge and based on which criteria malnutrition is defined.

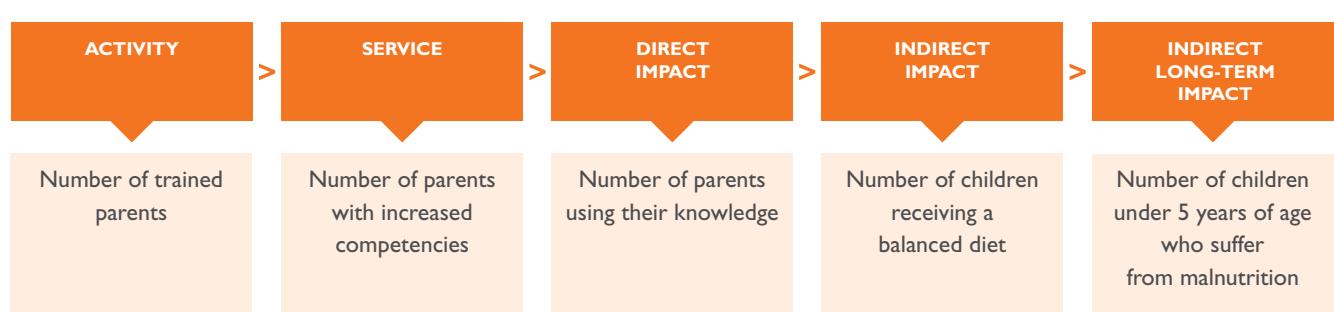


Diagram 5: Indicators for an impact sequence



MONITORING AND EVALUATION

One has to distinguish between impact monitoring and evaluation. Unlike the evaluation, monitoring is a continuous analysis of information that highlights whether a project is run the way it was originally planned. On this basis, a project can be adapted as necessary and processes can be optimized. In the above example, monitoring would probably be limited to activities and service, since it should be possible to collect monitoring data without much effort.

We define "evaluation" as the systematic and objective assessment of information to find answers to previously defined questions and assess project activities on the basis of indicators. Additional resources are made available for this methodologically complex evaluation process. Among other things, this is designed to collect particularly meaningful data. When doing evaluations, World Vision takes into account the so-called DAC criteria of the OECD. They recommend the analysis of the following criteria when performing evaluations: Relevance, effectiveness, efficiency, impact and sustainability of the project activities. Evaluations comprise a mix of quantitative data (household surveys, secondary data from the project region, etc.) and qualitative data (such as group discussions, expert interviews, ranking methods, etc.). A mix of methods helps reduce the weaknesses of individual methods.

IMPORTANT PRINCIPLES OF OUR WORK: PARTICIPATION AND PARTNERSHIP

Collaborative development work takes place in a complex environment. Many actors and structures interact with each other, influence each other and pursue specific interests. A project automatically becomes part of this web of relationship and interests. Therefore, the extent to which a particular activity leads to the desired change in such a context depends on many factors. Fundamentally, however, one has to take into account the complexity of the environment in which project activities are implemented. This makes it possible to include potentially measurable impacts of the planned activities as early as during the planning and implementation process.

To put this into practice, principles such as partnership and participation are core elements of our work. World Vision has its own local structures and staff, and works with already existing local and international organizations, groups and institutions, as well as with the target groups. The goal of our work is to ensure that those local actors that are relevant to the project take on responsibilities in planning, implementation, monitoring and evaluation. This participation as well as the targeted technical support we provide to partners and target groups is designed to empower the local population to achieve the desired impacts and to continue to generate positive changes – potentially even on their own – after the conclusion of the project. Thus, it is an important concern for us as an organization to support and initiate development processes taking into account the existing local resources as well as the knowledge and skills of local actors. This approach is meant to promote the sustainability of the activities. One of the roles the conducted evaluations play is to analyze the use of these principles in our work.



The goal of our work is to ensure that those local actors that are relevant to the project take on responsibilities in planning, implementation, monitoring and evaluation.

4 /

RECOMMENDATIONS FROM IMPACT REPORT NO. I: WHAT HAS BEEN HAPPENING?

Important elements of each evaluation report are the recommendations the evaluation team makes. These recommendations should be taken into consideration during further planning and implementation of the project work and thus contribute to improvements and increase effectiveness. Following please find an overview of the activities (selection) that resulted from the recommendations made in the project evaluations of Impact Report No. I. The projects are regional development projects financed with private contributions. We requested and received the information from the individual country offices and from the supporting country experts.



CANKUZO, BURUNDI (PARTICIPATION):

- The meetings and workshops helped get the **population more closely involved in the planning process**; the local people were able to help decide which projects to implement next.
- **The people from the local communities learned** in training sessions **to more strongly advocate for their rights** in order to demand improvements to their health services.

HLEGU, MYANMAR (EARLY CHILDHOOD EDUCATION):

- To secure **sustainable funding** for managing preschools, they were more closely linked with the income generation project.
- **To improve the quality** of child care and **increase individual responsibility**, preschool employees now receive training in preschool committees; the areas of accounting and administration have already been covered in the training.
- The preschool committees can now pay the **female preschool teachers a salary** and meet with them on a monthly basis to discuss the current situation.



KUNYINDA, MALAWI

(EDUCATION):

- To enable especially **girls to attend secondary schools**, the communities in the project area advocate for more support from the responsible authorities to prompt them, for example, to request subsidies from the government (currently, this is occurring with the construction of a secondary boarding school).

NONG SON, VIETNAM

(HEALTH, WATER AND SANITATION SUPPLY):

- **Health care workers receive training** continuously and develop the necessary **information materials** for the population together with the public health services.
- There is in-depth **educational work** being done regarding the use of toilets as well as regarding the correlation between clean water and hygiene (e.g., thorough hand washing to prevent diseases).
- Two additional **nutrition clubs** were founded and connected with the existing savings groups to ensure that especially needy families are supported in providing sufficient food to their children.

ACORIA, PERU

(HEALTH):

- **Mothers and fathers receive training** (in early childhood education and children's health, among other subjects) to improve the support of and care for the children.
- The **cooperation between trained mothers and health centers** has been improved and is, in many places, already continuing independently of World Vision.

TEKOVE, BOLIVIA

(FOOD AND WATER):

- The **drinking water system is being further expanded** or repaired – in cooperation with local authorities and the population. Members of the water committees receive training, such as on monitoring of quality, water disinfection and pipe maintenance.
- To improve the supply situation and **reduce malnutrition**, the families receive breeding animals, and then pass some of the offspring on to other families. In addition, information is available on balanced diets for children and on food supplements for particularly underweight children.

5 /

THE IMPACT OF OUR WORK IN REGIONAL DEVELOPMENT PROJECTS

*During 2014 and 2015,
a total of 29 evaluations
financed
by public and private
funds were completed.*

SELECTION OF EVALUATIONS

In the following chapters, we will be analyzing our work on regional development projects that were financed by private funds. The focus was a matter of concern to us, even though we are not required by public donors to do evaluations.

During 2014 and 2015, a total of 29 evaluations financed by public and private funds were completed. Of these, 23 were privately funded regional development projects. During the last two years, we completed evaluations of about 20% of the total of 91 regional development projects. As part of a meta-evaluation, CEval (Center for Evaluation) assessed their methodological quality (see page 70). From those, we selected – as examples for the following illustration of our project work in the areas of education and nutrition – those evaluations that allow the analysis of the selected topic areas by virtue of the quality and availability of data. Project quality was not a selection criterion. We assessed ten evaluations from the educational as well as the nutrition section and present the results below.

VALIDITY AND LIMITS OF OUR IMPACT MONITORING

Our analysis of the evaluation reports from 2014 and 2015 shows a positive trend in regard to quality. This is consistent with CEval's external assessment (see page 70). Identifying our project contribution in particular has improved in comparison to the previous reporting period of 2012 and 2013. Also, our use of innovative quantitative data collection instruments has progressed in a positive direction. This has led to continued improvements in quality and validity of the quantitative data. Despite this positive trend, there continue to be areas where we have to continue to advocate for improvements in the coming years to enhance the quality of the impact communication:

- Systematic consideration of the Theory of Change during planning, monitoring and evaluation.
- Ensure that indicators are measured at different points in time to identify trends. Since we have only introduced the standard indicators during the past few years, there are instances where no values (baseline and/or evaluations) are available for some of the indicators. In the tables, we used "no measurements" to describe this.
- Improved qualitative data and its documentation.
- Systematic analysis of any negative impacts our project work might have.
- Analysis of external factors that might have compromised the impact.
- Data collection and documentation of the contribution made by other actors toward identified impacts.

The topic of impact monitoring and the associated discussions have become more technically sound at World Vision during the past few years. When we asked our country offices about the data they had used, many of them were able to provide us with their own validity analyses. This shows us that a contemplative process has started in the meantime, which we hope will allow us to report in an even more well-founded manner about our impact in the future.



5.I./
**CHILDREN'S HEALTH AND
NUTRITION**

5.1.1./ Evaluation Analysis

To make a significant contribution to the improvement of children's health, World Vision makes considerable investments in the areas of maternal, newborn and young children's health. In this next chapter, we report on our activities in this area. On the basis of trends regarding some of the standard indicators, we analyze to what extent we can make any statements about the impact of our work in this area. As examples, we selected ten project evaluations for this purpose.

Using an impact logic model that is the basis of our work in the area of nutrition, we highlight the potential impact World Vision's project work might have. The following diagram shows a graphical representation of various factors of influence on the nutrition and health of children.

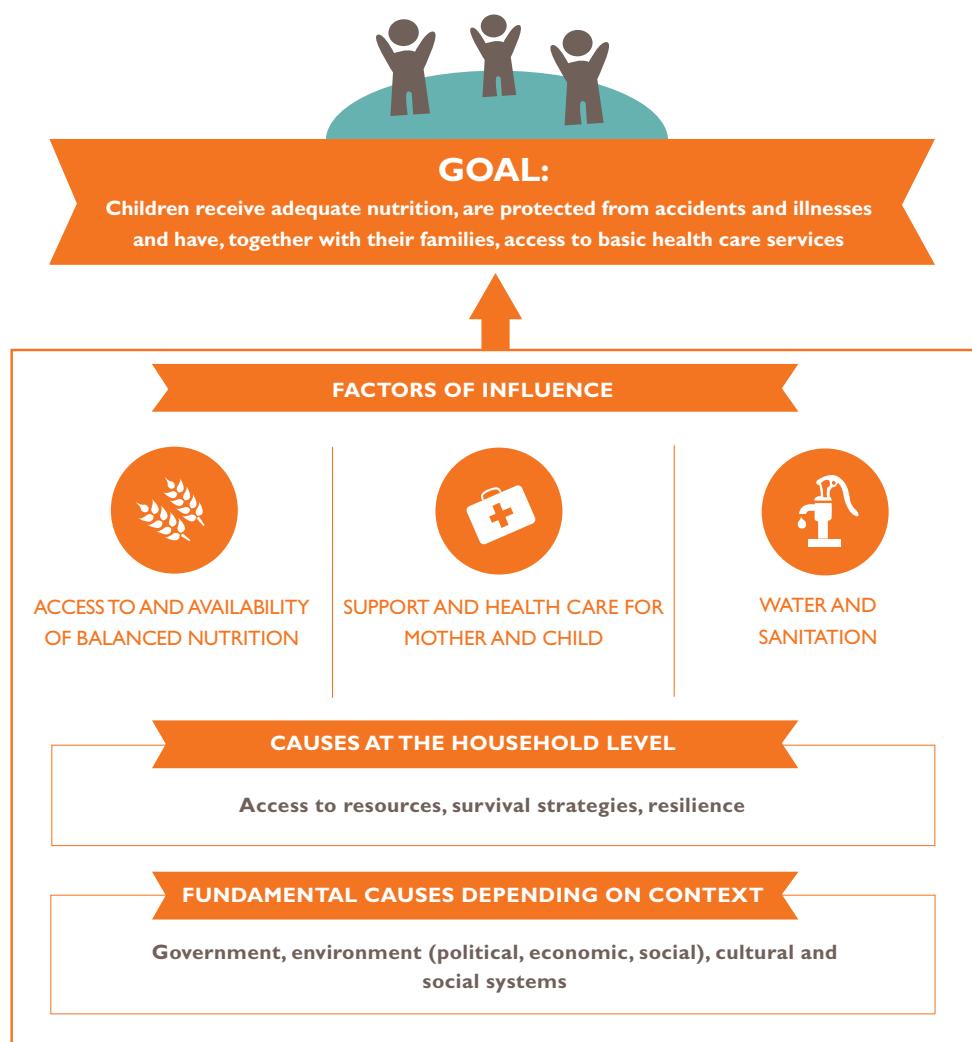


Diagram 6: Impact logic model



→ **A BALANCED DIET DURING CHILDHOOD IS ESSENTIAL FOR A HEALTHY DEVELOPMENT. THIS IS THE ONLY WAY FOR CHILDREN TO DEVELOP THEIR FULL PHYSICAL AND MENTAL POTENTIAL LATER ON.**

In its regional development projects, World Vision collaborates with communities on a long-term basis and uses proven, simple and cost-effective approaches to promoting the health of mother and child. As an example, we advocate for people living in poverty areas to have access to a balanced diet, local health services and adequate water supply and sanitation. Therefore, we developed a number of different project models that we then have to adapt to the particular context in a project area in order to improve the living situation of the families for the long term. In its project work, World Vision places particular importance on education and prevention – with the goal of making a positive change in families' behavior by teaching them about health and nutrition, thereby enabling them to take better care of their health themselves. In order to effect a positive change in behavior, our measures are aimed not only at individual persons, but also include those in their immediate vicinity and in the wider environment, such as family members, teachers, traditional or religious leaders, as well as the healthcare system.

NUTRITION

OVERVIEW OF PROJECTS



GLOBAL CHALLENGES

- 50% of all deaths in children under five years of age are associated with malnutrition (about 3 million children a year).
- Every day, 1,800 children under five years of age die because they do not have access to clean water.
- Worldwide about one in four births (26%) takes place without any medical or technical support – that is approximately 40 million births, 90% of which occur in South Asia and sub-Saharan Africa.

Active projects

Completed projects

NICARAGUA

1 ACHUAPA

Initial situation: Low yields, low knowledge level about nutrition for young children

Beneficiaries: 14,100

Project activities: Distribution of seeds and tools, home and school gardens, nutrition multipliers

ARMENIA

2 VARDENIS

Initial situation: Unbalanced diet

Beneficiaries: 33,000

Project activities: Cooking classes, use of local food, health brochures

TANZANIA

3 MAGOMA

Initial situation: Periods of drought, low yields, high malnutrition rate in children

Beneficiaries: 43,300

Project activities: Modern farming methods, health and maternity wards, training for community health workers and midwives

MALAWI

4 MSWAKI

Initial situation: Contaminated drinking water, lack of food, low knowledge level about health

Beneficiaries: 47,000

Project activities: Well construction, raising chickens, training for community health workers

5 KAMWENDO

Initial situation: Lack of health stations, lack of water

Beneficiaries: 20,000

Project activities: Health and nutrition training, distribution of drought-tolerant seeds, irrigation systems, well construction

External factors of influence:
Climate-induced periods of drought



INDIA

6 MKHUMBA

Initial situation: Corn farming (high water consumption), livestock losses due to disease

Beneficiaries: 17,500

Project activities: Training in species varieties, irrigation systems, training regarding mother and child care

External factors of influence: Climate-induced periods of drought

7 MANNARGUDI

Initial situation: Low knowledge level about health, poor health care, lack of sanitation facilities

Beneficiaries: 50,000

Project activities: Health multipliers, agricultural training, savings groups

CAMBODIA

8 ROVIENG

Initial situation: Lack of prenatal and postnatal care, lack of vitamins and minerals

Beneficiaries: 17,000

Project activities: Health multipliers, social funds for emergency transportation, micro-nutrient powder

9 TBENG MEANCHEY

Initial situation: Malnutrition, low knowledge level about personal hygiene and nutrition

Beneficiaries: 16,300

Project activities: Rice banks, nutrition programs, support for community health workers

Data quality: Limited comparability of evaluation data with baseline data

VIETNAM

10 TRIEUF PHONG

Initial situation: Malnutrition, inefficient crop cultivation and animal husbandry techniques, lack of sanitation facilities

Beneficiaries: 95,000

Project activities: Establishment of nutrition clubs, hygiene and agricultural training, construction of toilets

For the statements in this chapter we analyzed a total of ten evaluation reports and relevant monitoring reports. We use the impact logic model shown on page 20 (Diagram 6) to highlight relationships and to analyze and evaluate what World Vision's activities contributed to the individual factors of influence and to the health and nutritional status of the children. To do this, we captured trends in the field of nutrition and health on the basis of four standard indicators (see also section "Global Data Collection" on page 6)⁴. Next, using additional data, we analyzed the contribution of the selected regional development projects to achieving the higher goal: the children are healthy, well-nourished and are able to develop their full potential.

We selected the indicators based on the impact logic model (Diagram 6). As part of the document analysis, we searched for data in the evaluation reports that allowed us to analyze the individual factors of influence. A first look showed that in many projects the "best" indicators per factor of influence had not been measured (see Conclusion on page 30 and Validity and Limits of our Impact Monitoring on page 18). For example, for access to and availability of nutritious food, the standard indicator on food diversity for children would have been more fitting; however, this indicator, just like others, has barely been assessed up to now. Therefore, we decided to use

⁴<http://www.wvi.org/development/dme-measuring-child-well-being>

Country	Project	Project duration	Monitored time period (Baseline evaluation)	Goal	Factor of influence	Factor of influence	Factor of influence
				Indicator	Indicator	Indicator	Indicator
							
Malawi	Kamwendo	2003–2018	2008-2014	Decline	Improvement 2004-2014	No baseline, evaluation: 93.8%	Improvement
Malawi	Mkhumba	2003-2017	2008-2014	Decline	No measurements	Improvement	Improvement
Tanzania	Magoma	1999-2014	2012-2014	No change	Improvement 2008-2014	No baseline, evaluation: 66.3%	Improvement 2009-2014
Tanzania	Mswaki	2002-2017	2012-2015	Improvement	Improvement 2010-2015	No measurements	Improvement
India	Mannargudi	1986-2013	2011-2014	Improvement	No baseline, evaluation: 94.4%	No baseline, evaluation: 100%	Improvement 2007-2014
Vietnam	Trieu Phong	1997-2015	2006-2015	Improvement 2011-2014	Improvement 2011-2015	No change 2004-2014	Improvement
Cambodia	Rovieng	2004-2020	2007-2015	No baseline, evaluation: 29.7%	No measurements	No baseline, evaluation: 88%	Decline
Cambodia	Tbeng Meanchey	2004-2020	2007-2015	No baseline, evaluation: 30%	No measurements	Improvement	Decline 2010-2014
Armenia	Vardenis	2004-2018	2006-2014	Improvement	No measurements	No measurements	No change 2010-2014
Nicaragua	Achuapa	2005-2021	2012-2015	Improvement	No measurements	No measurements	No measurements

Table I: Overview of the main indicators of objectives and factors of influence (impact logic model) from all ten selected evaluations.

For explanations for each individual assessment, please see the following pages.

indicators that are available in most reports, since they allow us to analyze a situation based on each individual factor in the selected projects.

GOAL OF OUR ACTIVITIES: WELL-NOURISHED AND HEALTHY CHILDREN

To analyze this goal, we look at the standard Indicator "Prevalence of underweight in children under five years of age" (Table 2). The data is relatively complete: Eight out of ten projects have current data and comparative data available which allows us to identify a trend. A total of five projects (Mswaki in Tanzania, Mannargudi in India, Trieu Phong in Vietnam, Vardenis in Armenia and Achuapa in Nicaragua) showed a decline in the number of underweight children, while the Magoma project in Tanzania did not show any statistically significant changes. In both projects in Malawi (Kamwendo and Mkhumba) the development of the nutrition situation has been negative and the percentage of underweight children has increased. While the situation in Mkhumba requires attention, the situation in Kamwendo calls for a critical evaluation. This is also the case for the two projects in Cambodia (Rovieng and Tbeng Meanchey), as well as for the project in India (Mannargudi).



Country	Project	Monitored time period (Baseline evaluation)	Indicator	
			Baseline	Evaluation (evaluation of the actual situation)
Malawi	Kamwendo	2008–2014	10.4%	22%
Malawi	Mkhumba	2008–2014	10.6%	19.1%
Tanzania	Magoma	2012–2014	14.4%	14.1%
Tanzania	Mswaki	2012–2015	11.6%	1.5%
India	Mannargudi	2011–2014	39.5%	22.8%
Vietnam	Trieu Phong	2006–2015	17.5%	12.7%
Cambodia	Rovieng	2007–2015	No measurements	29.7%
Cambodia	Tbeng Meanchey	2007–2015	No measurements	30%
Armenia	Vardenis	2006–2014	9.4%	5%
Nicaragua	Achuapa	2012–2015	6.4%	4%

Table 2: Trend for the prevalence of underweight in children under the age of five

Explanation of World Vision's threshold values:

Red = critical (> 20%), **blue** = attention needed (10–20%), and **green** = acceptable (< 10%)

Projects covered in the text of the report are highlighted in gray.



Crises jeopardize project work

Both regional development projects in Malawi (**Mkhumba** and **Kamwendo**) are similarly designed and have multiple sectors. In both, the families benefited from the activities in the areas of health, agriculture, water and education. World Vision worked with groups of mothers, among other groups, and trained them in various topics in the areas of nutrition, health and hygiene. For example, in cooking classes the mothers learned to prepare nutritious and balanced meals made with locally available ingredients. In addition, they were encouraged to take their children for regular exams and vaccinations at a health center where the children were measured and weighed, among other things, to check their level of development. In Kamwendo, more than 450 women took part in mother support groups, and subsequently passed the knowledge they gained on to other women in the village. According to the evaluation these groups did remarkable work. The evaluation team recommended closer links between the groups and individual health committees in the villages to increase the transparency of their responsibilities even further.

Unfortunately, the nutritional status of children under the age of five has declined in both projects in Malawi (see Table 2). Although World Vision was able to make a positive impact particularly through activities in the water and health sectors (see the sections titled "Care for Mother and Child" starting on page 28 and "Safe Drinking Water" on page 30), the proliferation of underweight in children under the age of five has increased since 2008. The reasons for this are primarily external factors, such as particularly high crop failures in subsequent years as a result of drought and climate change. The depreciation of the local currency in 2012 and the increase in food prices just added to it. Based on estimates made at the time, this led to the fact that in 2012/2013 around 1.63 million people⁵, especially in the southern districts of Malawi, were no longer able to meet their nutritional needs. The two project examples illustrate how quickly major crises can undermine positive impacts if the individual countries and the international community do not respond to them sufficiently and quickly enough with aid measures. The current food crisis in Malawi (caused by the El Niño weather phenomenon) is another reason. Considering the grueling circumstances, the already achieved positive developments in the areas of maternal and child health and safe drinking water are reason to hope that the adverse impact of the current crisis will wane.

In Cambodia (**Rovieng** and **Tbeng Meanchey**) the situation is serious as well. The proportion of underweight children ought to be considered critical. We can assume that it was the improved work opportunities on plantations and in companies that contributed to the negative values. There, even young mothers work from early morning until late at night. They often leave their children in the care of their grandparents, who in the past few years have not benefited from the awareness measures of the project and therefore have less knowledge about nutrition. During pregnancy, too, many women are forced to neglect their necessary medical care to go to work, for example. This change in the situation has to be taken into account when planning the activities for the next project cycle.

Effective integration of the population leads to positive trend

In our **Mannargudi** project in India that was designed with multiple sectors, the food situation improved significantly thanks to a number of different measures: We were able to lower the percentage of underweight children from 39.5% to 22.8% from 2011 to 2014 (see Table 2). According to qualitative data, the food supply available to the population has shown a very positive development since the project began. The evaluation shows that in 2014, 94.4% of all households had access to sufficient food throughout the year. As part of the project work, we created vegetable gardens, trained farmers in new cultivation and fertilizing techniques as well as in ecological agriculture, and supplied them with seeds; we also founded and guided self-help and savings groups. However, no baseline data was available at the beginning of the project that allowed us to identify a trend. However, the local residents stated in group discussions that the fact that they now invest more in a balanced diet and that the consumption of nutritious foods has increased was, in their opinion, one of the biggest successes of the project. Together with the fact that almost nine out of ten families who benefited from the project activities perceive a positive to very positive impact, the project activities in the fields of agriculture and income generation might have realistically made a positive contribution to the successfully improved nutritional situation in the project area.

Group discussions with villagers also showed that our measures to raise the awareness of the population around using health care services to a greater degree were particularly successful. In conjunction with the activities in other sectors, those in the health care sector might therefore have made a positive contribution to an improved health situation and to a reduction in the number of underweight children in the project area. Even though this positive trend is very encouraging, the percentage of underweight children under the age of five was at 22.8% (2014) and ought to be considered critical. The fact that this value is not substantially lower might be related to the primary focus being on the areas of agriculture and income generation, which unfortunately did not have as strong an impact on the nutrition of children as we had hoped. The focus on work in the nutrition sector did not intensify until the last few years of the project. A number of things have happened in the drinking water sector as well: The percentage of households with access to an improved water source has increased by 40 percentage points since 2007 and was at 97% in 2014 (see Table 5). According to the evaluation report, World Vision's activities, such as drilling wells, establishing and training water committees in maintenance and repair, building latrines and providing hygiene training for the local people all were able to make an effective contribution to it.

⁵reliefweb.int/sites/.../int/.../Full%20Report_882.pdf

FACTOR OF INFLUENCE: ACCESS TO AND AVAILABILITY OF NUTRITIOUS FOOD

One of the prerequisites of a good nutritional and health status in children is the availability of nutritious food for children and their families throughout the year. Therefore, we took a closer look at the indicator "Access to sufficient food throughout the year" in the following analysis of five projects, since there is more data available for the ten projects we looked at compared with other food security indicators. In this context, it is important to note that the selected indicator, however, reveals nothing about the quality of the food. Since there is no comparative data available for Mannargudi in India, we cannot make any quantitative statements about a trend.



Country	Project	Monitored time period (Baseline evaluation)	Indicator	
			Percentage of the population with access to sufficient food throughout the year	
			Baseline	Evaluation (evaluation of the actual situation)
Malawi	Kamwendo	2008–2014	28.0%	32.6%
Tanzania	Magoma	2008–2014	24.5%	52.5%
Tanzania	Mswaki	2010–2015	13%	68.2%
India	Mannargudi	2011–2014	No measurements	94.4%
Vietnam	Trieu Phong	2011–2014	56%	92.8%

Table 3: Trend for the percentage of the population with access to sufficient food

Projects covered in the text of the report are highlighted in gray.



For the Kamwendo project in Malawi, the Magoma and Mswaki projects in Tanzania and for Trieu Phong in Vietnam, we are able to analyze a trend since in this case data on the indicator was collected in both the baseline survey as well as in the evaluation. We are pleased to report that all four projects showed an improvement in the continuous availability of food at the household level by four to 55 percentage points.

In 2014 32.6% of all households in **Kamwendo** (Malawi) had access to sufficient food throughout the year – ten years earlier the proportion was 28%. A study conducted four years after the baseline survey in 2008, however, shows that the situation has not changed since then despite the project work. The majority of the people in Kamwendo live from agriculture. Since there is less and less rain and the soil is becoming increasingly dry, World Vision provided the farmers with drought-tolerant seeds (peas, beans, sweet potatoes), and training in the production of natural fertilizers and in the use of rain water. Also, World Vision made rotation credits available allowing the farmers to buy goats or pigs. In addition, we created tree nurseries, installed irrigation systems and trained the irrigation committees. Since, according to the assessment, the months of January and February are particularly food-critical, the local people increasingly ask relatives and neighbors for food to bridge the shortage of food. Group discussions with residents in the project area also made it clear to us that families have to sell livestock or other assets during the so-called "hunger months" to secure their daily food supply.

FACTORS OF INFLUENCE: CARE FOR MOTHER AND CHILD AND HEALTH CARE

Care is essential for a healthy development. Unfortunately, pregnancy and birth continue to be a danger for the life of the mother and the child in many developing countries. Worldwide more than 300,000 women die every year as a result of complications with pregnancy and birth⁶. Approximately 45% of all children who do not live to experience their fifth birthday die as early as during the first month of life⁷. The main cause is primarily the lack of medical care for pregnant women before, during and after birth.

⁶WHO 2015 (<http://www.who.int/mediacentre/factsheets/fs348/en/>)

⁷WHO 2015 (<http://www.who.int/mediacentre/factsheets/fs178/en/>)

Country	Project	Monitored time period (Baseline evaluation)	Indicator	
			Baseline	Evaluation (evaluation of the actual situation)
Malawi	Kamwendo	2008–2014	No measurements	93.8%
Malawi	Mkhumba	2008–2014	59.6%	94.7%
Tanzania	Magoma	2012–2014	No measurements	66.3%
India	Mannargudi	2011–2014	No measurements	100%
Vietnam	Trieu Phong	2004–2014	50%	49%
Cambodia	Rovieng	2007–2014	No measurements	88%
Cambodia	Tbeng Meanchey	2007–2015	65%	74%

Table 4: Trend for births attended by qualified medical personnel

Explanation of World Vision's threshold values:

Red = critical (< 30%), blue = attention needed (30–70%), and green = acceptable (> 70%)

Projects covered in the text of the report are highlighted in gray

To be able to analyze the situation around our project measures in regard to "Well-nourished and healthy children", we will now look at the indicator "Proportion of infants whose births were attended by skilled birth attendants". This indicator was measured during the evaluation of seven projects. It is exciting to note that the percentage of medically assisted births in five of the seven projects is in the acceptable range of at least 70%. The projects in Malawi and India achieved particularly good results, with over 90% of births taking place in a health care facility. However, these results provide no information about the contribution World Vision made or might have made with its project activities. Since there is no baseline data, we can only make a before/after comparison for three of the projects. While the project in Trieu Phong (Vietnam) did not show any changes, the percentage of infants whose births were attended by skilled birth attendants increased by 35 and 9 percentage points respectively in the two projects, Mkhumba in Malawi and Tbeng Meanchey in Cambodia. In Tbeng Meanchey it became clear in discussions we had with the local population in the context of the evaluation that local health care had indeed improved. The people reported that health personnel had become more friendly, was doing a better job looking after patients and was now available at the health care center around the clock. Therefore, more patients utilize health care services, such as prenatal care or vaccinations. However, there are some pregnant women who prefer to give birth to their children

at home with the help of a traditional midwife. The reason for this is that health centers are far away for some families and relatives can take care of the new mother and her newborn at home.

Breastfeeding is one of the simplest and most cost-effective ways to protect children from malnutrition, obesity later in life or other nutritional diseases. Brain development is also supported by a good nutritional status and the close bond between mother and child. The indicator "Exclusive breast feeding", however, is not yet being measured in all projects. While we measured an increase by 14 percentage points in Tbeng Meanchey, Cambodia, the situation in three of the projects ought to be considered critical based on World Vision's threshold values. Unfortunately, there is a lack of additional data that would allow us to analyze this situation in greater depth (see also page 18, Validity and the limits of our impact monitoring).

FACTORS OF INFLUENCE: WATER SUPPLY AND SANITATION

Having water is a human right. Safe drinking water and adequate sanitation are keys to the healthy development of children. On the other hand, contaminated drinking water and a lack of hygiene can quickly become life-threatening for children, since diarrheal diseases continue to be one of the main causes of death in children under the age of five. We use the indicator "Access to an improved water source" to measure the impact of our project activities on the water situation. The evaluation analysis showed an improvement in the water situation in six of the projects (Kamwendo and Mkhumba in Malawi, Magoma and Mswaki in Tanzania, Mannargudi in India and Trieu Phong in Vietnam). The improvement was between three and 40 percentage points.



Country	Project	Monitored time period (Baseline evaluation)	Indicator	
			Percentage of the population with access to an improved water source throughout the year (MDG)	
			Baseline	Evaluation (evaluation of the actual situation)
Malawi	Kamwendo	2008–2014	69%	80.5%
Malawi	Mkhumba	2008–2014	93.4%	97.8%
Tanzania	Magoma	2009–2014	52.5%	74.5%
Tanzania	Mswaki	2012–2015	32.5%	35.7%
India	Mannargudi	2007–2014	57%	97%
Vietnam	Trieu Phong	2006–2015	60.3%	95.9%
Cambodia	Rovieng	2007–2015	34.7%	17% *
Cambodia	Tbeng Meanchey	2010–2014	55%	12% *
Armenia	Vardenis	2010–2014	60.9%	61.6%

Table 5: Trend for access to clean drinking water

Explanation of World Vision's threshold values:

Red = critical (< 60%), blue = attention needed (60–90%), and green = acceptable (> 90%)

Projects covered in the text of the report are highlighted in gray

**cannot be compared with the initial data collection (see section "Safe drinking water" on page 30)*



Kamwendo in Malawi is one of these successful projects. There, we drilled wells and trained water committees who maintain and repair the pumps. In addition, children and their families received hygiene training. At the time of the evaluation, 80% of the population had access to safe drinking water – while at the beginning of the project, this number was 69%. For almost all households, a water source was available within a reasonable distance: within 250 m for 79% and within 500 m for 12%. In addition, the evaluation had a positive impact on the project activities: 97% of all households reported making either a monetary contribution or a contribution in the form of labor for maintenance and repair work at the water sources.

The situation deteriorated in two of the projects (Rovieng and Tbeng Meanchey in Cambodia), while no change was found in Vardenis, Armenia. The evaluation in Achuapa, Nicaragua does not show any data collected regarding the water situation and sanitation. Unfortunately, the evaluations only allow us partially to explain positive as well as negative changes or to analyze the project contribution. Often, information on the performance of water committees or the sustainability of the established infrastructure is missing. Also, data on the subject of hygiene was not collected systematically; such data would allow us to analyze potential impacts of the improved situation with regard to access to drinking water and the health status.

Safe drinking water, lower diarrhea rate

Tbeng Meanchey in Cambodia is a descriptive project example with regard to challenges in the interpretation of the collected data. There, we drilled or renovated well holes and flat wells in the villages, drilled hand pump wells at schools, built latrines, founded water committees in schools and trained teachers, children and their families in the subject of hygiene. In addition, we formed groups at the community level that take care of drinking water systems and sanitary facilities on a vol-

untary basis. According to the evaluation report, only 12% of households had daily access to at least 15 liters of clean water per person in 2014 and were at a maximum distance of 150 m from the water source. In 2010, this number was, according to the initial data collection, still 55% of households. The main reason for this is that according to the evaluation report different measurement units were selected. While a sample was taken from the entire population in the project area during the initial data collection, the evaluation sample came from especially poor households only. Therefore, a comparison of the two studies is not possible.

Generally, there seems to be an improved water situation in correlation with an improved health situation of children under the age of five. For example, in both projects in Malawi and in Magoma, Tanzania, we did not only measure very positive trends regarding the lower incidence of diarrheal diseases; based on World Vision's threshold values, the current situation, too, can be rated as acceptable.

CONCLUSION

In the majority of the projects we looked at, the nutrition and health situation has developed positively for the children. In this context, we would like to highlight the situation regarding malnutrition and access to drinking water. It is also gratifying to note that in the last two years the quantitative baseline data has improved (see also the evaluation assessment done by CEval, on page 70). We are able to make a before-and-after comparison in projects more and more frequently. Also, the quality of the data that is often complex to collect has improved considerably. An example is the identification of the children's exact ages to determine their status as being "underweight". In most cases the presentation of qualitative data as a supplement to the quantitative data has also improved, thus allowing a more in-depth analysis.

Country	Project	Monitored time period (Baseline evaluation)	Indicator	
			Proportion of children under the age of five with diarrheal illnesses during the past 2 weeks (in %)	
			Baseline	Evaluation (evaluation of the actual situation)
Tanzania	Mswaki	2012–2014	37%	23%
Cambodia	Tbeng Meanchey	2007–2014	45.5%	19%

Table 6: Trend for the diarrhea rate in children

Explanation of World Vision's threshold values:

Red = critical (> 40%), blue = attention needed (15–40%), and green = acceptable (< 15%)

Projects covered in the text of the report are highlighted in gray



When doing analyses in the future, it will be important to pay greater attention to the impact interdependencies the project is based on during monitoring as well as during data collection and analysis, since for the analysis of key indicators, such as the percentage of children who were breastfed exclusively during the first few months of their lives, the corresponding values have not been systematically collected in all of the projects.

Also, the evaluation reports do not contain enough information about the direct impact of our work, for example, the performance of health committees. Furthermore, we can only say reliably in few cases to what extent training or awareness-raising measures effect a change in behavior. The situation is similar with the data that concern the use of learned knowledge. Therefore, it is only possible to a limited degree for us to make statements about World Vision's contribution or to analyze reasons for changes. Interdependencies between different sectors within one project, too, have not been commonly analyzed in the reports up to now.

An additional challenge is the fact that initial and evaluation data collection efforts were either not documented, or could not be conducted at the same time of the year. However, this significantly reduces the comparability, particularly of the nutritional data. For example, the results available at the start of the project regarding the percentage of underweight children during the hunger months cannot be compared with data from a nutrition study done at a time of the year when the grain storage areas of households were well filled.

The improved quality of the evaluation reports since we published our last Impact Report makes us optimistic that in our next Impact Report we will be able to present the developments of individual projects and World Vision's contribution in an even more detailed manner.

5.1.2. /

Innovative Approach: Mamanieva – Improvements in nutrition for young children in Sierra Leone

"Mamanieva" means "for grandmothers" in Mende, one of the most widely spoken languages in Sierra Leone. It is, at the same time, a respectful title for the mother-in-law, as well as for older women in a village community.

Since 2012, World Vision, together with its partners at Emory University (USA), The Grandmother Project (Italy), the Ministry of Health (Sierra Leone) and Njala University (Sierra Leone), has been conducting a grandmother project in the south of Sierra Leone. This project was designed as a research project with the goal of gaining a better understanding of the influence of grandmothers on maternal and young child nutrition in Sierra Leone and to effectively involve them in the project work.

*"Mamanieva" means
"for grandmothers" in
Mende, one of the most
widely spoken languages
in Sierra Leone.*

WHY THE FOCUS ON GRANDMOTHERS?

Anthropological studies show that in many societies, grandmothers have an essential supporting role in families and have great influence on mothers. In addition to many other tasks they take on, grandmothers are often invaluable when it comes to taking care of young mothers and their young children especially in countries where development cooperation takes place. They are the mothers' advisors on maternal and child health and, as caregivers, are often directly involved in the care and upbringing of the children. However, many development programs discount the important role grandmothers play due to bias with regard to their typical lack of literacy, their age and the associated limited ability to learn. In addition, many development projects do not give adequate consideration to the context of a society as it is found in Africa, and target their health actions solely at high risk groups, such as young mothers with young children. Therefore, World Vision, with its Grandmother Project in Sierra Leone, deliberately counts on the role of grandmothers to provide support to young mothers with regard to infant and young child feeding (IYCF) and thus to contribute to sustainable improvements.



HOW ARE GRANDMOTHERS INVOLVED IN THE PROJECT APPROACH?

The Grandmother Project approach was developed in 2005 by Dr. Judi Aubel, the founder of the Grandmother Project in Italy. It is a holistic approach that actively involves grandmothers in the project work through methods of adult education⁸. Since grandmothers in most cultures are key persons for sustainable change, we should strengthen and encourage them in their traditional roles typical for their respective society.

Our Grandmother Project in Sierra Leone has been employing a variety of activities using this approach. The Theory of Change model is shown as follows in Diagram 7.

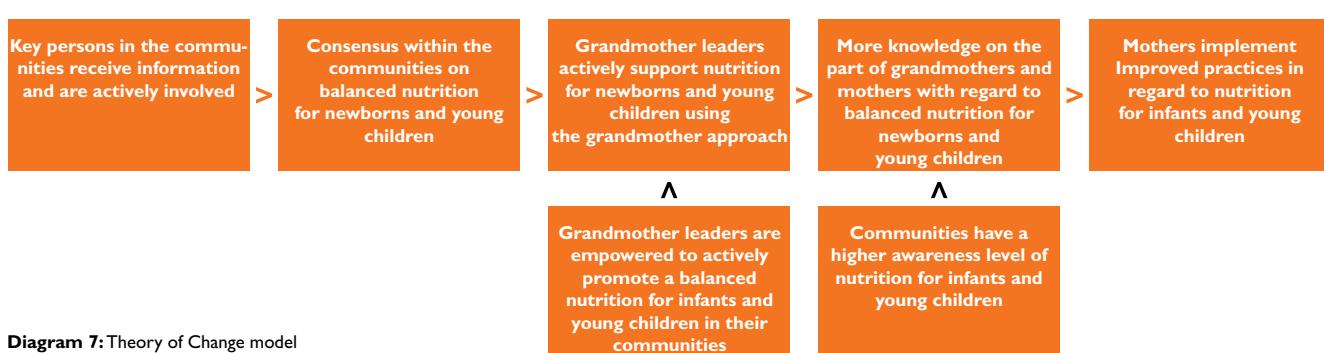


Diagram 7: Theory of Change model

Initially, there is a central group discussion in Torma, the larger village, involving grandmothers and interested parties from the various communities in the project area. World Vision leads the meetings that are designed to discuss topics of infant and young child nutrition in greater detail with a large number of participants. According to the Mamanieva Project team, these meetings are particularly important for capacity development and to strengthen the role of the grandmother.

The meetings with grandmothers take place in every community. World Vision leads the meetings with the support of grandmother leaders. Each of the grandmother meetings starts with a song praising grandmothers that all attendees sing together. Then, a nutrition topic is discussed. In these dialogs, we talk about and openly discuss not only traditional knowledge and practices, such as nutrition practices for infants and young children and local supplementary foods, but also "modern knowledge" and the associated risks. For example, the baseline study at the beginning of the project had shown that mothers do not exclusively breastfeed long enough (only three instead of six months), and begin early to feed their children the traditional supplementary food "Ngwo bayei" or rice water to prepare their stomachs for food. Using games, sketches, songs and picture stories, grandmothers are engaged in discussions on harmful and alternative practices for the health and wellbeing of children. Goal of the group discussion is to combine traditional knowledge with modern knowledge and to find a solution for the issue at hand by consensus. We hope that grandmothers feel empowered by the group meetings and, next, pass the newly learned knowledge on to young mothers in the family or the village.

As part of the project, we also identify grandmother leaders and train them in leadership and communication with the help of workshops. They are, for example, older women, who are particularly respected in their villages and might have already taken on some charity work in their communities. It is our objective to have a grandmother leader, with the help of management and communication training, not only advise and support young mothers in their own families with regard to nutrition for infants and young children, but to also have them in this role on the community level. For example, grandmother leaders have started small "support groups" in their communities. In these groups, grandmothers regularly meet with young mothers to support them and to encourage them to use optimal infant and young child feeding practices. It is our objective to have grandmother leaders independently lead and moderate group discussions of the kind that, for example, take place during our grandmother meetings.

⁸Adult education methods: Discussions with older women to bolster positive nutrition/care practices and to discontinue negative ones, for mutual learning, the exchange of experiences and to encourage behavioral change

Important elements of the Mamanieva project are the intergenerational dialog between grandmothers and younger mothers and the community meetings where open appreciation of grandmothers is shown – experience with the Grandmother Project approach have confirmed this. The grandmother leaders themselves encourage the intergenerational dialog, where younger mothers openly celebrate grandmothers by singing and dancing songs of praise, presenting experience reports and expressing their gratitude. Not only does this give grandmothers more self-confidence, but it also strengthens their traditional role in the community. This is particularly important to ensure the grandmothers' success and sustainable work with the younger mothers in the project.

WHAT ARE THE DIFFERENT WAYS TO ACHIEVE IMPACT AND SUSTAINABILITY?

In June 2015, Emory University in the United States conducted a process evaluation to determine the reach, coverage, fidelity, acceptance and the capacity needed in future programs. The results of this process evaluation were promising.

Results of the study show a high level of acceptance of the Grandmother Project by the local population due to its uniqueness and appreciation of grandmothers. Grandmothers from the target communities report: "We feel important. We are assigned a particular duty and we feel a sense of belonging." In addition, there are reports that, among other things, the relationship between daughters and mothers-in-law has improved. This is shown, for example, in the so-called praise sessions, where daughter or young mothers have the opportunity to openly praise grandmothers or thank them, for example by singing songs.

"We feel important. We are assigned a particular duty and we feel a sense of belonging"

Grandmothers from the target communities

Another interesting result of the study was what reasons the grandmothers and mothers gave for participating in the group discussions. On the one hand, the reasons included gaining new knowledge; on the other hand, they comprised the visible improvement in the health of children and grandchildren since the beginning of the project.

Furthermore, the group discussions conducted as part of the process evaluation revealed that a greater number of pregnant women had been visiting health facilities for prenatal care or childbirth since the start of the project. In addition, the diet of pregnant women was said to have improved.

The discussions taking place as part of the process evaluation showed that the activities we carried out and the creative media (singing, interactive storytelling, sketches, games, etc.) we used contributed to the increase in group discussion participation and the use of improved feeding practices.

The process evaluation comes to yet another important result: Male members of the community, too, are interested in the Grandmother Project and would like to participate. Therefore, the process evaluation recommends that useful ways be found to more strongly integrate male community members into the project work.

We make the assumption that the final evaluation of the study, too, will demonstrate a significant improvement in the practices of young mothers with regard to infant nutrition – thanks to the grandmothers' commitment and dedication.





5.2. /
PRIMARY EDUCATION

5.2.1./

Evaluation Analysis

In this chapter we will be reporting on World Vision's work in the education sector. With its goal "Educated for life", World Vision defines four components that focus on sustainable and life-long learning: Children have access to and complete their education; children can read, write and do math; children learn life skills and teens are prepared for and receive vocational training (see "Child Well-Being Aspirations and Outcomes" on page 7). While we presented all areas starting with early childhood education all the way to youth development in our first Impact Report (2014), the focus this time is on primary education.

In its development projects, World Vision focuses on the availability of high-quality elementary education to ensure that children actually learn to read and write during their elementary education. Using the underlying impact logic model (Diagram 8), child-appropriate learning and teaching in and outside the school is to be facilitated and promoted. The initiative lies mainly with teachers, parents and the local community, with World Vision as a supporting partner.

The following diagram shows a graphical representation of the different factors of influence that contribute to a high-quality elementary education. The goal of ensuring a good education is for children to be able to read and write upon completion of their elementary education.

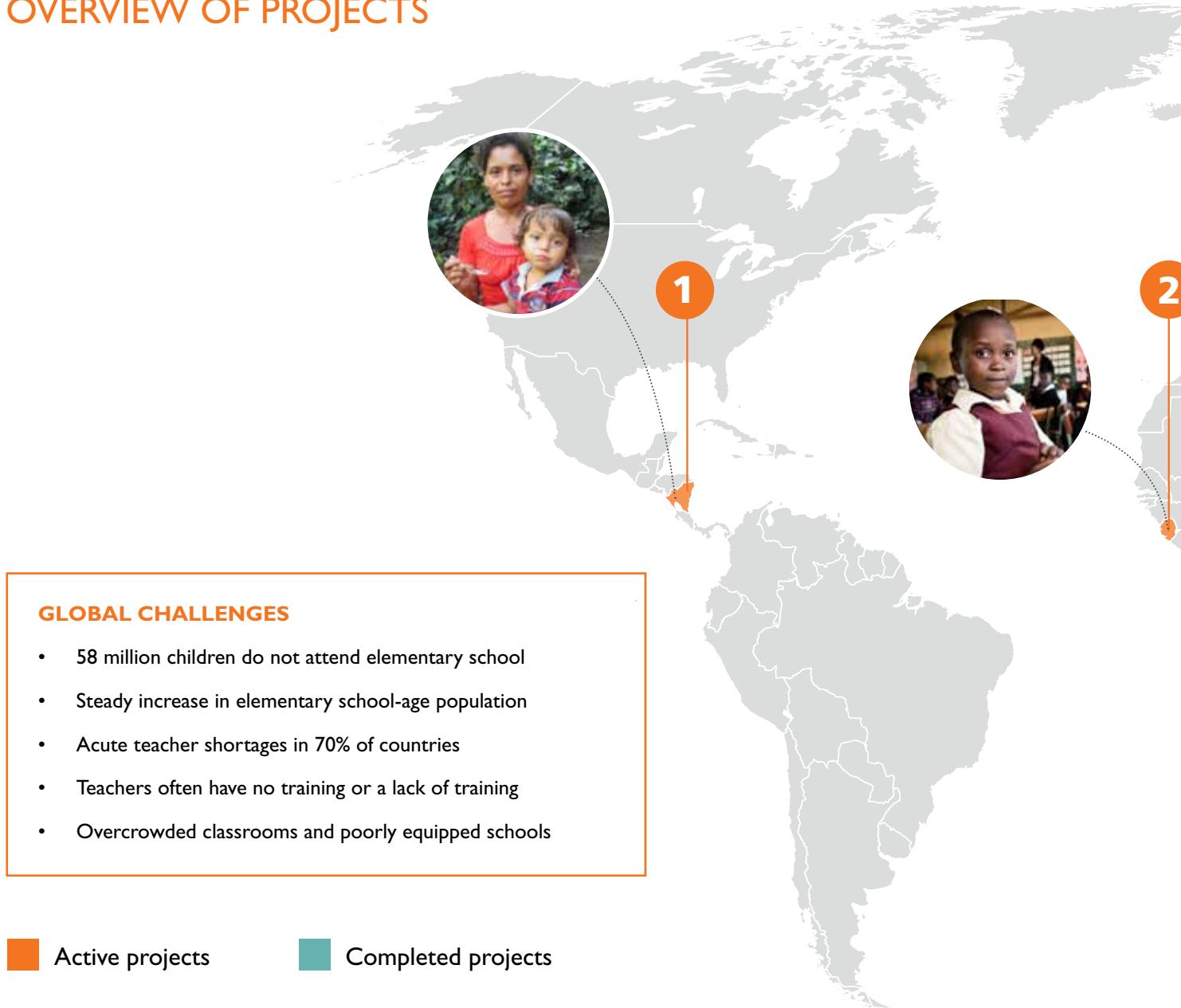
In its development projects, World Vision focuses on the availability of high-quality elementary schools.



Diagram 8: Impact logic model for the improvement of the quality of elementary education with four factors

EDUCATION

OVERVIEW OF PROJECTS



NICARAGUA

1 ACHUAPA

Initial situation: Absences from school due to child labor, education held in low regard, shortage of special subject teachers

Beneficiaries: 14,100

Project activities: School libraries, tutoring program, early-childhood development, awareness raising (children's rights and education), continuing education for teachers

SIERRA LEONE

2 NGOYILA

Initial situation: Education held in low regard, effects of the civil war

Beneficiaries: 50,000

Project activities: Awareness raising, reading, writing and debating contests, school construction

External factors of influence: *Ebola, meeting bans*

TANZANIA

3 MAGOMA

Initial situation: Low school enrollment rate, students dropping out of school, approx. 50% of the population is under 15 years of age

Beneficiaries: 43,300

Project activities: Training sessions (children's rights), school committees, school construction, continuing education for teachers

CAMBODIA

4 MSWAKI

Initial situation: Low school enrollment rate, students dropping out of school, approx. 45 % of the population is under 15 years of age

Beneficiaries: 47,000

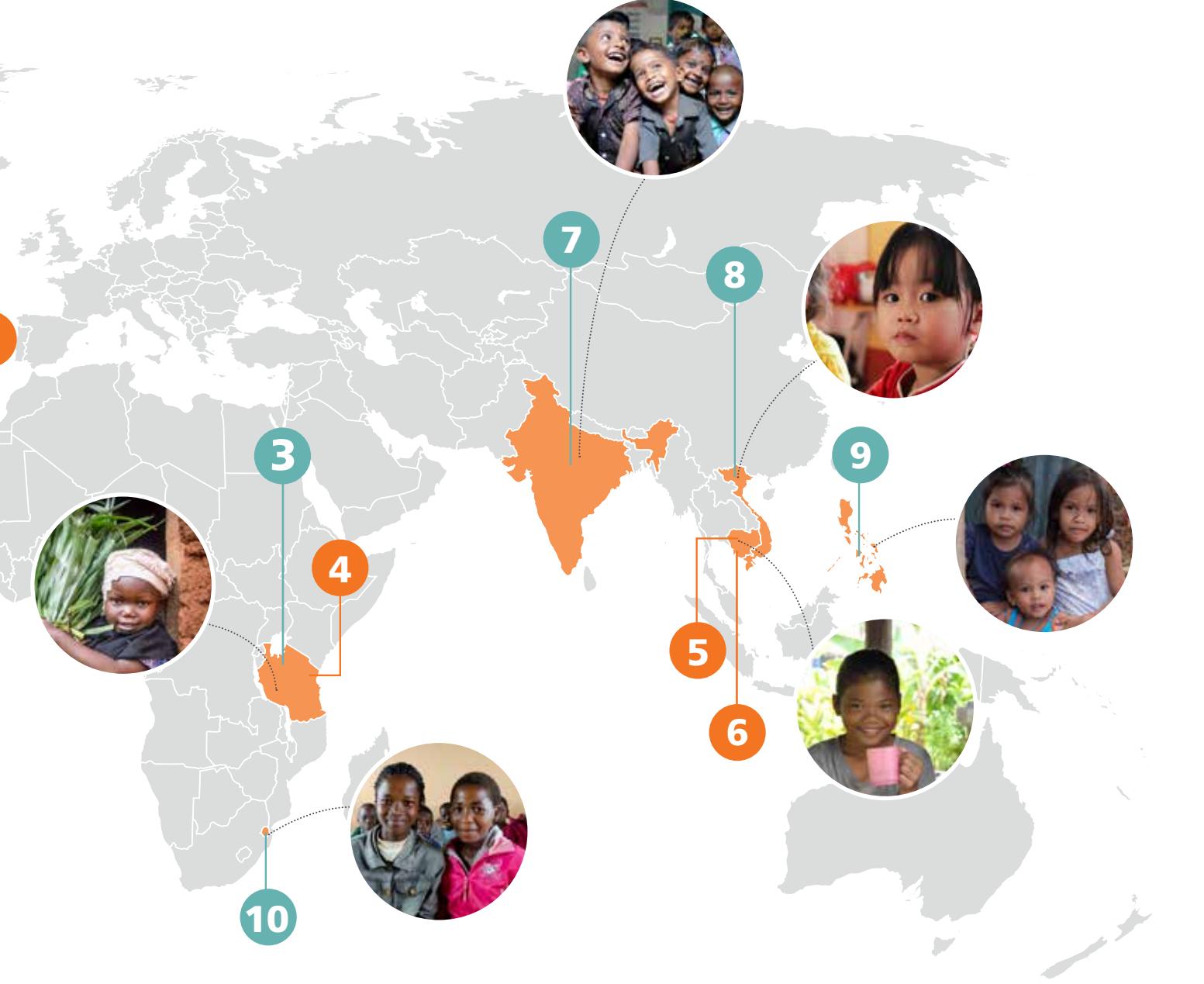
Project activities: Meals at school, support of education for orphans by savings groups

5 ROVIENG

Initial situation: Low reading literacy

Beneficiaries: 17,000

Project activities: Mobile libraries, learning-to-read training, child-friendly school yards



INDIA

7 MANNARGUDI

Initial situation: Large distance to school, students dropping out of school

Beneficiaries: 50,000

Project activities: Distribution of bicycles, scholarships, program for students dropping out of school

VIETNAM

8 TRIEU PHONG

Initial situation: Lack of special subject teachers, stigmatization of children with disabilities

Beneficiaries: 95,000

Project activities: Continuing education for teachers, integration of children with disabilities, vocational training

PHILIPPINES

9 NORTH-WEST LEYTE

Initial situation: Disaster-prone construction, poor learning environment, lack of instructional quality, high rate of school drop-outs

Beneficiaries: 117,000

Project activities: Improvement in the learning environment, training for teachers, vocational preparation for students dropping out of school, tent class rooms, recreation centers for children

SWAZILAND

10 GIL GAL

Initial situation: (Shunned) AIDS orphans, teacher shortage

Beneficiaries: 20,500

Project activities: Orphan preschools, scholarships for orphans, training for childcare staff, construction of teacher accommodations

*External factors of influence:
Typhoon "Haiyan", November 2013*

For the following text, we analyzed a total of ten evaluation reports and relevant monitoring reports. We use the impact logic model shown on page 37 (Diagram 8) to analyze relationships and the contribution of World Vision's measures on the quality of elementary education. To do this, we attempted to capture trends on the basis of four standard indicators (see also section "Global Data Collection" on page 6)¹¹. Next, by using a more in-depth data analysis, we tried to analyze the contribution of selected regional development projects to the achievement of the overall goal.

We selected the indicators according to the impact logic model (Diagram 8). As part of the document analysis, we searched for data in the evaluation reports that allowed an analysis of the individual factors of influence. The impact logic model is increasingly being taken into account in planning documents. However, we found only few evaluation reports with data on a child-friendly learning environment and on strengthening the teaching skills of teachers. We therefore fell back on the following main indicators to get closer to the analysis of elementary school quality: **Functional reading literacy, school enrollment rate, and dropout and completion rate.**

The overview table shows that data on functional reading literacy is now increasingly being collected in projects. There were only three development projects where this difficult-to-collect main indicator (see also section "Global Data Collection" on page 6) was not measured or was at least not measured using the exact same methodology.

¹¹<http://www.wvi.org/development/dme-measuring-child-well-being>

Country	Project	Project duration	Monitored time period (baseline – evaluation)	ACCESS TO AND CONTINUOUS PARTICIPATION IN ELEMENTARY SCHOOL CLASSES			
				IMPROVED EDUCATIONAL QUALITY		IMPROVED EDUCATIONAL QUALITY	
				Indicator	Indicator	Indicator	Indicator
				Functional reading literacy	School enrollment rate	Drop-out rate	Completion rate
Tanzania	Magoma	1999–2014	2012–2014	Improvement	Improvement	Decline	Decline
Tanzania	Mswaki	2002–2017	2012–2014	Improvement	Improvement	Improvement	Improvement
Sierra Leone	Ngoyila	2010–2023	2009–2014	No measurements	Improvement	No baseline, evaluation: 8.8%	Decline
Swaziland	Gilgal	1999–2014	2012–2014	No baseline, evaluation: 74%	Improvement	No measurements	No measurements
India	Mannargudi	1986–2013	2011–2014	No measurements	Improvement	No measurements	No measurements
Vietnam	Trieu Phong	1997–2015	2006–2015	Improvement	No change	No measurements	No measurements
Cambodia	Rovieng	2004–2020	2007–2015	No baseline, evaluation: 59%	Improvement	No measurements	Improvement
Cambodia	Tbeng Meanchey	2004–2020	2007–2015	No baseline, evaluation: 76%	Improvement	No measurements	Improvement
Philippines	Northwest Leyte	1999–2015	2012–2015	Decline	No measurements	No measurements	No measurements
Nicaragua	Achuapa	2005–2021	2012–2015	No measurements	No measurements	No measurements	Improvement

Table 7: Overview of indicators for improved quality and participation in elementary education in ten selected evaluations

For explanations for each individual assessment, please see the the following pages.

Furthermore, sufficient data for the indicator "School enrollment rate" is available which reflects access to primary schools and was collected in eight out of ten projects. Two other indicators – "Dropout rate" and "Completion rate" – that are important to analyze the participation in elementary school education, however, were only rarely measured. In this case, we had to refer to other available data from the projects in the following analysis; this data was not collected using standardized indicators.

GOAL: FUNCTIONAL READING LITERACY

To be able to read, write and do math is not a matter of course for millions of children in educationally disadvantaged countries. According to the World Education Report¹² 250 million children did not learn these educational basics, although 130 million of them went to school for at least four years.¹³ Therefore, to ensure that time spent in school is spent successfully, quality must urgently be improved. The following overview shows that functional reading literacy is now increasingly being studied in development projects. This illustrates the growing focus on quality education. At the same time, it becomes clear that the situation is critical in three of the seven projects and requires attention. Only in Magoma, Tanzania, the situation is acceptable.

¹² UNESCO World Education Report 2013/2014: Teaching and Learning: Achieving quality for all.

¹³ EFA Global Monitoring Report (2015). UNESCO World Education Report 2015, German short version: Bildung für Alle 2000-2015: Bilanz.

Country	Project	Monitored time period (Baseline evaluation)	Indicator	
			Baseline	Evaluation (evaluation of the actual situation)
Tanzania	Magoma	2012–2014	49.6%	91.2%
Tanzania	Mswaki	2012–2014	59.2%	67.6%
Swaziland	Gilgal	2012–2014	No measurements	74%
Vietnam	Trieu Phong	2006–2014	60.4%	78.6%
Cambodia	Rovieng	2007–2015	No measurements	59%
Cambodia	Tbeng Meanchey	2007–2015	No measurements	76%
Philippines	Northwest Leyte	2012–2015	81.7%	70%



Table 8: Functional reading literacy in children

Explanation of World Vision's threshold values:

Red = critical (< 70%), blue = attention needed (70–80%), and green = acceptable (> 80%)

Projects covered in the text of the report are highlighted in gray



ACCESS TO AND CONTINUED PARTICIPATION IN ELEMENTARY EDUCATION

For children to have the opportunity to attain high-quality education, the foremost prerequisite is that they attend school in the first place and that they complete school as well, if possible. The school enrollment rate was measured very extensively in a total of eight countries. Of those, a positive trend was measured in seven evaluated project areas. The dropout rate was only measured in two projects (Magoma, Mswaki) with baseline and evaluation data, which means that no wide-ranging conclusions can be drawn from it. Of the six projects examined that measured the graduation rate, four showed a positive trend, while two showed a negative development. In Magoma (Tanzania), one must consider that the rate of girls has increased, however, that the number of boys completing elementary school has declined. The change we saw in Tbeng Meanchey (Cambodia) stands out as especially positive. In 2007, only 44% of students completed elementary school – seven years later the number had increased to 81%, while in the same period the number of children that actually attended school increased from 73.5% to 96%.

Country	Project	Monitored time period (Baseline evaluation)	Indicator			
			School enrollment rate		Completion rate	
			Baseline	Evaluation (evaluation of the current state)	Baseline	Evaluation (evaluation of the current state)
Tanzania	Magoma	2012–2014	79.8%	85.5%	83.4%	79.1%
Tanzania	Mswaki	2012–2014	62%	85%	39%	49%
Sierra Leone	Ngoyila	2009–2014	52%	61%	81.10%	70.4%
Swaziland	Gilgal	2012–2014	70.4%	85%	No measurements	No measurements
India	Mannargudi	2011–2014	95.8%	98.6%	No measurements	No measurements
Vietnam	Trieu Phong	2006–2014	100%	100%	No measurements	No measurements
Cambodia	Rovieng	2007–2015	81.3%	98%	67%	97%
Cambodia	Tbeng Meanchey	2007–2015	73.6%	96%	44%	81%
Nicaragua	Achuapa	2012–2015	No measurements	No measurements	35.8%	64%

Table 9: School enrollment rate and completion rate

That primary education should be free and accessible for all children was first written down in the Millennium Development Goals. This is easier said than done. In Ngoyila (Sierra Leone), for example, even access to education provides a big challenge. The project area is located in a hard-to-reach rural area. With an average distance of 2.1 km from home to school, it is difficult to ensure that children even go to school. In 2009 only about every second child was enrolled in school. While we were able to increase the school enrollment rate by building and renovating ten elementary schools and by providing educational information on the importance of education to parents, 40% of the children continue to be excluded from attending school five years later.

And while the UNESCO country data¹⁴ for Sierra Leone shows a higher school enrollment of boys than girls, the rate of girls is consistently higher than the rate of boys in the World Vision project area. However, at the same time, the dropout rate of female students is higher than that of male students. The long routes to school and the associated worry about the safety of girls are sometimes the main reasons for the early withdrawal from school. With older girls there are the additional reasons of early marriage and early pregnancy.

Unfortunately, the total number of students completing elementary school in Ngoyila declined from 81% to 70%. It is not only a challenge to ensure the children's participation in school, but it is at least as difficult to find trained and motivated teachers who are willing to live and work in this remote region. Therefore, increased school attendance cannot be equated with a good education. Low-quality schools lead to children staying away from class (voluntarily or because their parents request it) and preferring to help at home, because the lack of awareness and prejudices on the part of the parents regarding the importance of education are often big issues.

STRENGTHENING TEACHING SKILLS AND WORKING CONDITIONS FOR TEACHERS

The educational level of teachers in Ngoyila is low overall: Only 27.1% of teachers (26 of 96) have actually been trained for this type of work, and the overwhelming majority of 72.9% is not sufficiently qualified. This has a significant impact on the quality of education. The evaluation report also shows that two thirds of teachers (64.6%) are not employed contractually by the government and therefore do not receive a salary. The school committees consisting of parents and teachers are already addressing these challenges: Teachers receive training and get housing. In addition, school committees receive training in their role and task to demand more support for education from the government and the population. Despite the training courses, no local advocacy structures have developed, and there continues to be a high number of unqualified teachers. Additionally, many of the teachers who received training have now moved into the city since there are better employment opportunities there.

However, afternoon classes outside of school are now being offered by teachers receiving a stipend. Because they get paid, these teachers are more highly motivated. Students attending these afternoon classes outside of school, however, have not yet achieved any significantly better academic results than those students who do not take advantage of this additional offer. It is impossible for us to say whether the gap between fast and slow learners has been decreased, however, since we must assume that the children attending afternoon school are lower-performing students in the first place.

Since we did not start collecting data on the reading comprehension of elementary students in Rovieng (Cambodia) until 2015 as part of the evaluation, there is no comparative value. Nevertheless, the percentage of students classified as functionally literate is 59% and thus is below the national benchmark of 71% (see Table 8) defined by World Vision Cambodia. A survey of the local population, however, has shown that in their perception the trend is positive. For example, a school director confirmed that many teachers received continuing education in student-focused teaching and that the lessons changed in a positive direction as a result. And the director perceives the parents, too, as having increased awareness, since more and more of them are interested in their children's academic performance, and are promoting it. On the other hand, it became clear that some teachers do not use the knowledge they gained in their continuing education. Also, the local government education officer complained about his office's insufficient capacity that did not allow them to spend time developing teaching materials and curricula. The School Administration Committees criticized the continued lack of qualified teachers. Mother groups stated in the discussions that there are some classes with up to 60 children being taught by one teacher, which is far beyond the national standard of 45 children per class.

¹⁴ UNESCO Institute for Statistics, Country Profile: Sierra Leone. www.uis.unesco.org/DataCentre/Pages/country-profile.aspx?code=SLE®ioncode=40540 (01.04.2016)



MOBILIZING THE POPULATION TO PROMOTE A CHILD-FRIENDLY LEARNING ENVIRONMENT

Unfortunately, there is not much data to collect regarding the participation of families and the immediate social environment, as well as the support for the children. In **Gilgal** (Swaziland), we conducted a concluding household survey on this subject. In this survey, 39.3% of households reported that they check their children's homework and school books, while 24.3% confirmed that to motivate their children, they give them verbal encouragement or even rewards. 20.6% ask their children what they did in school. Only few households stated that they don't do any of the above. This positive development is largely attributable to the many awareness events that assured the parents that education is important for their children – and that it is important for both girls and boys.

The involvement of the children in children's clubs at their schools, too, has meant that they enjoyed going to school more, which positively shaped the general perception that education is important. Another important prerequisite for school attendance is a safe route to school, as in many places students, and especially girls, have a lower school attendance record because their parents fear attacks on the way to and from school. According to the household survey in Gilgal, 54% of adults feel that their children are safe in their neighborhood, while 30% think that they are safe sometimes. 16%, however, have major concerns and consider their children's environment to be unsafe. The data shows that for many families, the safety of their children continues to be a challenge that our local partners will have to continue to address even after the end of the project.

"Today teachers use methods that motivate students to actively participate in classes. This personal involvement leads to higher self-confidence in students. The number of good teachers in our school has grown from year to year."

*Ms. Huong Lam,
Deputy Director of
Trieu Trach Elementary School*

While the situation in **Tbeng Meanchey** (Cambodia), with a reading literacy rate of 76% in children under the age of 11, deserves attention (see Table 8), this rate can nevertheless be boosted in the coming project cycle. As part of the evaluation, 26% of surveyed parents stated that they support their children's education by, for instance, checking their homework (20%) and notebooks (26%), asking the teachers about their children's performance in school (15%), practicing reading together with their children (27%) or by showing interest in the material. Generally, the parents estimate that parents and decision-makers in the villages attend to their children's education more today than only three years ago.

Vietnam: Successes of the impact logic model

In **Trieu Phong** (Vietnam), elementary school teachers received training in active learning and teaching methods, as well as in inclusive education to improve their skills. Today they are familiar with methods, for example, to encourage groups and to promote creative work and communication. We made sure that the teachers used the methods they had learned in their classrooms with the help of structures we had put in place and with the participation of teachers, parents and especially the school committees. In addition, World Vision supplied the schools with relevant teaching materials, as well as with safeguards, for example by installing fences and by placing playgrounds right next to schools. Thanks to these measures the children's reading literacy improved from 60.4% to 78.6% (see Table 8) within only two years. Ms. Huong Lam, Assistant Director of Trieu Trach Elementary School explained in our 2015 evaluation report: "Today teachers use methods that motivate students to actively participate in class. This personal involvement leads to higher self-confidence in students. The number of good teachers in our school has grown from year to year."

Philippines: Typhoon ruined educational successes

In **Northwest Leyte**, Philippines, functional reading literacy was being measured for the second time already as part of an evaluation; therefore, a benchmark value exists. Unfortunately, it is a negative one: The percentage of children that can be classified as functionally literate has decreased from 81.7% to 70%. This is mainly due to the effects of Typhoon Haiyan that destroyed large parts of the country and in particular of the project area in 2013 and wiped out the results of years of work. For example, many children were not able to attend school temporarily or even permanently. In many places it took months for schools to be back to normal again. In many of the children, the traumatic experiences they had endured resulted in a severely limited performance. The parents, too, had to deal with the new challenges and were barely able to pay attention to their children's education.





CONCLUSION

In the area of education, World Vision can report successes in its projects worldwide, both in the functional reading literacy of children as well as in their access to and participation in elementary education. The quality of the data has improved in the past few years through various methods of data collection. The data collection by gender that allows us to make specific statements about girls and boys, too, has changed in a positive way in the last few years. Unfortunately, other aspects, such as children with disabilities, have so far rarely been considered in this data classification.

Data on the direct effects of our project work – based to the impact logic model (see Diagram 8 on page 37) – such as the performance of school committees and their impact on the educational situation, or whether teachers actually learn anything as part of their continuing education and use this knowledge, has frequently not been collected adequately up to now. Thus, in many cases we can only get close to the analysis of the direct impacts of our project work. Much of the quantitative data refers to the level of indirect impacts, in particular to the children's reading literacy. Therefore, the data collected as part of the evaluations can only conditionally substantiate to what degree the change is associated with World Vision's work or if education in a particular country changed in positive ways regardless of World Vision. The strong dependence on the national governments of individual countries (such as with curricula, teacher training, hiring and salaries) always has to be taken into consideration in the area of education in general. For example, World Vision has little impact on the teacher-student ratio per class or on teacher salaries, as these fall within the responsibility of the national ministries of education. However, in some cases, statements can be made about the degree to which the local population has been empowered and about how they advocate for the observance of their basic right to education with the responsible authorities. In conclusion, we can say that the impact analysis of the factors of influence that our regional development projects are based on has to be considered in a more detailed manner as part of the evaluations and monitoring to more clearly define our actual contribution to the changes.

Evaluations should also systematically collect data on possible negative impacts so that those can be intercepted during the project design phase, if necessary. This applies, for example, to the challenge of the so-called "brain drain", i.e., the labor migration of skilled workers – in the case of Ngoyila, Sierra Leone, the exodus of trained and qualified teachers from remote project areas.

We are happy to add though that in many project areas the educational situation has improved. It also becomes clear, however, that in many regions there are still children who do not have access to education or who cannot read and write properly despite attending school. Both in the implementation of educational projects and in the presentation of the collected data, it is important to continue to improve and address this challenge.

*In the area of education,
World Vision can report
successes in its projects
worldwide.*

5.2.2. /

Innovative Approach: Promoting a culture of reading with "Literacy Boost"

"Literacy Boost" is a project model for learning how to read that the relief organization Save the Children developed and that was adapted to World Vision's program work. It is a component of our educational development programs and is used in the early elementary school classes. What makes it special is that it does not only try to improve school quality, but also tries to create a culture of reading and to promote reading as a leisure time activity.

At the beginning and after the end of a "Literacy Boost" program, we conduct studies on reading literacy. First, we determine the students' basic skills and then, based on those, establish a degree of difficulty. In an ideal situation, we would monitor and measure the students' progress annually; the teachers are specially trained in this area. These regular observations help teachers and other participating partners address the individual needs of the children apart from standard tests and to identify their strengths and weaknesses.

Reading literacy is categorized into five competencies:



Diagram 9: The five reading literacy competencies



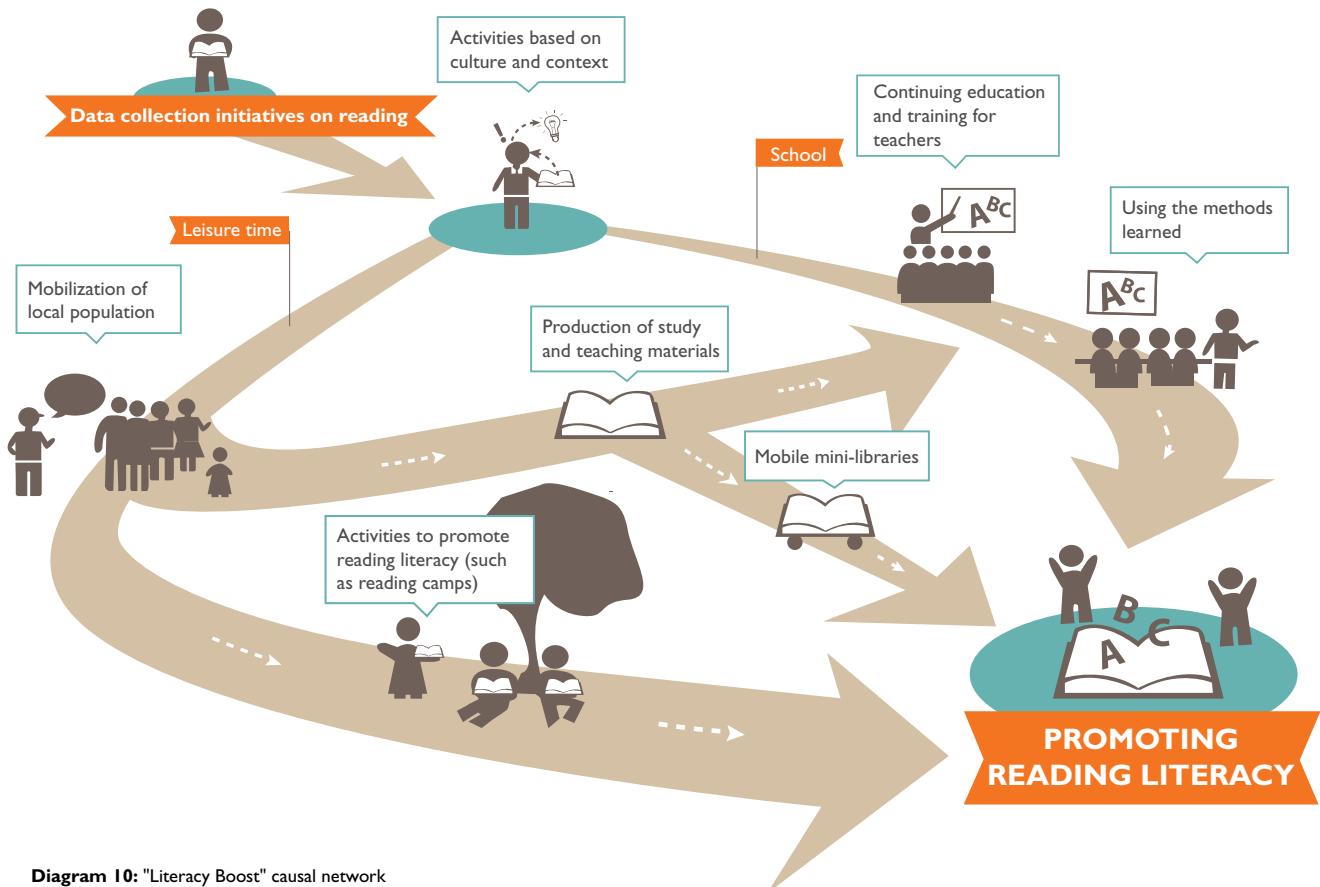


Diagram 10: "Literacy Boost" causal network

Naturally, the focus of these measurements is in school, however, we collect additional background information on the children's social environment to be able to observe the effectiveness in society throughout the duration of the program as well. In many countries the native language is not the same as the predominant language used in school. Often, people in one and the same area speak many different languages and dialects. We take this topic into consideration as well, before beginning with the project implementation. The project employees conduct a language analysis with the particular population group to determine the language in which the children can most successfully and effectively learn to read.

REGULAR CONTINUING EDUCATION FOR TEACHERS

Since elementary school teachers are all too often not sufficiently qualified, World Vision, with its "Literacy Boost" program, emphasizes continuing education and training. This teacher training program comprises nine modules and extends over a period of one school year. A slow and continuous approach makes it possible for the trained teachers to apply the acquired knowledge so that they can reflect on it and discuss it together. Elementary school teachers are taught useful learning methods that help them teach the children how to read effectively. Teachers can follow the five core competencies shown in the diagram as a guideline. The training sessions supplement the existing curricula which means that close cooperation with the individual education ministry is necessary.

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MOTIVATING PEOPLE TO READ

An additional and very important component of the "Literacy Boost" program is the effort to mobilize the population to read so that reading becomes a normal activity of the children's daily lives and does not only take place in school. With the help of World Vision, the local population produces their own reading materials to ensure that they are adapted to the specific language, culture and context. These reading materials are then made available to the people through locally managed or even mobile mini-libraries to ensure access to books during leisure time as well.

Once the necessary reading materials are available, the next step is to convey the pleasure of reading to the children so that they consider reading a leisure activity. Only then can children practice and continuously expand their reading literacy skills. We regularly offer a number of different activities to cultivate reading pleasure and increase the children's motivation. Some of those activities are: the assembly of so-called "Reading Buddies", reading camps as a way to provide care and supervision in the afternoons and on weekends, story reading hours or reading festivals that use songs, readings and games to let the children joyfully immerse themselves into the culture of reading.

Since 2011, World Vision International, together with Save the Children, has advocated for the jointly defined goal to increase the reading literacy of 500,000 girls and boys in 1,000 elementary schools in Burundi, Ethiopia, Kenya, Malawi and Rwanda. The evaluation of the "Literacy Boost" program in Burundi, for example, showed that students who participated in it were able to read much more fluently than students in the comparison group.¹⁵

"LITERACY BOOST" IN BURUNDI – A SUCCESS

In 2012, World Vision, when doing studies on the reading ability of children in Cankuzo province (Burundi), found that only 26% of 549 second-grade students in 28 schools demonstrated reading literacy. Since we implemented the "Literacy Boost" program, reading literacy skills have risen significantly. Our final evaluation in 2014 shows that participation in the education program is in direct relation to the children's improved reading and to the fact that we were able to classify 88% of them as "reading with text comprehension." In comparison to other schools, this was an outstanding result. It is also remarkable that especially girls achieved a high level of success and thus benefited in particular from the reading promotion program.

¹⁵ Hiebert, Linda (2016): FY15 Annual Management Report: WVI Education Transition Initiative.



Anick, 9 years old

Nine-year-old Anick is one of the girls who has participated in the "Literacy Boost" program since the second grade. She is now in the fourth grade. Her active participation in the reading program has led to a vast improvement of her reading literacy skills. In addition, her family now has a much higher opinion of education.

Anick's teacher is one of the 200 specially trained teachers in the "Literacy Boost" program. Since he received the training, he has rearranged his classroom to be student-oriented, and the room is now equipped with a wide range of appropriate teaching materials that promote the students' engagement and motivation while they are reading. Instead of reading to the children, he motivates them to read to each other.

In the afternoons and even on the weekends, Anick and her friends spend time in the reading camps. There, they sing and play, get to know stories, do crafts and have to constantly use their reading literacy skills with all the activities. Even Anick's father, Emmanuel, participated in the "Literacy Boost" training sessions for parents. There he learned how to actively support his daughter in learning. Since then he has asked her regularly, for example, what she learned in school, and he also takes the time to practice reading with her. Since he is so very impressed with his daughter's progress, he is now leading a "Literacy Boost" reading camp as a volunteer.



"I love reading and I love school. The teacher does a great job teaching us. He is very friendly. That is why I love school so much."

Anick



"Even before Anick attended school, she started to learn because she was participating in "Literacy Boost" reading camps. When she started attending school, she was already ahead in learning."

Emmanuel

6 / TAKING A CLOSER LOOK



6.1. / **SUSTAINABILITY – WHAT WE CAN LEARN FROM EX-POST EVALUATIONS**

As a result of our first impact report we conducted two ex-post evaluations last year. We would like to better understand whether the changes we achieved endure, and how the people in our project areas use the acquired knowledge in the long term and without the support of World Vision. Below, we would like to present excerpts of some results and findings from two projects.



Ex-post evaluations are studies that are done some time after the end of the project.

In addition to details about the sustainability of the changes, these ex-post evaluations provide us with information on potential improvements in other, ongoing projects.

Since the time and financial resource investments required for this type of evaluation are relatively high, we conduct it only rarely. Also, the findings are only of limited benefit to the community. Instead, they are mostly for accountability and organizational learning. Despite thorough precautions and transparency, conducting surveys in the project region often also gives rise to expectations that new projects might result from it. These expectations cannot be met, however, and therefore a high level of transparency and respect toward the local population is crucial.

MPANDA, Malawi

Duration:

1998–2013

External ex-post evaluation:

2015

Funded by:

World Vision Austria and World Vision Germany



MPANDA, MALAWI

The Mpanda regional development project ended in 2013 after a duration of 15 years. The project area included 36 villages with approximately 27,000 people. We used the following methods for the ex-post evaluation that was funded by World Vision Austria and World Vision Germany: Repetition of the representative household survey of 2010; analysis of secondary data from state institutions; and visually moderated group discussions. The evaluation team consisted of an external consultant, World Vision employees and – what was especially important to us – former local partners and target group representatives who were to be closely involved.

Education

According to previous initial data collections, there was barely a school infrastructure in place at the beginning of the project. The majority of classes took place outdoors. The number of children regularly attending school was increased from around 57% at the beginning of the project (1996) to 80% (2010) – with a continuing upward trend. In collaboration with local actors World Vision was able to build a total of 56 classrooms at various elementary schools, which is currently 75% of the elementary school infrastructure in the project area. In addition, we built a secondary school using special funds and heightened the awareness of families with regard to the importance of education. The result is that more and more students from the project area attend a secondary school (1996: five, 2010: 117, 2015: 159 students).

Spot-check visits have shown that all school building continue to be used. Necessary repairs, however, are done by the local people themselves. They mostly have only local materials available, making significantly more repairs necessary. The majority of the school committee members perform their tasks and advocate for more support for education from the government and the population. However, the population growth is a major challenge: Key figures for elementary schools show a negative trend, and more and more students have to share classrooms, school desks or toilets and other items. Investments in school buildings and classroom equipment cannot keep pace with the population growth.

Water and Health

In close cooperation with national authorities and partners, World Vision drilled 18 wells and rehabilitated 17. Experts provided repeated training for water committees and technicians. Thus, the activities of all actors in Mpanda contributed to the fact that 100% of the population continue to have access to safe drinking water today. This significantly reduced diseases caused by contaminated water, such as diarrhea. The evaluation also showed that water committee members are capable of competently maintaining and repairing the wells. In this sector, too, however, the rapid population growth results in increasingly longer wait times at some wells.

Food Security

We have not succeeded in developing an agricultural cooperative in Mpanda. The previous structure which World Vision wanted to use for the cooperative had for years been responsible for the distribution of improved seeds and fertilizer, among other things, to farmers. This practice was meant to contribute to food security, however, led to expectations that contradicted and stood in the way of the more sustainable approaches of a cooperative. Consequently, there are no longer any activities to propagate seeds and promote drought-resistant crops and varieties, such as boosting irrigation.

Voluntary Commitment

The willingness to volunteer for the development of communities seems to be declining. The crucial factor was likely the common practice used by development organizations to reimburse participants in training courses or volunteers for possible expenses (such as reimbursement for travel costs and providing meals and drinks). After the end of the project and the departure of World Vision these particular incentives disappeared and consequently, people either stopped attending training sessions conducted by government institutions or attended them less frequently.

LA MALACATECA, Guatemala

Duration:

1998–2012

External ex-post evaluation:

2015

Funded by:

World Vision Germany



LA MALACATECA

World Vision worked in 15 communities in this project region in the western part of Guatemala from 1998 to 2012. The main focus of our project work was on the health, education and economic development sectors.

A German consultant (CEval consultancy) conducted the evaluation together with a Guatemalan partner (Consulta). The evaluation was designed to be quasi-experimental with a comparable control group outside of the project area and a mix of methods consisting of qualitative data collection methods (group discussions, individual interviews, household surveys).

Context

The analysis of secondary data showed that the government has taken hardly any measures or no measures at all in this region. What complicates data validity and the sustainability of the results is the political situation in the country between the time of project conclusion and the date of the study. This led to a general sense of uncertainty and culminated in the collapse of the government. Years before the government was already severely neglecting the health sector, and, for example, did not make vaccines available; as a result, the health sector collapsed almost entirely.

Economic Development

The evaluation showed that some aspects of our project work bear fruit in the long term. This includes beekeeping, which even today provides many families with an income. On the other hand, chickens are raised, differently than intended, only for subsistence farming and the concept of fish farming exists in only one case. This showed us that the production communities approach – once conceived for mutual support, to lower operational costs and to increase production output – did not work. According to the respondents, the engagement and commitment shown by the participating families differed too widely to make an equitable distribution of income possible. On the other hand, the direct contact between beekeepers and the large "ACOPIASUR" cooperative was a success. For even as individual producers, the beekeepers continue to deliver their products directly there, demonstrate a high technical standard

and high-quality products and thus, according to information obtained from them, also get premium prices.

Health

The so-called "Madres Guías" (mothers as role models) concept proved to be a similar challenge in regard to the sustainability of the collaboration with groups. While these mothers continue to exhibit a high degree of knowledge of child care, health and education, they no longer pass their expertise on to other mothers in an organized manner. Even of the early support centers launched together by World Vision and the mothers and managed mostly by the mothers, only two out of five continue to be operated independently. The main problem we identified was the women's lack of ability to self-organize. In the course of the project the women were a well-functioning group and worked without any salary or other compensation. Today, the only reason they gave for ending the groups was a lack of management. However, all the women confirmed that they pass on their knowledge to other women – but also fathers – in the family and in their neighborhoods.

Besides the training the project made available, this might be an additional reason for the fact that significantly more mothers in the project areas feed their babies breast milk exclusively up to the age of six months (49.3%) compared with the control group (12.5%). Also, more women received tetanus vaccinations during their previous pregnancy (79.7% compared with 72% in the control group), and 66.2% of women are aware of the dangers of sexually transmitted diseases (51.5% in the control group).

There has been a positive trend in terms of the nutrition of children under the age of five, however, the increments are small. As an example, a total of 57.6% of children were chronically malnourished in 2012, while in 2015 the number was 50.8%. A national comparison showed chronic malnutrition percentages at 59.9% in 2012, 58.2% in 2013 and 60.6% in 2014.¹⁶ In addition, the percentage of underweight children decreased from 18.6% to 14.2%. According to data provided by the Guatemalan government, the national comparison rate for 2014 was 15.6%.

Education

The field of education, too, did not remain unaffected by the political turmoil of the past few years. For example, school was canceled repeatedly and the teacher training, too, could frequently not take place. Teachers confirmed in the discussions the lack of materials and personnel as well as the lack of support by the government. This may be part of the reason for a deterioration, instead of an improvement, of the educational situation of the children in the project area. For example, in 2012 87.8% of children between the ages of seven and 13 attended school regularly; in 2015, the percentage dropped to 78.4% (just as the control community at 77.9%). Also, the number of chil-

dren successfully graduating from elementary school between the ages of 12 and 13 declined from 57.4% to 40.4%, however, is still well above the control group percentage of 26.7%.

The parents surveyed in the project region continue to demonstrate a high level of commitment and interest in the academic performance of their children and are involved in many parent-teacher committees and parent councils. Together, they launched several small projects since the conclusion of the project, such as the construction of new toilets and the renovation of classrooms. In one community, parents even joined forces to pay for a missing teacher.

Indicator	Baseline 2012	Ex-post 2015	Control group 2015
Percentage of infants breastfed exclusively during the first six months of life	No measurements	49.3%	12.5%
Percentage of women who received at least one Tetanus vaccination during their last pregnancy	59.1%	79.7 %	72%

Table 10: Comparison of data for target and control groups

WHAT DID WE LEARN?

Methodologically, we learned that the systematic collection of data during the life of project in regard to the sustainability contributes substantially to the validity of ex-post evaluations. In both evaluations presented, monitoring data and information on external factors – influencing the projects – were frequently lacking. Those should be available throughout the entire duration of a project. In addition, there should be documentation on other actors who are active in the area and contribute to the children's well-being. The methods and data that previous studies were based on (e.g., sample size and selection) must be documented. Both projects were based on a causal network for only the last few years that allowed the evaluators to understand what effects were intended. Equally, both projects lacked clearly defined sustainability objectives and related indicators. All these factors reduced the validity of the two evaluations and impeded the work of the external evaluators. It was also interesting to see that the quasi-experimental evaluation concept used in the analysis in Guatemala raised many questions regarding the comparability of target and comparison groups, but provided few answers.

In Mpanda and La Malacateca, infrastructure activities in combination with the strengthening of local structures led to sustainable positive changes, such as the construction of wells and the training of water committees. On the other hand, our cooperatives approach in the agriculture sector was not successful in either case. In this regard we will have to give more targeted support to the local structures in regard to their sustainability and also have to take into consideration possible socio-cultural

(such as obstacles to collaboration) and organizational (roles and responsibilities) factors.

Both examples show that it is often not enough for local actors to simply be entrusted with the changes achieved by a project. To maintain long-term positive effects, in particular in the context of a growing population and a changing climate, local actors need to have stronger skills to be able to respond to new challenges even without World Vision. These external factors, such as population growth or the political situation in Guatemala, would have to be taken into consideration more systematically during project planning and monitoring. Still, the question for us is how to deal with such massive external challenges in the future.

¹⁶ <http://www.prenslibre.com/guatemala/comunitario/piden-que-se-evaluen-estrategias-para-reducir-la-desnutricion-cronica>

¹⁷ <http://www.sesan.gob.gt/index.php/ncopas/item/1424-guatemala-reduce-desnutricion-segun-indice-global-del-hambre-elaborado-por-ifpri>

6.2. /

EXAMINATION OF THE EFFECTIVENESS OF THE SPONSORSHIP APPROACH IN REGIONAL DEVELOPMENT PROJECTS

Despite the large number of sponsorship projects, there has not been any more detailed information so far on the interaction of activities in sector projects, such as health or education, and World Vision's sponsorship concept. Also, World Vision has up to now not examined in detail what changes our sponsorship approach brings about in sponsored and non-sponsored children. Many of our statements on child sponsorships are based on assumptions and local experiences. The Child Sponsorship Research Project (CSR) evolved due to a lack of long-term, systematically collected data on the performance and impact of our child sponsorships. As part of this project, internal and external experts conducted eight evaluations of sponsorship projects in five countries.



Diagram II: Overview of the evaluated projects with regard to the effectiveness of the sponsorship approach



CHILD SPONSORSHIP PATH

Focus of assistance on ...

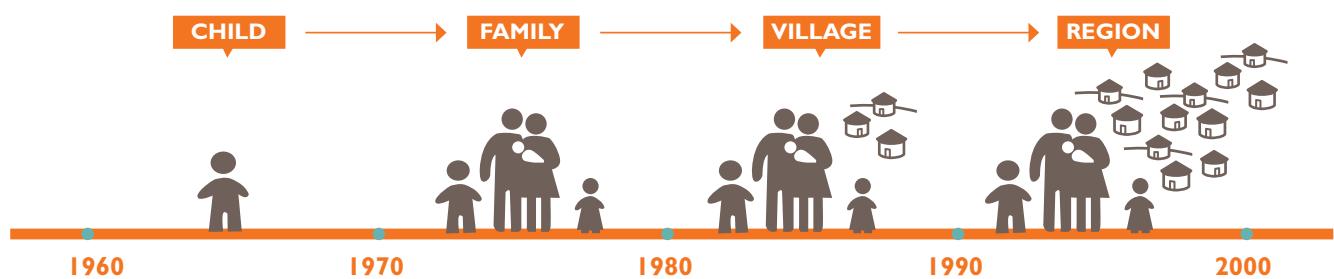


Diagram 12: Change in the World Vision child sponsorship approach over the last decades

SPONSORSHIP IN DEVELOPMENT COOPERATION PROJECTS

We implement projects together with the local population in a way that directly benefits the well-being of all children in a particular region (sponsored and non-sponsored children). The local population is closely involved in the planning and implementation of the activities. In the past, we often even invited sponsored children to meetings to facilitate the communication with their sponsors, to write letters to their sponsors together or to prepare development reports. Now the World Vision staff tries to integrate these activities into other events. Sponsored children have the opportunity, for example, to write letters to their sponsors while they are at a reading camp. This means that there is not yet another need for the children to get together; on the other hand, it increases their interest in events such as reading camps, theater or drawing contests. What can we learn from the eight evaluations today?

COMMUNITY-BASED APPROACH IN SPONSORSHIP PROJECTS

The partnership principle is the core element of our work. We closely involve local people and organizations in the project area in the development and implementation of our measures. Existing organized groups and structures working for the well-being of children need to be strengthened so that they can take on more responsibility during the project. So far, we have little information about the merit of the implementation of this participatory approach and whether it actually contributes to a sustainable improvement in the well-being of children.

The results of the study show that all eight projects use a systematic approach that involves local actors and the local population. In Armenia, for instance, we invite government partners and target group representatives twice a year to discuss and plan joint activities. We support children's clubs, and project staff and local partners actively involve them in the planning and implementation of activities.

Besides the encouraging examples of how these partnerships contribute to effective local change processes, the data gained from the evaluations suggests that World Vision should be arranging this collaboration on a more long-term basis. Often, the cooperation with local partners is defined by short-term instead of long-term and sustainable goals. There are also some cases where the collaboration even promoted the local partners' dependence on World Vision. These challenges are most likely related to the following considerations: Many local organizations and groups working locally with World Vision are fragile and stagnant in their development or dissolve after the end of the project. This puts the projects' achievements at risk. For us this raises the question whether local partners are empowered enough as part of the sponsorship funded projects to continue local change processes.

COMMUNITY-BASED APPROACH IN SPONSORSHIP PROJECTS

Another question the study looks at more closely is how well-balanced the benefit is that families with sponsored children and families without sponsored children get from project activities. On this topic, an encouragingly balanced picture emerges in four out of six projects.

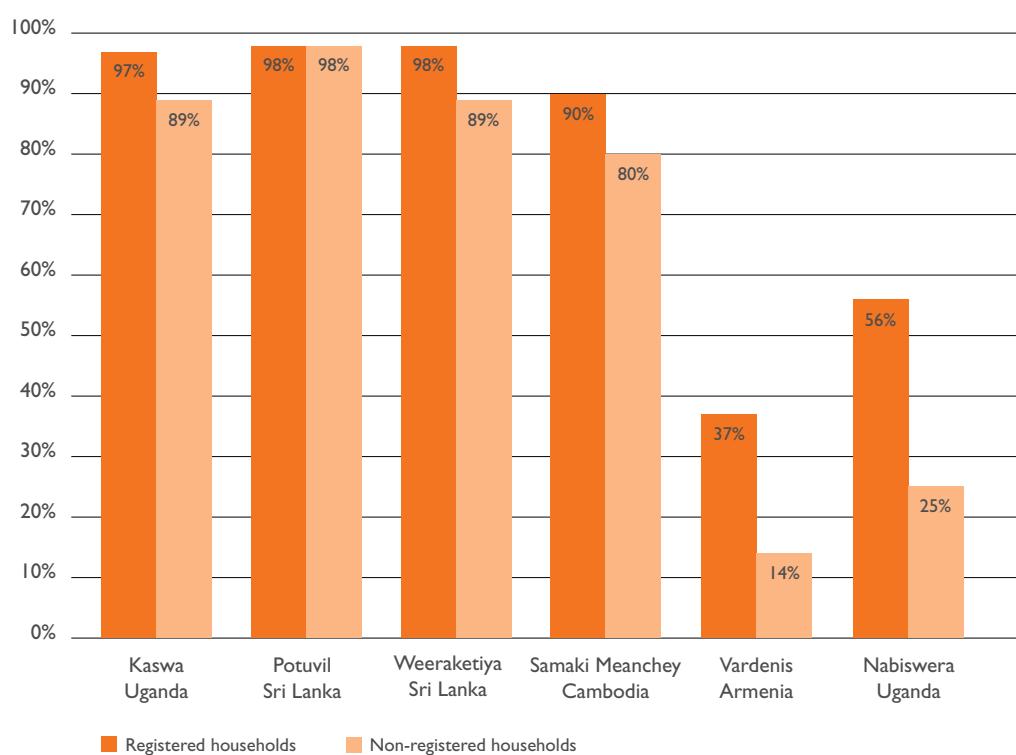


Figure I: Households with and without sponsored children who participate in project activities



Armenia is a special case. The data on Armenia suggests that the World Vision staff and their partners have difficulty informing the entire population in this post-socialist context about the breadth of the project. In the regional development project "Vardenis", only 37% of families with sponsored children and 14% without sponsored children indicated that they participated in the project. This is surprising because in the Vardenis project we conducted project activities evenly throughout the project region.

Therefore, how can we explain this presumed contradiction? According to the evaluation report, there are only few civic structures that project employees can collaborate with, thus making it impossible to involve the majority of the population. This entails that the awareness level of the project is low despite the many activities we conduct with local partners and government structures, and families are often not informed about all the project activities although their children may benefit from child protection activities, for example, at school. This example also reveals, however, that in situations such as those we have in Vardenis we have difficulties getting families to participate in spite of largely effective interventions. Local colleagues and partners will have to try to increase these efforts in the coming years in order to promote sustainability of our activities.

The study also shows that households benefit from various sector activities in all projects. In all eight projects, these were, at a minimum, health and education activities. The study recognizes potential for improvement in the systematic integration of the individual sector projects to take advantage of potential synergies. World Vision will have to consider this need to a larger degree in future planning processes.

SELECTION OF SPONSORED CHILDREN

In all eight projects, representatives of the local population selected the children to be sponsored. According to the external evaluators, the projects have also used transparent processes to identify the most vulnerable among the children. When making the selection, we also followed internal guidelines to ensure that the children's guardians were involved in the decision. However, the methods used differed considerably. While local authorities were involved in Bolivia and Cambodia, health center employees were included in Armenia, and in Sri Lanka, in turn, local organizations were part of the process.

However, the evaluation teams found in all evaluations that not all locals understand the selection process for child sponsorships although local actors were involved. This appears to be a question of transparency and communication. Hence what World Vision can do to ensure that the information reaches a larger section of the target group.

Additionally, it does not always appear to be easy to sign up the most vulnerable children for sponsorships. This could be because the children have no permanent home or because they live in very inaccessible areas inside the already remote project regions. This makes it difficult to meet with the children every 90 days in accordance with guidelines to, among other things, check on the implementation of our measures to improve the well-being of the children. For this topic, the evaluations show that efforts must be stepped up to successfully integrate the most vulnerable children into our program work.

MONITORING THE SPONSORED CHILDREN

The regular meetings with the sponsored children were conducted very differently across the eight projects. In Cambodia the first visit was at the homes of the sponsored children. This allowed our employees to get to know the living conditions of each family and the child's or children's situation. Subsequently, we made targeted visits to the children and their guardians, for example, as part of informational campaigns on the topic of health, and asked sponsored as well as non-sponsored children about how their health situation (or life situation) has changed since World Vision came into the area. This deeper involvement of the sponsored children in project activities seems to produce some initial success. The evaluation reports indicate that the targeted integration of sponsored children into our program work promotes child protection awareness among parents and local authorities and greater appreciation in general among children. As part of monitoring the sponsored children we observe, among other things, how the children's health status and their access to education change. This data might also provide information on the sector-related work of the sponsorship projects. However, the evaluations provided an unclear picture of the benefits of the data collected from the sponsored children for the analysis of the developmental policy project activities. In some projects, for example, the data was unfortunately used mostly for the individual support of the sponsored children. The Vardenis project in Armenia, however, takes it a step further. The project staff invite the local actors twice a year for an event on the topic of health and child protection to jointly discuss the data and potential consequences for future project activities.

PERCEPTION OF SPONSORSHIP

The local population views sponsorships very differently. Some families, for example, have associated child sponsorships with gifts and letters, while others link them to changes in the living conditions in their environment. In some of the projects the families indicated that sponsorships promote jealousy among the project population – surprisingly, the jealousy was much less prevalent between sponsored and non-sponsored children than between sponsored children or between their families. This seems to be related to the quantity or value of gifts and special donations. In Ghana it happened occasionally that families distrusted the project staff when they did not bring special donations over a longer period of time. Project staff reports that for this reason they prefer community donations over individual donations for families.

*"I feel safe because I have a friend
in a far-away land,"*

says a sponsored child from Vardenis, Armenia.

We already responded to these observations in the past few years. As a result, special donations from 150 to 2,000 EUR are now disbursed for the benefit of the village community of a sponsored child, for example, by providing better health care or support for children's clubs. Contributions between 75 and 150 EUR benefit a sponsored child directly and suggest meaningful presents like a goat or savings accounts. Also, it is best when gifts can be divided among several children. Most of the sponsored children have indicated that they enjoy participating in a sponsorship program. The data shows that sponsorships bring with them a range of experiences for the children. The children stated, for example, that they feel safer, more loved and also connected with the rest of the world. Letters from sponsors and gifts in particular seem to strengthen this bond.

On the other hand, sponsored children also expressed disappointment when they noticed that other children's sponsors write more frequently or make more generous gifts. To show sensitivity toward families with these expectations will most certainly remain one of our big challenges.

OUTLOOK

The analysis at hand provides preliminary relevant evidence on well-functioning processes as well as challenges in our sponsorship programs. The evaluations resulted in recommendations that can be taken into account for the individual projects in the new planning cycle as well as on an organizational level, where the recommendations can be implemented in handouts and specific tools to allow us to shape our sponsorship project work more effectively and permanently. We hope that this will in the future contribute to a better integration of the sponsorship approach into our sector work. We have already intensified the participation of children in our project work over the past few years, and it is starting to pay off. One endeavor resulting from these eight evaluations is the conduct of in-depth studies by external scientific institutions in the next two years to obtain more valid information on what factors lead to certain changes.



DATA VALIDITY LIMITATIONS

In all evaluations we have used rigorous methods that were approved by an external Ethics Commission in the individual countries. Nevertheless, we must note that World Vision, while conducting the evaluations with external experts, has performed them in collaboration with World Vision employees. Also, the overall report for all eight evaluations was written internally by World Vision. Therefore, the presented results do not have the same degree of validity an independent scientific investigation would have.



6.3. /

IMPACT STUDY ON CHILD CARE CENTERS IN HUMANITARIAN AND EMERGENCY AID

As part of the emergency relief it provides, World Vision sets up so-called "Child Friendly Spaces" (CFS) in conflict areas or after natural disasters. "Child Friendly Spaces" are child care centers where girls and boys can play and learn together on a daily basis. There, World Vision makes standardized CFS kits available that consist of different modules containing games and crafts materials, sports equipment, musical instruments and learning tools for different age levels. Child Friendly Spaces can facilitate the children's (re-)entry into the regular education system as needed and depending on age group and previous knowledge, and provide them, in these exceptional circumstances, with a child-friendly daily routine and development opportunities.

While today many aid organizations use CFS to improve the children's psychosocial well-being and their protection in emergency situations, there have been only few robust reports on the impact of CFS. Against this background, World Vision has initiated a three-year research project in collaboration with Columbia University, Save the Children and UNICEF to analyze and document the impacts of Child Friendly Spaces. Between January 2012 and September 2014, we conducted six evaluations in five countries in Africa and the Middle East to determine the effect of CFS run by various organizations in the various crisis areas. Of the total of six projects, three were World Vision projects.

"Here we can talk with the CFS staff

about our worries and receive good advice. The cooperation between children and staff is good. At the camp it is difficult to speak with adults; they don't have time to listen to us."

Group discussion of boys (13–17 years old) in Bulengo, D.R. Congo

As part of their initial evaluations, researchers assessed the children's situation prior to their attendance at a CFS and also the situation of a comparison group of the same age outside of the project area to identify the impact of CFS. This methodological approach makes it possible during future data collection efforts to trace back possible changes in girls and boys to their attendance of the child care centers.

EFFECT ON THE PSYCHOSOCIAL WELL-BEING OF CHILDREN

All studies came to the conclusion that attending a Child Friendly Space generally has a positive effect on the psychosocial well-being of children. There are, however, significant differences in the studied Child Friendly Spaces in terms of the impact. The main reasons for this are the local context, age, gender and the quality of the offered programs. We achieved the most far-reaching effects in Uganda, the most insignificant effects in Ethiopia. On the one hand, this was the case in Uganda because the focus there was on psychosocial activities, while in Ethiopia literacy programs were emphasized. The studies further showed that the effect on the psychosocial well-being of younger children was significantly higher than the impact on older children. It was also more difficult to motivate older children to attend a CFS. For this to succeed it is necessary to develop innovative activities in the future.



There is also a significant difference in the impact on younger girls in comparison to boys. As shown in the following graphs, the impact on girls is higher. Here, too, it is important to support program innovation and provide more support to boys.

It appears that one of the factors that had the most impact on the psychosocial well-being is the quality of the programs and activities offered at Child Friendly Spaces. There are established quality standards and guidelines for this. The more efficiently these standards were implemented, the greater the impact of the measures. The following study in Uganda demonstrates this:

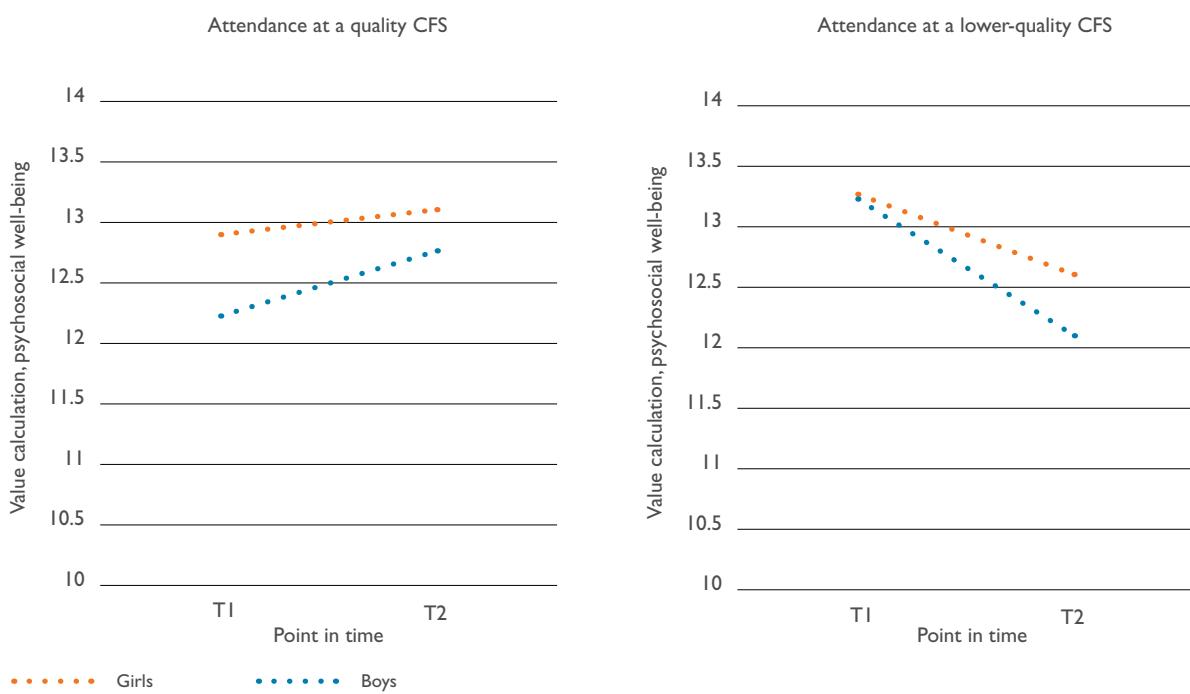
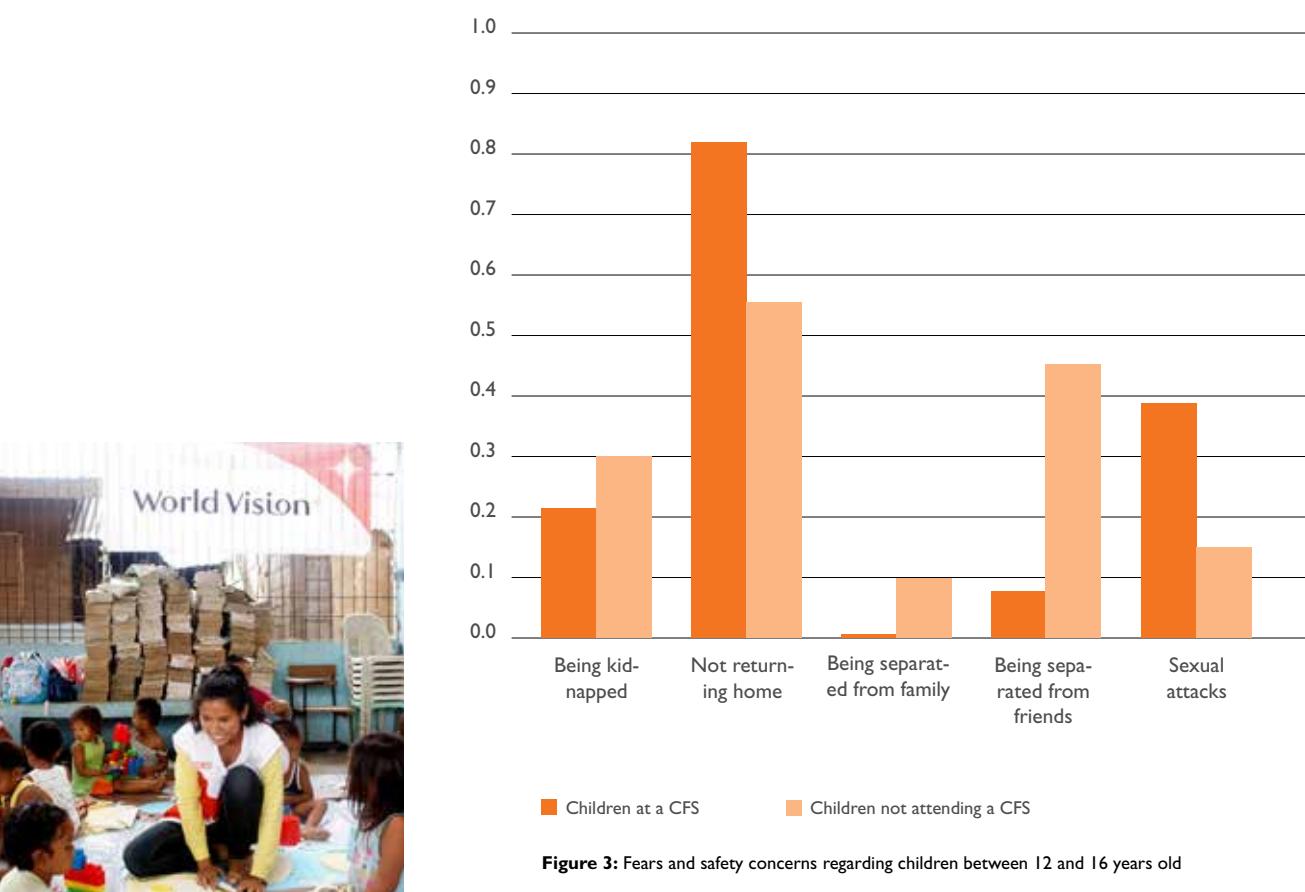


Figure 2: Psychosocial well-being trends for girls and boys (6–12 years old) attending a CFS, disaggregated by CFS quality level

Based on psychosocial aspects, the situation of children in day care centers that do not conform to quality standards is worse than it was at the beginning of the project. Thus, it appears as though the project cannot absorb all stresses the children are exposed to. However, the situation of children who in the same time period did not attend a child care center, is comparatively even worse. Attending a center seems to at least alleviate the stresses the children are faced with.

CFS EFFECTIVENESS IN IMPROVING CHILD PROTECTION

All studies confirmed that attending a CFS had a positive impact on the protection of the children, but only to a limited extent and with major differences. There were two main factors for this: the local context, i.e., in this case, the location of the CFS, and the gender. This was most striking in Iraq. As was revealed by the study with a comparison group of children not attending a CFS, the journey to Camp Domiz involved high safety risks (in particular, the risk of sexual assault) for the children. In this case, parents and caregivers stated that the centers contributed little to the children's protection or might even have had negative effects due to the dangerous journey to the centers. To illustrate this, the percentage of young people between the ages of 12 and 16, who were afraid of sexual harassment and were attending a CFS, was almost twice as high as in the comparison group. Also, the percentage of children who were fearful of not getting home safely had clearly increased:



Altogether, the success of the child care centers in providing more child protection is highly dependent on their location in a given local context, such as a refugee camp. All centers were able to achieve greater success with girls than with boys in regard to protection measures. In Ethiopia, the concern for the safety of children between the ages of six and eleven years (fear of attacks, kidnappings, sexual violence and rape) barely changed between the two data collection times. By contrast, the concern of parents with children of the same age group that did not attend a CFS increased drastically.

CFS IMPACT ON THE CAPACITIES OF THE LOCAL POPULATION

All evaluations came to the conclusion that the existence and operation of child care centers were barely able to improve the knowledge and skills of the local population in regard to child protection and the children's well-being. Although there were context-related differences as well, the overall result was so surprising because we had previously assumed that the centers had a positive influence on the development of community-owned child protection systems. In the future, it will be necessary to support a more effective and sustainable development of

community-based child protection systems by adopting innovations in the CFS, where possible. This is, however, a major challenge in view of the often temporary emergency aid and the high mobility of the population.

CONCLUSIONS AND IMPLICATIONS

The studies have established that CFS are, in many different contexts, not only protected spaces for children, but have overall positive effects on the lives of children and their families, in particular on the psychosocial well-being and in the area of child protection. However, these effects are less pronounced than originally assumed. The centers had positive effects on the children if the caregivers had received educational training and if psychosocial activities were offered. The nature and intensity of the activities and the relationship between the caregivers and children appear to greatly influence the impact child care centers have.

Furthermore, the quality of the centers' programs is of crucial importance. All studies provide proof that complying with and implementing existing quality standards significantly augments the impact Child Friendly Spaces have. Those that invested in quality assurance and monitoring measures were more effective. It is necessary to pay more attention to the compliance with these quality standards and to continuously expand them in the future.

The evaluations show further that Child Friendly Spaces have to offer activities that adequately take into account the particular local context – both in terms of the geographic location of the child care centers and the safety aspect, as well as in regard to the specific risks the children are exposed to. With respect to the local context, the studies show that a CFS in a relatively isolated refugee camp with few leisure time options for children has to have a different concept than one in an urban environment with a significantly larger offering of activities, where, however, better protection mechanisms must be put in place for the children, as more complex security risks exist. It is necessary to analyze these factors and consider them in the concept design to optimize the impact of a CFS. The studies show that child care centers in urban areas need innovative concepts.

As already mentioned above, all studies confirm that these CFS programs need to be innovative, particularly to reach out to older children with meaningful activities. All centers we assessed showed more significant effects on younger children. We encourage the involvement of teachers and educators in the CFS program development in the future to reintroduce the children attending the centers earlier and more quickly to the formal education system, which is often missing in the immediate aftermath of disasters.

Finally, all the studies conclude that only long-term evaluations provide actual information about the sustainable effects of care center activities. Longer-term studies on the children's development are necessary before we can give credit for increased knowledge, psychosocial sensitivities and behavioral changes to the measures taken at a CFS.

"We have a place we can go to during the day where we feel safe,"

report some boys (6–12 years of age) in Bweremana, D.R. Congo



"CHILD FRIENDLY SPACES" IN GERMANY – A RESPONSE TO THE CURRENT REFUGEE SITUATION

As part of our refugee aid in Germany, World Vision, together with local partners, has been supporting children living in refugee accommodations by providing Child Friendly Spaces since the fall of 2015. With this program, World Vision makes standardized CFS kits available to its partners; the kits are usually used in crisis and disaster areas throughout the world. The materials can, as needed and according to age group and prior knowledge, facilitate the children's entry into German preschools and schools. The child care facility at the welcome center in the town of Oberursel, for example, provided a place of retreat for mothers and children away from their mass accommodations. Together with their partner Kirche in Aktion, World Vision has also set up a mobile child care center to ensure that children not living in urban areas can be reached as well. We used a converted minibus to transport the CFS kits to various locations in rural areas where children may use the play and learning materials for hours.

CHILD FRIENDLY SPACES

Findings from six studies: What influence do Child Friendly Spaces have on children?

1

They have a greater effect on girls than on boys



Finding: conduct activities that involve boys to a greater degree



2

They are better suited for younger children than for older children



Finding: offer activities that are better suited for older children

3

Range of activities offered lack variety



Finding: adapt activities to a particular context (e.g., war, escape, famine) and ensure quality

4

Attendance is low due to dangerous routes



Finding: ensure safety on the way to the CFS

5

There are additional challenges in the city



Finding: design activities in urban areas to be more engaging

World Vision
Zukunft für Kinder!

CFS

6 STUDIES WERE CONDUCTED

IRAQ (2)

JORDAN (1)

ETHIOPIA (1)

D.R. CONGO (1)

UGANDA (1)



Interview with an employee at a child care center (CFS)

KATHARINA WITKOWSKI worked for World Vision from September 2015 to April 2016 at the Serbian border with Croatia and Macedonia. As the head of refugee aid, she coordinated the care of refugee children in Child Friendly Spaces there and distributed aid supplies and hygiene articles.

What does your work with refugees in Serbia look like?

Around 5:00 a.m., my two teams and I drive to the border. There we set up our food distribution station where we hand out packages with water, food and hygiene items to families. At the same time, our second team opens the CFS. Later on I meet with other aid organizations and the UN Refugee Agency to determine how many refugees we can expect to arrive that day. Then I check to see if we need additional food and other aid supplies, including diapers, baby lotion and toys, and place the orders.

In the evening we prepare for the next day and load our trucks with aid supplies and food again. Everyone pitches in. We create a plan for each team to split our crews up as well as possible so we can help as many refugees as possible at the various border crossings. Then we have a few hours to recharge. This is very difficult for all of us, however, since we know that many families from different war zones continue to arrive in Serbia during the night.



"We were able to observe the little ones starting to relax after only a few minutes at the CFS. There they were allowed to just be kids again who laugh and play."

Katharina Witkowski

How would you describe the benefit of the CFS for children and families?

Since November, refugees have had to wait for up to four hours for trains to take them across the border to Croatia. Our CFS was the only facility for children at this border crossing, and was therefore very popular. Additionally, it was the only room with heat that was also decorated nicely and with colors. Many children were beaming when they walked into our tent. Refugees never know where they will sleep next and if there will be food somewhere. This journey is very traumatic for children. We were able to observe the little ones starting to relax after only a few minutes at the CFS and being allowed to just be kids again who laugh and play. Our psychologists have been offering individual support to children whose particularly traumatic experiences were reflected in their drawings.

What are the challenges?

Since March 2016, all borders on the Balkan route have been closed. Now many refugees are stuck in Serbia, and we are facing new challenges as well. We are currently revising our program and will soon be offering simple educational activities for children and adolescents so they can learn how to read and write.

It is very difficult for us to witness that many of the children are severely traumatized. We got to know a little boy from Syria, for example, who was still wearing his orange life jacket. His mother told us that her son had been so fearful since the ocean crossing by boat that he hasn't taken off the vest since. We also see more and more children and adolescents traveling without their parents, and we try to reunite them with their families. So far, we have succeeded each time!

How much of an influence does a CFS have on the safety and well-being of the children?

When the border with Croatia was closed in October 2015, there were violent clashes right in front of our CFS. My team and I holed up in the CFS tent with the children. The children remained calm and played. Later I looked out through an opening in the tent: A number of men had formed a chain and had positioned themselves in front of our tent to protect the children and our team. It was very emotional to see that in such a difficult situation and without much communication between all parties involved it was clear to everyone that no harm should be done to the kids by any side.

What was your best experience at a CFS?

My most beautiful experience was two years ago at a CFS in South Sudan. We were at a refugee camp with 20,000 people and operated the only CFS there. The situation was devastating: There were occasional attacks on the camp, many families did not even have a tent, there was hardly any food and water and cholera was rampant. During the rainy season, the entire camp turned into a single mud bath. But in front of the CFS, barefoot children danced, sang and frolicked. Tears gushed out of my eyes. It was so wonderful to see how a tent surrounded by mud and in the midst of war and poverty had such a big effect on the children – that is, that they were able to just be children and forget everything around them for a moment. I never expected so much joy and laughter by children in all of this cruelty and suffering. It was so nice to see what we can achieve with a CFS!



7 / ASSESSMENT BY CEval

7.1./ **ASSESSMENT OF EVALUATION QUALITY BY CEval**

In 2014, World Vision Germany for the first time tasked the Center for Evaluation (CEval) with the implementation of a meta-evaluation. The goal of this meta-evaluation was to review the quality of the individual evaluation reports on the basis of the assessment dimensions of input and inclusion, transparency, appropriateness of methods, methodology, triangulation, identification of project contribution and satisfaction of World Vision's information needs and then to conduct an assessment of the impact reporting for World Vision. World Vision Germany published the key findings of the meta-evaluation in Impact Report No. I in 2014¹⁸.



*The Center for
Evaluation (CEval)
is a research,
consulting and
training institution
based in Saarbrücken*

In 2016, CEval again evaluated the quality of now 29 evaluation reports from financial years 2014 and 2015. In this review, the assessment dimensions used in the previous study were again used as a basis, but were expanded to include the criterion called "Results presentation within the report." This criterion evaluates the format of the evaluation report. Is it, for example, arranged according to DAC criteria and/or a planning matrix? Is the analysis the basis of a causal network (theory of change) and is the overview table requested by World Vision at the beginning available with the most important quantitative results?

Based on the same principle as in 2014, CEval used a two-tier review process. In the first step, the criteria were reviewed on the basis of various sub-criteria using a four-level scale (from 1 = considerable improvement potential to 4 = good to very good). Since all sub-criteria were evenly weighted, the aggregate review in step two was done by calculating the mean value. In addition, CEval set up an overview of the use of innovative qualitative instruments and the use of special quantitative instruments¹⁹. They also studied how many evaluations included a comparison group and for how many evaluations we had used baseline data.

This year's meta-evaluation expanded the analytical framework by including use and usefulness of the evaluation results for our project work. Usefulness was then reviewed on the basis of an international, organization-wide, on-line survey of World Vision employees.

CEval invited 130 employees worldwide to take part in the survey. The invited employees were from different levels of the organization in project, country, supporter (such as World Vision Germany) and regional offices²⁰. According to World Vision Germany, the above mentioned number properly represents the relevant employees who deal with evaluations.²¹ The partly standardized questionnaire contained questions on the quality of internally available evaluations to compare the results of the document analysis with the employees' quality assessment. Therefore, some of the examination criteria that the document analysis is based on recur in the on-line questionnaire. In addition, CEval selectively studied qualitative data in particular on the use, dissemination, benefit and usefulness of the evaluation results.

The results of this year's meta-evaluation are very similar to the review done two years ago. Diagram 4 shows that just like then, the majority of the evaluation reports fulfills a large part of the examined criteria at least satisfactorily. This year, "Adequacy of the selected methods" (16 reports received good to very good ratings, 11 reports received satisfactory ratings) and "Satisfying information requirements" (eight reports received good to very good ratings, ten reports received satisfactory ratings) are once again the criteria that received the highest ratings. Furthermore, numerous evaluations continue to have improvement potential in terms of input and inclusion, transparency, methodology, triangulation, identification of project contribution and presentation of results.

¹⁸ http://www.worldvision.de/_downloads/allgemein/14wbde.pdf (as of May 19, 2016)

¹⁹ For detailed on-line information on these instruments mentioned later in the text, please go to: <http://www.wvi.org/development/publication/functional-literacy-assessment-tool-flat> (as of May 23, 2016)

²⁰ See Annual Report 2015, pp.18 and 19, for an overview of the organizational structure

²¹ The overall report with the exact description of the sample selection will be available as of fall of 2016 on the website of World Vision Germany: WorldVision.de/wirkung

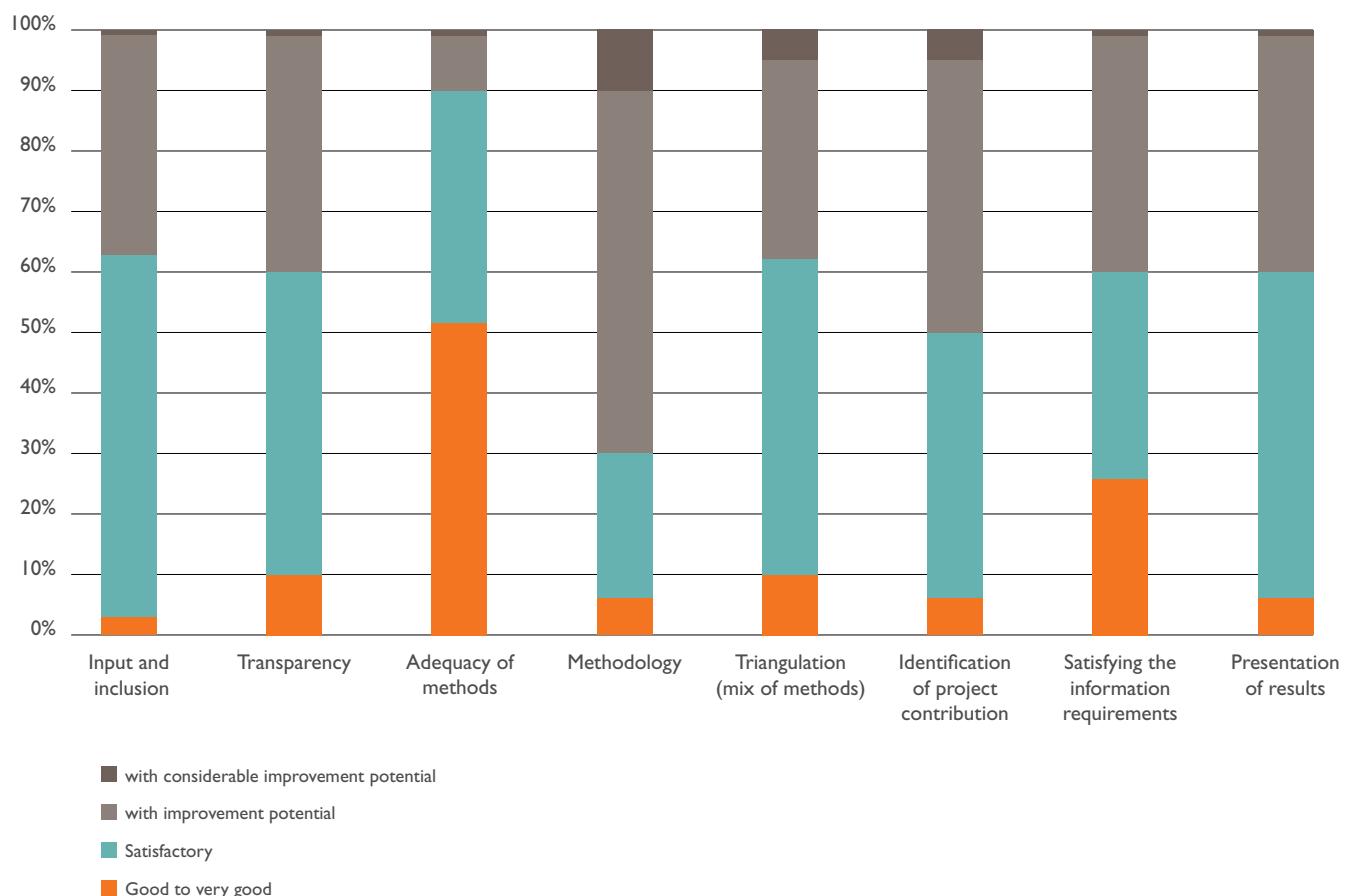


Diagram 4: Summary of results

What is striking is the progress made in the area of identification of the project contribution. This is due to the fact that we clearly attempted more frequently to make a comparison to a point in time before the program began. While we used baseline data in only half of the evaluation reports from financial years 2012 and 2013, we were able to make a comparison to a point in time before the program began with more than 80% of evaluations conducted in the current assessment time frame. In addition, we placed more emphasis on identifying and explaining positive and, if necessary, negative, unintended effects. We also made additional references to the influence of external factors, such as government development programs, activities of other donors or environmental changes. However, due to the mostly inadequate availability or quality of baseline data and the mostly lacking comparison with an adequate comparison group, we were not able to statistically isolate the positive or negative impacts caused by World Vision and thus were not able to clearly identify World Vision's project contribution.

Therefore, it is important to ensure that a control group is included and that valid baseline data is collected. Additionally, it is crucial that indicators can be compared in the follow-up study. Finally, it would be ideal to study the same households (panel survey).

It would also be helpful to present and explain cause and effect relationships in order to comprehend how the individual interventions were able to contribute to the identified changes. Most

of the reports, however, lack this impact logic model. CEval recommends that in future evaluation reports these relationships be presented briefly, and possibly graphically, to ensure that every reader can understand the evaluation result.

While World Vision mostly relied on the classical methods of focus group discussions and expert interviews to collect qualitative data, the use of specified quantitative data collection instruments increased significantly. The following table shows that especially the test for the classification of children as "functionally literate" was used far more frequently in evaluations during the last two financial years than in the 2012 and 2013 financial years. Also, the number of evaluations that used the Caregiver Survey and/or the Youth Health Behavior Survey (YHBS) as data collection instruments has increased significantly. In the current assessment time frame, the Caregiver Survey was used in almost half of the evaluations. The use of the YHBS has also increased significantly from 15 to 38%.

After providing this brief overview of the independent review of the evaluation reports and the use of data collection instruments, you will find a comparison of the results of the report review with the assessments of World Vision employees and an explanation of the additional results obtained from the on-line survey.

Use of World Vision's data collection instruments	Financial years 2012 + 2013 N = 34		Financial years 2012 + 2013 N = 29	
	N	In %	N	In %
Use of innovative quantitative methods				
Functional Literacy Assessment Tool (FLAT)	5	15%	21	72%
Development Asset Profile (DAP)	3	8%	7	24%
Caregiver survey	6	18%	14	48%
Youth Health Behavior Survey (YHBS)	5	15%	11	38%
Tool for measuring child growth	8	24%	9	31%
Use of innovative qualitative methods				
Comparison discussion group	4	12%	0	0%
Photo voice	2	6%	1	3%
Seed assessment	5	15%	2	7%
Ladder of life	3	8%	4	14%
Tree of change	7	21%	7	24%

Table II: Overview of innovative methods used in the evaluations

SURVEY ON THE IMPLEMENTATION OF EVALUATION RESULTS

The return rate of the on-line survey was approximately 50%. World Vision's national offices are the best-represented with slightly more than half of all survey participants.

The results of the survey show that World Vision employees tend to give better ratings for the criteria transparency, methodology, identification of project contribution, satisfying information requirements and results presentation than the team of experts did. However, it is important to take into consideration that both the basis of evaluation as well as the scale was different each time. While World Vision employees assessed different reports against different background experiences and expectations, the team of CEval experts made its decision based on 29 reports directed to World Vision Germany and with the help of a defined set of criteria.

Nevertheless, the continued weakness in identifying the project contribution that was found in the document analysis was verified. This criterion received the lowest rating in the answer to the question about the quality of the evaluations in regard to the above criteria. While less than 5% of survey participants give all the other criteria a rating of "Significant improvement necessary" (except methodology at 6.3%), 11% of participants express a need for improvements in regard to identifying World Vision's project contribution, and 14.3% even feel that significant improvements are necessary. For more than 20% of participants, the identification of our project contribution is only satisfactory. As we also found in the document analysis, the qualitative evaluation of the on-line survey results shows that in the eyes of our employees this is mostly due to the low quality of collected baseline date or even the lack of availability of such data. All respondents that commented on the assessment of this criterion also mention the absence of an adequate control group as a reason for the insufficient identification of our project contribution.

This finding is consistent with the participants' response on the question on the most important aspects of the quality of evaluations. 42.6% stated that the evaluation design is in first place. There is only one criterion – the qualifications of the evaluation team – that the survey participants mention more often as the most important criterion (45.1%).

In answer to the question regarding other factors that might influence the quality of evaluation reports, respondents stated the professionalism of the evaluation team about as often as the involvement of the intervention community or the beneficiaries in the evaluation process. Although two thirds of the respondents have already rated the usefulness of the recommendations as at least "good", the hope is that by discussing the results with the target groups World Vision will be able to derive more specific recommendations in particular, while at the same time ensuring the projects' sustainability by communicating motivating and positive results as well. In regard to the general quality of the evaluations, 57.4% observed slight improvements over the past two years and 26.2% even noticed significant improvements. The percentage of employees who felt that the report

quality has deteriorated during this time frame is less than 5%. The trend toward improvement is also consistent with the results of the document analysis. In regard to the specific benefit of the evaluations, all participants agree that it lies primarily in providing the opportunity to better design future projects. Consequently, we could expect that interim evaluations are rated as more useful than final evaluations. This is not the case, however. The percentage of respondents who rate each the interim or the final evaluation as more beneficial was equal at 17.7%, while more than half of the respondents (56.5%) does not express a preference.

The majority of respondents also mention the introduction of the results into the Child Well-Being Reports²² when asked about the benefit of the evaluation results. In addition, the evaluation results have to be shared with other World Vision support offices, as well as with donors. The qualitative data analysis, however, also shows the presence of an awareness of the importance of the dissemination of the results in government institutions and other non-government institutions to encourage similar projects or to pass on experiences and to thus positively influence already existing or new projects undertaken by these institutions. The answers to the question on the dissemination of the evaluation results again emphasize strongly the importance of communicating the results to those living in the intervention communities in order to encourage them to continue the various projects that have been implemented.

RESULT

The meta-evaluation in 2016 identifies the same deficits as the meta-evaluation in 2014. Nevertheless, the 2016 meta-evaluation shows improvements particularly in the use of innovative quantitative methods and the identification of our project contribution. The on-line survey confirms the vulnerabilities, but also the overall positive trend. It also reveals that the majority of employees generally considers the evaluations, whether they are external, internal, interim or final, as beneficial. The results are integrated into the learning process and thus are ultimately and for the most part used in future project design. Moreover, the total experience we gained is also frequently included in the project planning process of other institutions. In addition to more quasi-experimental approaches, a desirable scenario would be the increased involvement of target groups in the evaluation process. This would not only be an advantage, as described by World Vision employees, for the benefit of the resulting recommendations, but would also increase the local population's acceptance of the recommendations meaning that a positive influence on the continuation of our projects can be assumed.

²²These reports have been published by World Vision since 2011 and provide an overview of the objectives achieved by means of the specially defined "child well-being outcomes" (http://www.wvi.org/sites/default/files/Child_Well-being_Aspirations_and_Outcomes_English_0.pdf)

7.2. /

ASSESSMENT OF IMPACT TRANSPARENCY OF THE 2ND IMPACT REPORT BY CEVAL

World Vision Germany published Impact Report No. I in the summer of 2014. In advance of that, World Vision Germany hired the Center for Evaluation (CEval) to develop a brief assessment of the methodological approach. In the 2nd Impact Report in 2016, we are now having the impact transparency in the report reviewed as well. This review is done on the basis of the following criteria: comprehensibility/clarity, existence of information relevant to target groups, methodological approach, validity of data and sources used, and objectivity and publication/access.

*After we completed
the Impact Report,
the Center for Evaluation
assessed the entire report.
Overall, a positive picture
is taking shape regarding
World Vision Germany's
transparency in the
Impact Report.*

The report is written in a language that can be understood by the target groups that include public donors, media, sponsors and donors. The results we presented in it and the resulting conclusions and recommendations can be understood even without extensive knowledge of methodology. It is also set up in a logical structure. The reader gets an adequate overview of World Vision's objectives, areas of work and activities. The focus of the report, however, is clearly on the generated effects, World Vision's understanding of the impact and the role of impact monitoring and measurement. In this context, the transparent handling of the many challenges of impact measurement and the resulting limitations are particularly worth mentioning. Therefore, the two criteria "comprehensibility/clarity" and "existence of information relevant to target group" can therefore be considered positive.

In regard to the methodological approach it is noteworthy that not all evaluation results of the past two years are mentioned in the report. World Vision merely covers projects in the sectors of elementary education and nutrition "that [in addition] allow an analysis of the selected topics due to data quality and availability." (p. 18). It is not sufficiently explained which standards are set here and why projects from other areas were excluded. Also, with regard to the sources referenced in the Impact Report, questions remain, for example in regard to the collection and analysis methods or individual results. Therefore, we recommend that at least evaluation report summaries be made available for download on the website to allow the assessment of the validity of the reports' baseline data.

Finally, access to the Impact Report can be considered good. The publication of the report is mentioned in the on-line newsletter, the support magazine as well as in the annual report. According to World Vision, this reaches about 98% of donors directly. Furthermore, the report is presented shortly after its publication at the annual press conference. Additionally, it is easy for interested readers to find the report on the website and download it at no charge or order a printed version that is equivalent to the on-line version.

Overall, a positive picture is taking shape regarding the transparency used by World Vision Germany in the Impact Report. The only areas of improvement concern the selection and validity of the baseline data.

CONCLUSION AND RECOMMENDATIONS

It is gratifying to see that World Vision's work has clearly improved in some areas since the publication of the previous Impact Report and that a positive conclusion can be drawn. After the production of the 2nd Impact Report, the assessment of 29 evaluation reports and the external review by the Center for Evaluation, World Vision has come to the following conclusions and recommendations:

- As in our first Impact Report, we were able to declare again this time that the planned evaluations were carried out for all projects financed with sponsorships and that evaluation reports exist.
- Both our analysis as well as the externally conducted meta-evaluation show that the quality of the evaluations has improved over last time. It is exciting to note that this is especially true for the analysis of our project contribution and the use of innovative quantitative methods.
- What is also positive is the increased use of tried and tested project models.
- Most employees in our country offices and working on projects consider the evaluations to be useful, and the results are used in project design.
- The stronger focus on the quality of elementary education over the past few years is bearing fruit. However, it is important that we strengthen the local advocacy work in the education sector.
- In the health area, the various points in time at which the evaluation data was collected play an important role in the analysis. These should be documented in the future and taken into consideration in the analysis.
- Therefore, the analysis of World Vision's project contribution toward positive as well as negative changes continues to be a challenge not only in the health but also in the education sector. Also, the collection methods do not yet sufficiently take into consideration the identification of any potential negative effects of the project work. Both should be considered in the selection of methods and development of instruments.
- Target groups should be more closely involved in the evaluation process. This would also help increase acceptance of the recommendations. This should be discussed with local employees and experts in advance of an evaluation.
- The ex-post evaluations show that many impacts are sustainable even after projects end, but that the subject of sustainability should be taken into consideration even more systematically in the planning and implementation phases. Both the quality of a sustainability approach as well as its monitoring should be reviewed more thoroughly in the planning documents.
- Evaluation reports should be selected more systematically and thus be more easily understood by the reader.
- At a minimum, summaries of evaluation reports that we reference in the report should be available to the reader.



World Vision Deutschland e.V.

Am Zollstock 2-4 • 61381 Friedrichsdorf
Phone: +49 (0) 6172 763-0 • Fax: +49 (0) 6172 763-270
info@worldvision.de

Berlin office
Luisenstraße 41 • 10117 Berlin

Account for donations: Taunus Sparkasse
IBAN: DE 5751 2500 0000 0000 2216
(BIC: HELADEFITSK)

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