



Post Self-Reliance Evaluation Study of THP Epicenter Strategy for Gender-Focused, Community-Led Development Programme

Final Report

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Acronyms

CONGOMA	Council for Non-Governmental Organizations of Malawi
FGD	Focus Group Discussion
GVH	Group Village Headmen
HH	Household
IGA	Income Generation Activity
LICODO	Ligowe Community Development Organization
MSC	Most Significant Change
SACCO	WEP committee and microfinance program of LICODO
THP	The Hunger Project
ToR	Terms of Reference
ToT	Trainer of Trainers/Trainer of Animators
VCA	Vision, Commitment, and Action
VSLA	voluntary saving group in Ligowe
WASH	Water, Sanitation and Hygiene
WEI	Women Empowerment Index
WEP	Women Empowerment Programme

Executive Summary

The Hunger Project (THP) is a global, non-profit, strategic organization committed to the sustainable end of world hunger. THP works towards this – among others – through the **epicenter strategy** in which men and women in clusters of rural villages are mobilized to create and run their own programs to meet their basic needs. The goal is that an epicenter becomes sustainably self-reliant after four phases of the strategy, i.e. able to plan, fund, and implement its own community development activities¹. The epicenter strategy is integrated and holistic. It achieves synergy among programs in health (including HIV/AIDS prevention), education, adult literacy, nutrition, improved farming and food security, microfinance, water and sanitation, as well as building community spirit with a momentum of accomplishment involving the entire population.

THP has requested MDF to carry out a Post Self-Reliance Evaluation Study for the THP Epicenter Strategy for Gender-Focused, Community-Led Development Program (hereafter referred to as the program) in Nkawanda, Ghana and Ligowe, Malawi. This is **the first post-self-reliance** (post-SR) **evaluation** to learn from and report on the ex-post impact² of the THP programs.

The **objectives of this evaluation** are to distill lessons learned and make recommendations for improvement to the program by analyzing its intended and unintended effects, its impact on the lives of the communities and the extent of program sustainability. To achieve its objectives, the study has combined **quantitative and qualitative** action research. The former has been carried out by THP Ghana and THP Malawi using the THP household survey for outcome evaluation with seventeen indicators (from 59 indicators across the nine program goals) measuring community self-reliance. The qualitative action research has entailed collecting and analyzing the most significant change (MSC) stories by MDF consultants in Ghana and Malawi.

479 respondents took part in the household survey, 237 in Ghana and 242 in Malawi. 99 MSC stories³ were collected from the two countries, 59 from Ghana and 40 from Malawi. Both quantitative (HH survey) and qualitative (MSC stories) data were combined and presented for joint **learning at the country and global levels** with the participation of key stakeholders.

Based on the findings including outputs of the learning events, this evaluation has drawn conclusions organized around the evaluation questions (presented per goal on the next page).

¹ See the full definition of self-reliance in Chapter 2.

² In this document, ex-post refers to “after the completion of the project”. Throughout this document, ex-post is interchangeably used with post-self-reliance (post-SR).

³ The stories including their self-signification have been uploaded to the Sprockler online platform. Sprockler is a tool for surveying, analyzing and reporting story-centered information, made available by the social enterprise Perspective. See more at <https://www.sprockler.com/>

On Effectiveness and Impact

To what extent have the nine goals of SR framework been met? What are the reasons behind their achievements and non-achievements? What have been the contributions of the program?

The program in **Ligowe, Malawi** has contributed to a positive trend of the reduced **prevalence of moderate and severe hunger** as well as a significant decrease (30%) in **poverty** with its training in farm management practices, loans, and health and nutrition programs. Similar effectiveness has been shown by the program in **Nkawanda, Ghana**, although the program's impact on hunger remains uncertain given that surveys related to other programs in the region may have affected the reliability of data collected. Ex-post poverty is on par with the national average, but worse when measured below \$1.25 per day. Higher costs of living and poor access to the market have been named among the reasons for stagnant poverty here. Positive trends in declining poverty and hunger are undoubtedly linked to the program's effectiveness in improved **land productivity**, which has been outstanding (almost 100% ex-post) in both epicenter areas.

Similarly, enrollment in primary and secondary **education** has seen impressive results continued in **both epicenter areas**. The program has contributed to this by enabling families to pay schooling fees due to the increase in their income/reduced poverty. With its effective animator-based awareness-raising programs, the program has also contributed to improved **health** in **both epicenter areas** through supporting the community members' behavioral changes related to improved hygiene, nutrition, AIDS prevention, and family planning.

Despite program effectiveness in changing community members' hygiene behavior in **Ligowe**, **access to basic sanitation** there has slightly declined due to the unfit quality of latrines for local conditions. By contrast, in **Nkawanda**, such access has significantly (30%) increased, largely due to the construction of new KVIPs⁴. Therefore, it is concluded that training in WASH/hygiene practices in the absence of (solutions for) durable latrines has an insufficient impact on access to sanitation facilities. There has also been a slight decrease in **access to safe and drinking water** in both epicenter areas, although the proportion of the population who have access to drinking water is higher than the regional averages. Some of the decrease is attributed to the change in definition of measuring access to improved drinking water⁵. Other explanations behind the reduced access to safe and drinking water are partly due to the poor quality of the pumps (beyond program control) and the weak maintenance of basic infrastructure by the community water committees (within program control).

The program has seen one of the longer-term effects of **girls' empowerment**, marked by a significant decrease in child marriage. The program have also been effective in **empowering**

⁴ the Kumasi Ventilated Improved Pit Latrine (KVIP) is a twin-pit VIP latrine, which allows the contents of one pit to compost while the other pit is in use.

⁵ The new definition now includes only those who spend less than 30 minutes to access good drinking water are those who have access to improved drinking water. For more, see Chapter 4.4.

women. In **Nkawanda**, there has been an improvement in attitudes towards gender equality. However, the declining proportion of women accessing financial services ex-post – in turn triggering a significant drop in the leadership – the time (parts of WEI) and WASH results, plus the fact that fewer women believing in their leaders successfully addressing community concerns shows that program efforts have been more impactful in household domain and less in the public one.

In both countries, the epicenters continue to function as mechanisms for **community-led development**. The infrastructure of both epicenters has been working, with the committees functioning with women holding leadership roles, and community-initiated projects have been implemented. The number of people who are motivated, confident, and self-reliant to improve their lives and their communities has been gradually growing.

What do community members value most?

Analogous to target groups of other development interventions, community members served by the epicenters seem to value the most the direct and tangible inputs from the programs: training in farming practices, loans, information and skills received from health and nutrition and literacy programs. When the effort is devoted to reflecting on community-level change – like with this evaluation – the community members have shown their appreciation for the process of reflection on their joint achievements and how proud they are to have better results than regional/national averages. Enabling communities to celebrate their achievements, reflect on challenges and discuss ways forward has been among the most valuable contributions of THP ex-post epicenter self-reliance.

Conclusions on Sustainability

To what extent has the progress achieved been sustained after the exit of THP? How have the epicenters and pre-existent village institutions interacted to sustain the results achieved?

The extent to which the progress has been achieved varies per goal. Most positive trends have been seen in achieving goals of (a) **improved access to and use of health resources** and (b) **improved literacy and education**. By contributing to the improved economic status of families, the program has seemingly removed the main barrier (schooling fees) to their school attendance, and ultimately to better performance in primary and secondary education. Similarly, by raising awareness on nutrition, hygiene, and sexual and reproductive health, the program has used the leverage point⁶ of behavioral change to make more optimal use of the existing health services, resulting in better health results. Therefore, the positive trends in these two goals are likely to be more sustainable.

⁶ Leverage points are places within a complex system (a corporation, an economy, a living body, a city, an ecosystem) where a small shift in one thing can produce major changes in everything (Meadows, Donella H. *Thinking In Systems : a Primer*. London; Sterling, VA :Earthscan, 2009).

The progress in reaching the goal of **improved access to safe and drinking water and sanitation facilities** might fade out or (further) decline in the long run based on the argument that sustainable behavioral changes might be insufficient unless they are combined with functional basic infrastructure or alternative low-cost solutions in its absence. The positive trends in the reduced **incidence of poverty**, the reduced prevalence of **hunger and malnutrition** and improved **land productivity** also seem fragile in the long run. Behavioral changes in farming have been achieved, although when they are not supported by other factors outside the control of the communities (such as prices of agricultural inputs, climate-related hazards, access to rural credit and markets), this behavioral change seems insufficient to sustain achievements in reducing poverty, hunger and malnutrition.

Further, while the goal of having **empowered women and girls in rural communities** has seen a positive trend, the individual changes have not yet reached a critical mass to become transformative, and therefore sustainable⁷. Less strong but similar conclusions have been drawn for the goal of **mobilized rural communities**. There has been continuous support from community leaders to epicenters and the dedication of animators and boards, resulting in communities initiating and implementing projects, although they have also been struggling with the challenges of access to water and sanitation and women empowerment like in Ligowe, with the reduced yet still high incidence of poverty. Progress in community mobilization has been gradual and marginal, and therefore it risks goes unnoticed unless deliberate efforts are made to capture and celebrate it.

Finally, for sustainability overall, a focus on including youth in community mobilization and addressing climate change for communities to become more resilient requires attention.

Lessons Learned

First, the training targeting skills and attitudes pays off in terms of achieving sustainable behavioral changes. Second, animators are motivated by capacity development opportunities. In their absence, encouragement and other stimuli work in keeping a smaller committed group engaged. Third, a combination of improved farming practices and loans produces effective results in terms of increased yield and increased motivation of farmers. Fourth, microfinance (loan) programs become vulnerable in the post-reliance stage, and their poor performance in turn negatively affect a number of result areas, including WEI. Fifth and final, the placement of epicenter building contains a dilemma: while the clinic and model plots/gardens should stay close to the areas with the most vulnerable and poor, the epicenter IGAs require being nearer to the consumers/users of the IGA services who are not necessarily the most vulnerable and poor. Professionalization of the epicenter as an organization increases its changes of successful fundraising, contributing to the sustainability of the epicenter activities.

⁷ Based on feminist research of 'critical mass' in women and politics⁷, arguing that it takes a certain minimum representation (e.g. 30%) before minorities such as women are able to make a substantial difference.

Recommendations

Based on the conclusions, own analysis and input from learning events, the evaluation study makes **recommendations** and highlights areas that require more strategic thinking from THP management.

Recommendation 1: Continue targeting behavioral changes through training in areas of farming practices, nutrition, hygiene, and sexual and reproductive health. Pay particular attention to attracting young people. **Recommendation 2:** Develop capacities for market analysis and business planning to boost the profitability of epicenters' IGAs. Focus earlier on and more professionally on fundraising and business development strategies for epicenters. **Related strategic questions:** In the knowledge of the microfinance program becoming vulnerable post-reliance, is there a need for continuous capacity development of animators regarding how to ensure sustainable IGAs and fundraising for such development? How can serving the most marginalized and poor be combined with ensuring that the epicenter IGAs attract customers?

Recommendation 3: For the goals where behavioral changes need basic infrastructure to make transformative changes, work on the missing elements by (a) enriching or (b) combining your programs, (c) building in-country partnerships earlier on with complementary initiatives, and/or (d) advocating for government support to provide basic infrastructure. **Related strategic question:** How can the WASH results be made sustainable including solutions as an alternative to delivering infrastructure (e.g. rainwater collection)?

Recommendation 4: Strengthen achievements in agriculture with a value chain approach and combine own programs with those of other organizations addressing climate change. **Related strategic question:** How can THP link agricultural to value chains proactively and in a community-led manner?

Recommendation 5: Strengthen WEP to create a critical mass of women for transformative change. Promote the discussion among men and women on how they can empower each other and organize themselves in the program from early onwards. **Related strategic questions:** How is it possible to move from individual-/household-level achievements/successes to more collective ones to create transformational change (for the whole community)?

Recommendation 6: To place gradual changes in community mobilization under the limelight, make a deliberate effort to stimulate self-reflection as well as defining and celebrating successes and champions of change in community mobilization.

Recommendation 7: Continue with ex-post evaluations. Start with the HH survey and after its analysis leads to discovering areas with answers to “why” questions needed, employ MSC story collection and analysis or other complexity-aware methods like outcome harvesting to address them. Conclude with a sense-making event for joint analysis and action planning. To maintain consistency, consider adjusting methodologies for mid- and end-line evaluations.

1. Introduction

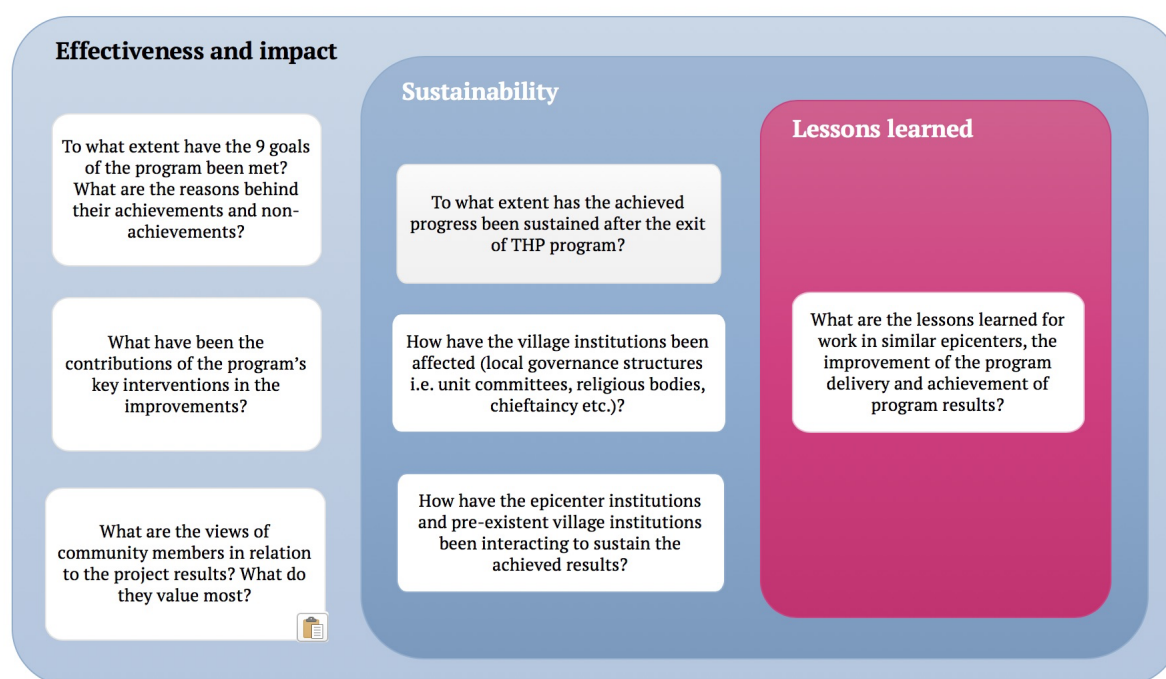
The Hunger Project (THP) has requested MDF Training and Consultancy BV (MDF) to carry out a Post Self-Reliance Evaluation Study for THP Epicenter Strategy for Gender-Focused, Community-Led Development Program (referred to as the program hereafter) in Ghana and Malawi. Two epicenters have been selected for this evaluation, one in Nkawanda, Ghana, and another in Ligowe, Malawi.

This study is a part of THP's commitment to providing a critical framework for delivering on its organizational mission. One of the noteworthy manifestations of this is systematic learning from outcome evaluations conducted since 2012, which adds to THP's ongoing monitoring and reporting at the output level. With this evaluation, THP goes a step further by conducting **the first post-self-reliance evaluation to learn from and report on the impact of the THP program.**

1.1 Purpose and Scope of the Evaluation Study

The objectives of the Post Self-Reliance Evaluation Study are to distill lessons learned and make recommendations for improvement to the program by analyzing its intended and unintended effects, its impact on the lives of the communities and the extent of program sustainability. The results of this evaluation are primarily indented for use by the program managers, the MEL team and leadership of THP. To achieve these objectives, this evaluation addresses key questions (as detailed in the ToR) as agreed on during consultations and the kick-off meeting between THP and MDF as follows (see Figure 1):

Figure 1 Evaluation questions per criteria/focus



This study also provides a potential framework that can be adopted/adapted for integrating post-SR evaluations and monitoring into the existing MEL processes of THP, such as continued learning, and stronger evidence-based programs, among others.

1.2 Report Outline

Following this introductory chapter, Chapter 2 briefly describes the key elements of the program as well as both epicenters. Chapter 3 outlines the methods and process steps conducted during this evaluation. Chapter 4 presents the analytical findings of the evaluation study, structured along the key themes (goals) of the THP program. Chapter 4 contains conclusions, a set of recommendations and related strategic questions for THP to explore. Annexes to this report accompany the main report as a separate document.

1.3 Acknowledgements

The evaluation team is grateful to the staff of THP Netherlands, THP Ghana, THP Malawi, and THP Sweden as well as the THP Global Office for their cooperation in sharing key documents and information, organizing field visits, arranging focus group discussions and actively participating in learning/sense-making events. The evaluation team is grateful to the community members who took part in this study for their time, information and insights, and to the THP office in New York for providing methodological guidance on the household survey.

Our special thanks go to the Global VP of Program Strategy and Southern Africa Region Director, Country Directors of THP Netherlands, THP Ghana, and THP Malawi for their leadership in strategically guiding this (first) ex-post evaluation, and the invaluable support received from Suzanne Hoeksema, Kathleen Morris, Henry Chungu, Emmanuel Kwaku Awevor, and Tom Van den Biggelaar. Finally, this study would not have been possible without financial support from Dioraphte Foundation and the Swedish Postcode Lottery.

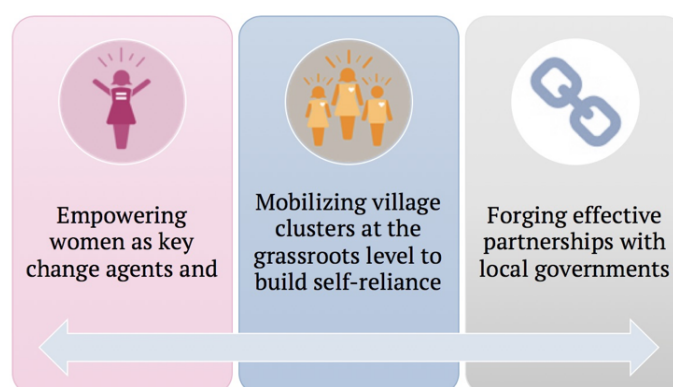
2. Program Description

2.1 Basic Facts about the Programme

THP a global, non-profit, strategic organization committed to the sustainable end of world hunger. **THP's Mission** is to end hunger and poverty by pioneering sustainable, grassroots, women-centered strategies and advocating for their widespread adoption in countries throughout the world. To achieve its mission, THP has three core approaches (see Figure 2).

THP puts these approaches in practice through the **epicenter strategy** in which men and women in clusters of rural villages are mobilized to create and run their own programs to meet basic needs. The goal is that an epicenter becomes sustainably self-reliant after four phases of the strategy (Figure 3), i.e. able to plan, fund, and implement its own community development activities⁸.

Figure 2 THP core approaches



Text box 1 Definition of self-reliance⁹

THP defines self-reliance as when **community members are confident and have the capacity and skills to act as agents of their own development**. THP orients its work around reinforcing local knowledge and skills, such that communities and local governments **take charge of their own development processes, and can therefore perpetuate, sustain and enhance the work begun in partnership with THP**. By stimulating community-led development, THP fosters a culture of self-determination and economic viability in which the community itself is the driver of continued change. A self-reliant epicenter does not necessarily have every single need fulfilled. Nonetheless, these communities have an increased ability, willingness and skills to tackle development challenges and identify ways to meet additional needs thanks to the capacities built in partnership with THP.

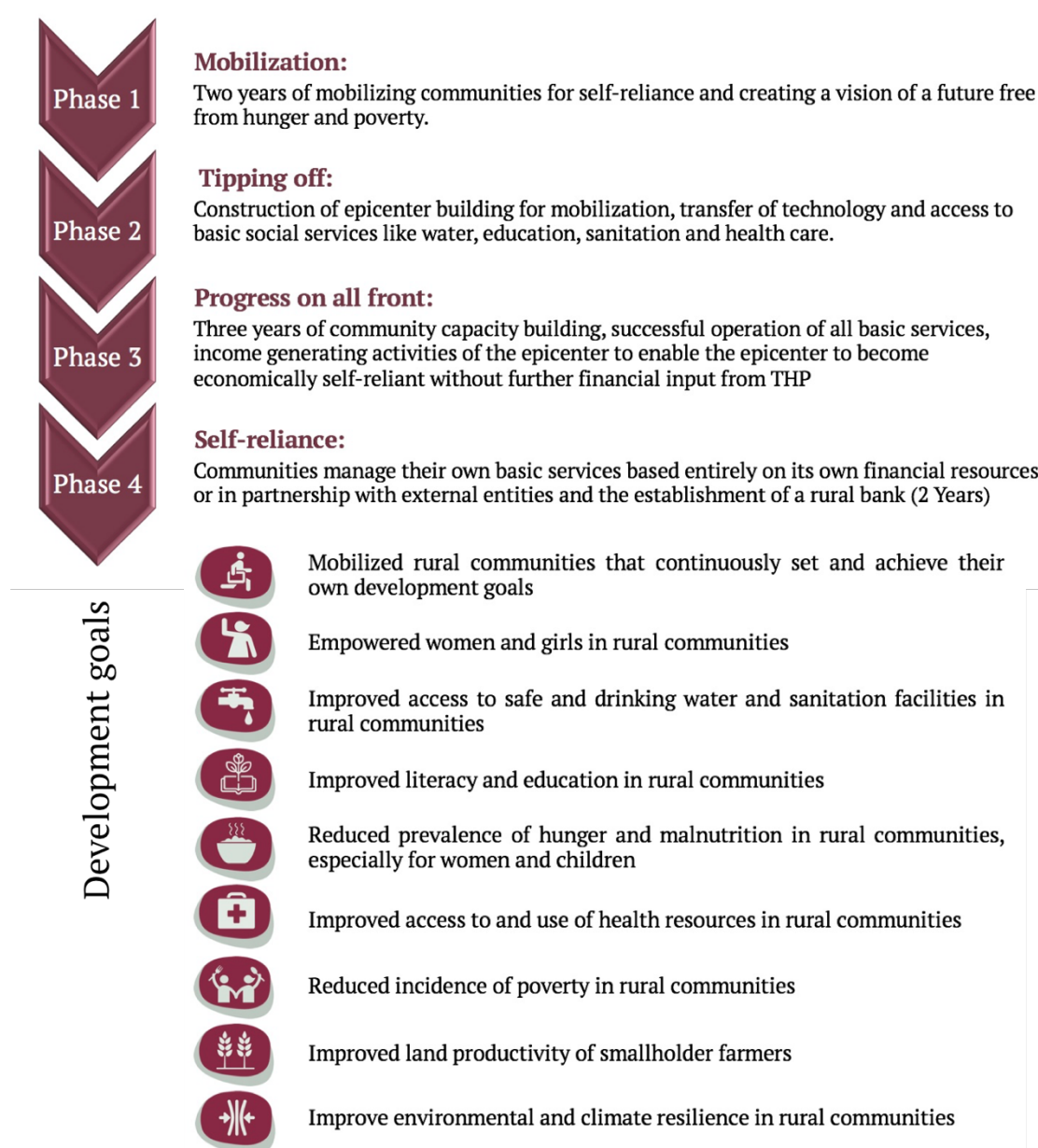
When implementing the epicenter strategy, the **THP program** starts with community-wide participation in a vision, commitment and action (VCA) workshop, through which community members create their own vision for the future, commit to achieving it and outline necessary actions to succeed. Each participant leaves the workshop with a specific project for the

⁸ For more on the epicenter strategy of THP, please see <https://www.thp.org/our-work/where-we-work/africa/epicenter-strategy/>

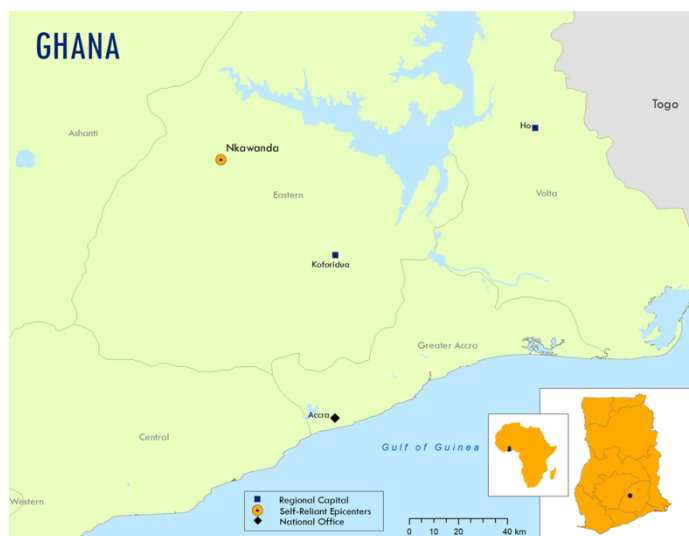
⁹ <https://www.thp.org/our-work/where-we-work/africa/epicenter-strategy/promoting-self-reliance-in-communities-worldwide/>

following three months based entirely on local resources. Through this process, communities also select local leaders (so-called animators) who are trained to lead more workshops and facilitate the ongoing actions stemming from them. The program proceeds with the continuous support of community initiatives. It puts women at the program's heart, building their capacity to realize the full potential of their lives. Knowing that women and girls bear almost all responsibility for meeting the basic needs of a family while being systematically denied the resources, information, and freedom of action that they need to fulfill this responsibility, the THP program prioritizes the empowerment of women to enact change. Finally, THP works towards its highest-leverage role for the end of hunger by 2030 by building the large-scale partnerships and alliances needed to empower women-centered and community-led rural development.

Figure 3 Phases and goals of the THP epicenter strategy



2.2 Epicenter in Nkawanda, Ghana¹⁰



The **Nkawanda epicenter** was **mobilized in 2006**. It is located in the southern part of the Kwahu West Municipality In the Eastern Region of Ghana and has a population of 8,558 people, comprising 3,818 males and 4,740 females. The epicenter is about 146km from Accra and 24km from the Kwahu West Municipality.

The epicenter comprises nine satellite communities: Abetenso, Amanfrom, Asuoso, Jejeti, Kwahu Nsabaa,

Nkawanda #1, Nkawanda #2, Oframase, and Ohene Akuraa. Various ethnic groups such as the Akans, Krobos, Ewes, and others settle in the Nkawanda epicenter communities, with the indigenous Kwahus (an Akan tribe) constituting about 80% of the population. Farming is the major occupation, employing about 75% of the total adult population.

SELF-RELIANCE

The **Nkawanda Epicenter became self-reliant in 2016**. At this time, there was an effective leadership in place with four sets of leaders: the epicenter **Executive Committee** (4 females and 3 males), the **Epicenter Committee** (18 members, comprising 1 male and 1 female per community, and 9 communities in total), five **sub-committees** (Income generation; Health; Food security; Loan; and Education committees, each made up of 5 members), and the **Village Committee**. The chiefs within the nine communities formed the *Association of Chiefs* to promote accountability and safeguard community members working with the epicenter strategy.

The epicenter also ensured sufficient human resources to carry out educational activities in the epicenter communities: two Trainers of Trainers/Animators (ToTs), five Women Empowerment Program (WEP) Animators, eight Nutrition Animators, eight WASH Animators, five Agriculture ToTs, five HIV and AIDS Animators and eighteen Community Animators. Moreover, the epicenter put the necessary financial sustainability measures in place for the smooth operations. In 2016, it was generating income from the hiring of the conference hall, canopies and chairs, an agri-input shop, and an epicenter farm.

By the time that it became self-reliant, the epicenter had achieved the following (Table 1):

¹⁰ Based on the THP profile of the epicenter in Nkawanda.

Table 1 Achievements of Nkawanda epicenter (2016)

	Gender Equality: Women empowerment workshops have contributed to women becoming more confident and productive, and more actively participating in community meetings. Further, the promotion of fairness and justice for women has changed certain gender-unequal community practices such as only men making important household decisions and community members being unfriendly to widows. Moreover, women have been equally engaging in income generation activities (IGAs), and they have also adopted modern farming practices and a savings culture. Among children, household chores have been equally distributed among boys and girls.
	Food Security: The adoption of improved farming practices due to training by Agric ToTs in effective farming practices has brought an increase in yields and prevented the post-harvest losses that many farmers used to experience. Communities have been producing beyond what their households require to survive, they have diversified their farming by cultivating more than one crop and raised money from this production.
	Partnership with Local Government: As part of the sustainability efforts, the epicenter has developed a strong relationship with the municipal assembly, backed by the signed MoU. The epicenter has been collaborating effectively with the various departments of the Kwahu West Municipal Assembly, such as the Agric Department, Social Welfare, Ghana Health Service, Ghana Education Service, Department of Cooperatives, etc. The Credit Union Association of Ghana has also been in working partnership with the epicenter credit union to ensure its smooth running.
	Literacy and Education: THP's adult literacy program and campaign on school enrollment for all children have resulted in improved literacy and numeracy skills in adults. Further, the continuous sensitization of communities on the importance of education has brought improved access to education for both girls and boys. Moreover, due to collaboration with the municipal assembly children have been accessing education in their communities (instead of walking long distances, as before) with trained teachers. The quality of education has been improving and many graduated children have continued their education at a higher level.
	Health and Nutrition: The epicenter clinic has become the number one health care center for the epicenter populace. Maternal and child health care has been improving. The health program including HIV and AIDS education, malaria prevention, and improved water and sanitation facilities have all contributed to healthy communities: households have built private toilet facilities and designated places to dump refuse, and patients have attended the clinic for health care rather than self-prescribing medicines, among others.
	Livelihood and Microfinance: THP has contributed to community members' living conditions by introducing loans and savings. The microfinance program has especially supported women in engaging in IGAs. By training women in pottery and assisting them with loans, THP has created opportunities for these women to diversify income generation beyond farming and/or expand their businesses.

2.3 Epicenter in Ligowe, Malawi¹¹



In 2005, THP Malawi established the **Ligowe epicenter** in the Neno District, Traditional Authority Mlauli, with a total population of 16,481 people spread across 24 villages. The Ligowe epicenter has been founded in the Southern Region of Malawi, located 116km from the city of Blantyre, along S150 54.29.995' E0350 28.254'.

The opening of this epicenter resulted from a study revealing the socio-economic profile of the area. According to this profile, the majority of the households were hunger stricken due to a lack of inputs and access to the market, whereby they had no health facility within 12km, low access to potable water, and only 17% of them had ever accessed cash credit.

SELF-RELIANCE

In 2016, the **Ligowe epicenter** was declared **self-reliant** and became the Ligowe Community Development Organization (LICODO), a registered organization. At the time of reaching the self-reliance phase, the epicenter put in place the democratically-elected **executive committee** (ten community members, including five women), a **board of trustees**, and a committee of ten chiefs to represent the 24 village heads. Both committees underwent leadership training prior to assuming their roles. With its ten-room lodge and restaurant, the Ligowe epicenter chose the hospitality industry as its main **income-generating** source. Other sources of income for the epicenter included hiring a hall and retail trade in soft drinks and snacks.

By the time that it became self-reliant, the epicenter had achieved the following (Table 2):

Table 2 Achievements of Ligowe epicenter (2016)



Women Empowerment: Since the epicenter's establishment, women's participation in various developmental areas has improved, with significant contribution from the WEP. Many women have been trained in a number of areas, which has helped to improve their status and awareness of their rights. A number of them have been operating their own businesses. The girls' school drop-out rate has decreased over the years.

¹¹ Based on the THP profile of the epicenter in Ligowe.



Food Security: The community has built a revolving fund from a seed capital injected in 2005, ensuring increased resilience of the community in times of hunger.



Partnership with Local Government: The epicenter has developed a strong partnership with the Neno District Council, with benefits including the training of its adult literacy facilitators, certification of the learners, and stocking of the epicenter's resource center with books.



Access to Health: Access to health services has improved in the area due to the construction of the health facility, carried out in collaboration with the district council. Accordingly, the distance to the nearest health facility has been reduced.

HIV & AIDS: A number of cultural norms that were seen to fuel the spread of HIV and AIDS have been either abolished or reformed to reduce the spreading of the virus. With each of the 24 villages having trained three animators to conduct sensitization meetings on this, the community members have become more aware of HIV and AIDS issues than before.

3. Methodology and Approach

3.1 Methodology

To analyze the program's intended and unintended effects and its impact on the lives of the communities as well as the extent of program sustainability and distill lessons learned, the Post Self-Reliance Evaluation Study combines quantitative and qualitative methods of action research.

The **quantitative data** was collected by THP Ghana and THP Malawi using the THP household (HH) survey for outcome evaluation to feed seventeen indicators designed to measure community self-reliance out of 59 indicators for the nine program areas. The ex-post HH survey results are the third data points as – through the above-mentioned seventeen outcome indicators – THP has been tracking the progress of each epicenter's program mid-term (first data points) and assessing its achievements at the end of self-reliance phase (second data points). For the HH survey, THP has used random sampling to ensure a significant representation of the larger population. THP Ghana and THP Malawi have been consulting with THP Global MEL Office on this. The survey data has been processed and made available for joint analysis/sense-making by THP Global Advocacy Office. More information on the HH survey methodology and self-reliance indicators can be found in Annex 1.

The **qualitative data** was harvested by MDF consultants in Ghana and Malawi using the MSC¹² methodology, which is based on the collection and analysis of MSC stories. The stories are answers to the evaluation question: *what is the most significant change (big or small, positive or negative) in your life (in your personal life or related to your paid work) after your involvement with the epicenter/animators, preferably in the last two years?* MSC stories have been collected in a focus group discussion (FGD) setting with a selected sample of community members, representing all members served by the epicenter. The selection criteria aimed at safeguarding the representation of (a) the most marginalized, including young mothers, disabled, and widows; (b) youngsters (14-20 years old), both girls and boys; and (c) women and men above 20 years old. In addition, animators were invited to tell their stories and assist in the contextualization and signification¹³ of the stories told. The signification of stories has been set in line with the nine program goals. Detailed information about data collection during FGDs can be found in Annex 2.

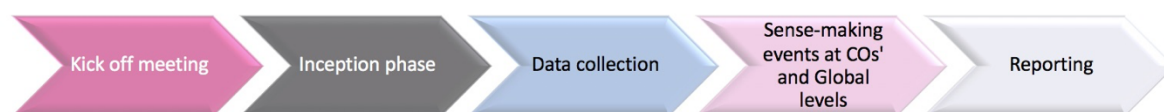
¹² The MSC technique is a form of participatory evaluation. This technique differs from common M&E techniques in at least four respects: the focus is on the unexpected (rather than predetermined quantitative indicators that do not tell stakeholders what they do not know they need to know); information about change is documented in text rather than numbers; major attention is given to explicit value judgments; and information is analyzed through a structured social process.

¹³ Signification refers to asking storytellers to give meaning to their own experience (story). Self-signification enhances authenticity and correctness and increases the commitment of the respondent (ownership). It is the art of coming down to the self-interpreted essence of the story.

3.2 Process Steps

The process steps largely followed the workplan outlined in the MDF's proposal (Figure 4).

Figure 4 Evaluation Study Process Steps



After the initial exchange and sharing of key documents, MDF Team Leader and THP Netherlands team started with the **kick-off meeting** on July 16, 2019 to work out administrative issues, evaluation questions, and process steps. The **inception phase** followed, during which the evaluation design was completed, including the agreement on the selection of the self-reliance indicators for the HH survey, MSC data collection tools, and informing/including all concerned parties. The consultations on the selection of self-reliance indicators took longer than anticipated, requiring adjustments to the original evaluation design and additional resources. To compensate for the delay and remain within the budget, instead of the inception report the MDF team has delivered an agreement on MSC data collection tools and selected HH survey indicators. The latter is detailed in Figure 5.

Figure 5 Self-reliance indicators selected for this ex-post study

	Mobilized rural communities that continuously set and achieve their own development goals	1.1 Proportion of individuals reporting the ability to change their communities 1b Proportion of community members who perceive leaders to be successful in addressing community concerns
	Empowered women and girls in rural communities	2.1 Women's Empowerment Index 2.2 Minimum Dietary Diversity for Women: Mean number of food groups consumed by women of reproductive age Proportion eating at least 5 food groups a day 2f Proportion of the community who believe men and women jointly share responsibility for making household decisions A1 Prevalence of Child Marriage Average age of marriage
	Improved access to safe and drinking water and sanitation facilities in rural communities	3a Proportion of households using a basic drinking-water source 3b Proportion of households using basic sanitation
	Improved literacy and education in rural communities	4b Proportion of children age 4-18 attending school 4c Proportion of youth not in education, employment or training
	Reduced prevalence of hunger and malnutrition in rural communities, especially for women and children	5.1 Prevalence of households with moderate or severe hunger
	Improved access to and use of health resources in rural communities	6a Proportion of children under 5 who sleep under a bednet
	Reduced incidence of poverty in rural communities	7.1 PPI: Proportion of households below the poverty line 1.90/day 7c Proportion of adults accessing financial services
	Improved land productivity of smallholder farmers	8a Proportion of smallholders applying improved farm management practices
	Improve environmental and climate resilience in rural communities	9.1 Climate Resilience Points

After the preparations, in collaboration with the THP Ghana and THP Malawi and the leadership of epicenters in Nkawanda and Ligowe, **data collection** took place based on the agreements made and tools designed. For an overview of the data collection and other evaluation events, see Table 4.

Table 3 Evaluation events: dates and places

Country	Event	Date	
Malawi ¹⁴	FGD story collection	October 1, 2019	Chimpazi GVH
	FGD story collection	October 2, 2019	Mlauli GVH
	FGD story collection	October 3, 2019	Dzomodya GVH
	Sense-making at CO level	October 23, 2019	Blantyre
Ghana	FGD story collection	October 7, 2019	JeJeti Asuosu
	FGD story collection	October 8, 2019	Ohene Akura
	FGD story collection	October 9, 2019	Nkawanda 2
	Sense-making at CO level	November 14, 2019	Accra
Netherlands	Sense-making at global level	December 4, 2019	Utrecht and online

479 respondents took part in the HH survey, 237 in Ghana and 242 in Malawi. **99 MSC stories were collected** from the two countries, 59 from Ghana and 40 from Malawi. The stories including their self-signification have been uploaded to the Sprockler online platform,¹⁵ whereby they remain available for THP. The Sprockler report with collected stories from both epicenters can be found [here](#) (password: thehungerproject). The Sprockler report with stories from Ligowe can be found [here](#) (password: Ligowe) and for Nkawanda [here](#) (password: Nkawanda).

Both quantitative (HH survey) and qualitative (MSC stories) data have been combined and presented for joint **sense-making/learning¹⁶ at the country level**. The representatives of communities and THP Global, leadership of epicenters, THP Malawi, and THP Ghana, the THP program and M&E managers actively participated in learning events at the country level held in Blantyre, Malawi and Accra, Ghana. They jointly analyzed overall findings and discussed their meaning for future programming, using questions such as: *What do the findings tell us? Which ones are should we be proud of and which are worrisome? What lessons can be learned? What recommendations can be made for replicating/upscaling THP programs in similar/different contexts?* The exercises and outputs of these events can be found in Annex 3.

The final **sense-making/learning event at the global level** took place in Utrecht on December 4, 2019. This event brought together THP Netherlands leadership and impact brokers (in person), the THP Southern Africa Regional Director, THP Global Advocacy Office representatives, and MDF team members from Ghana (with remote participation). Participants analyzed the structured overall findings, made conclusions and draft recommendations. All outputs of learning events have been worked into the relevant chapters of this report.

¹⁴ MSC stories were collected and signified from three (Mlauli, Chimpazi and Dzomodya) out of five GVH (Mlauli, Chimpazi, Dzomodya, Makanani, and Magaleta).

¹⁵ Sprockler is a tool for surveying, analyzing and reporting story-centered information, made available by the social enterprise Perspectivity. See more <https://www.sprockler.com/>

¹⁶ Sense-making is a method of choice for answering questions on “doing things better in the future”. It weaves together all data sources and serves the purpose of a systematic reflection (looking back) and creative design thinking (looking ahead).

3.3 Limitations of the Study

Although the evaluation report fairly represents views and opinions of community members – including the most vulnerable – it could not ensure the equal representation of all groups. In Ghana, the household survey has not been able to gather information from a sufficient number of men to make the results statistically significant. The reason is the occurrence of the survey during the harvest season, when most men appeared not to be at home. Further, despite the evaluation team's efforts,¹⁷ FDGs were not attended by youngsters (14-20 years old), without providing reasons for their absence.

To mitigate these shortcomings, first the MSC stories were analyzed in search of results that are relevant for youth, whereby a few were found and highlighted. Second, the overall findings were validated during the sense-making/learning events to ensure that they resonate with community members' experiences and THP observations. The absence of youth from FDGs has been taken on board as a finding in itself.

The caveat in interpreting the qualitative findings of this evaluation and drawing conclusions lies in the recognition of the demographics and other characteristics of respondents. Around 65% of MSC stories are told by **women**. Around 70% of the female and male storytellers are **middle-aged**, up to 10% are elderly (more than 65 years old), and around 20% are young adults (21-35 years old). Most storytellers have **recently** (within 6 months from this ex-post evaluation) been **engaged with the epicenter/ animator activity**. A few of them live far away (more than 2 hours' walking distance from the epicenter in Nkawanda; 1-2 hours' walking distance from LICODO), while the rest live closer (around 65% live up to 1 hour of walking distance and 30% 1-2 hours walking distance from Nkawanda epicenter; more than 90% up to 1 hour walking distance from LICODO).

¹⁷ For example, in Malawi, household listing from the three sampled GVH was requested from LICODO. The Malawi consultant sampled an average of eighteen households from each GVH and shared the list of sampled households with LICODO. The consultant and management committee of LICODO reviewed the sampled households and in the process found that some households that had never participated in the epicenter services had been sampled. Such households were replaced and the final list of participants was generated. The list was discussed during the planning meeting and animators were assigned to support data collection processes in each of the three sampled GVHs.

4. Findings

This chapter presents the findings, structured according to the main themes/goals of the THP program. The order of sub-chapters (themes) follows their importance as derived from the self-signification of the MSC stories. The sub-chapters substantiate qualitative data with HH survey findings. Each of them ends with a selection of MSC stories on the respective theme.

The vast majority of stories (85%) are unquestionably positive (i.e. none of them are self-signified as negative and understood as such by the evaluators).

4.1 Prevalence of Hunger, the Incidence of Poverty, and Land Productivity

The main topic of almost half of the 99 MSC stories is a reduction in the prevalence of hunger and incidence of poverty, although some are categorized by storytellers under the theme of land productivity (see the distribution of stories per theme/goal in Figure 6). This finding reflects that the above-mentioned themes is central in the lives of communities in the epicenter areas. A common story is an appreciative description of obtaining a loan for agricultural inputs (fertilizer, seeds) and training in farming techniques, applying both and achieving a higher harvest of traditionally-cultivated crops than before. The increased yield is deemed sufficient to repay the loans, cater to household needs including food for the family and money for children's schooling. There are also stories – notably more from women than men – detailing contributions of THP microfinance, health and nutrition programs to food and nutritional security.



Figure 6 MSC stories categorized per theme, (red-Nkawanda, orange-Ligowe)

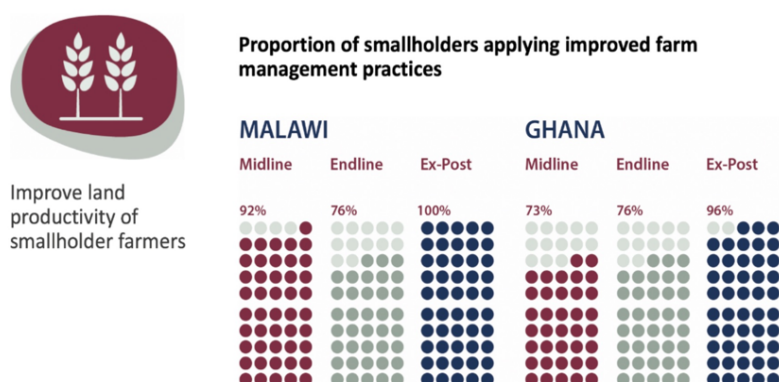


Figure 7 Farm management practices in both countries

The HH survey supports the finding that smallholders increasingly apply their knowledge and skills of modern farming acquired from THP programs. The proportion of farmers using improved practices has been steadily increasing in both countries (see Figure 7).

A deeper analysis of MSC stories has shown that they do not explain a significant change in a single area (e.g. the reduction of hunger or poverty), but rather multiple ones. In essence, **stories of women are stories of empowerment**. Women talk about being able to take care

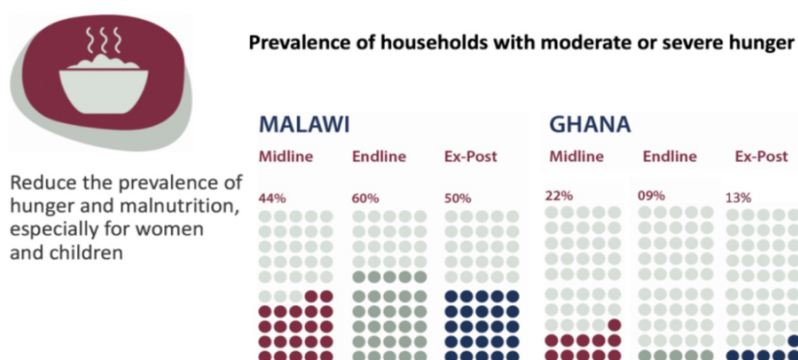


Figure 8 Prevalence of hunger, both countries

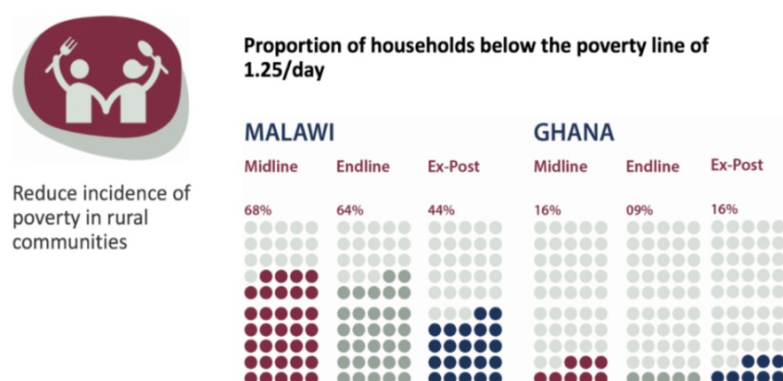


Figure 9 Poverty, both countries

is in a crisis area, as a result of the early 2019 flooding¹⁸ - the hunger is lower than the rural average of 57%.¹⁹ According to the sense-making event participants, the high level of hunger is related to low levels of staple crop (maize) production. Among the contributing factors to the latter, the increased costs of agricultural inputs, reliance on rainfed farming instead of irrigation, inefficient government extension services, and prolonged dry spells were mentioned

In Ghana, the trend for both indicators goes down from mid-line to end-line but then it picks up again ex-post with 4% for hunger and 7% for poverty. The additional investigation into the reasons for this worrisome finding has revealed that the HH survey responses in Ghana were influenced by a recent government subsidy poverty profiling survey, whereby in an attempt to qualify for social support (subsidies) community members have been dishonest about the level of their wealth/poverty. Among the other explanations are the rising cost of living, the lack of a market to sell produce, and a decrease in use of their access to finances.

¹⁸ Famine early warning website <https://fews.net/southern-africa/malawi/food-security-outlook/june-2019>

¹⁹ C. Leigh Anderson, Travis Reynolds, Joshua D. Merfeld & Pierre Biscaye (2018) Relating Seasonal Hunger and Prevention and Coping Strategies: A Panel Analysis of Malawian Farm Households, The Journal of Development Studies, 54:10, 1737-1755, DOI: [10.1080/00220388.2017.1371296](https://doi.org/10.1080/00220388.2017.1371296)

This seemingly does not include cash, as the ex-post HH survey result shows that 92% of households have access to it (see section on Nkawanda below). Community members in the Nkawanda epicenter area seem to have trouble obtaining loans due to most community members reportedly lacking group security to access a loan²⁰, as well as general mistrust in financial institutions.

Ligowe, Malawi

In Ligowe, half of 40 MSC stories are about reduced hunger and improved nutrition. Among these, fourteen are from women. The stories refer to the positive effects of obtaining loans and applying learned modern farming methods. The latter is confirmed by HH survey results: with an almost 25% increase from the end-line, almost all farmers utilize improved practices (Figure 7). Further, five MSC stories (one of which was from a man) talk about reduced poverty due to successfully using credit for micro-businesses such as bartering pork for maize and selling maize, selling burned bricks, dry fish and second-hand cloth, selling kitchenware, and having a vending business. The stories are substantiated with HH survey results: the data shows that the proportion of people living on \$1.25/day has declined by 30% since the end-line²¹ (Figure 9).

Further, these positive trends (i.e. reduced hunger and poverty) are also translated into benefits for women: HH survey results show that their nutrition status has improved from the end-line to ex-post by 0.6 points (Figure 10).

Indicator	mid-line	end-line	ex-post
Mean number of food groups consumed by women of reproductive age	2,6	2,5	3,1

Figure 10 Indicator 2.2 Minimum dietary diversity for women, Ligowe

Finally, all MSC stories are positive, although two out of 40 are slightly less optimistic about prospects due to poor and erratic rainfall affecting maize production. If it was not for this environmental factor, according to community members the yield might have been higher. Further, although all stories containing a loan element report on repaying them, it is also mentioned that due to an increase in farm input prices LICODO could provide farmers with only one bag of fertilizer per HH in 2018-2019, instead of two bags in 2016-2017. Moreover, in the same period LICODO could support fewer farmers from the same fund: around 90 in 2018 and 2019, compared with 150 farmers in 2016 and 2017.

²⁰ Members of the group receive a loan, but when a member fails to pay back the other members cannot access further loans until the defaulting amount is paid back.

²¹ Since the mid-line and end-line, the Poverty Probability Index has been updated to reflect the new international poverty line of \$1.90/day rather than the previous \$1.25/day. For more, visit <https://www.worldbank.org/en/topic/poverty/brief/global-poverty-line-faq>

38-year-old female, Ligowe

We used to produce inadequate food which could not last the whole year and hunger was the “order of the day”. It was very shameful as sometimes we had to beg food to survive. In 2016, we received training on recommended farming practices and also got a fertilizer loan. Following this training, I produced about 15-50 kg bags of maize from the same piece of land I used to produce less bags of maize. From that time, my household has adequate food that lasts us whole year. Besides, I can sell part of the maize for pay school fees for my school-going child (K8,000 per term) as well as meet other household needs such as clothing, soap, salt and other basic household needs.

59-year-old male, Ligowe

In 2018, I got a 1-50 kg fertilizer loan from LICODO (two members were paired up to equally share one bag of basal fertilizer and one bag of top dressing. The 1-50 kg bag I got was half basal dressing and half top dressing). In addition to the fertilizer loan, animators trained me on recommended modern farming methods such as correct ridge and plant spacing and soil and water conservation structures. During the season (2017/18), I harvested twelve 50 kg bags of maize from same piece of land I cultivated before but never harvested as much as I did. The fertilizer loan from LICODO came at a critical time when my family was not included in the government-funded Targeted Inputs Subsidy where selected households are given coupons to purchase fertilizer and maize seed at heavily subsidized rates. Without the loan, things would have been very desperate. Nonetheless, maize production has often been affected by erratic rainfall patterns that have become regular in recent years, making repayment of loans difficult. Although 2017/18 maize yield was better than any of the times before, it might have been better than this had the rainfall been better.

Textbox 2 Selected MSC stories about poverty and hunger, Ligowe

Nkawanda, Ghana

Many MSC change stories from Nkawanda are categorized as related to land productivity, while the content of stories talks – analogous to those from Ligowe – about an increase in yield (of diversified crops) due to loans and training received from the Nkawanda epicenter. Notably, stories of older community members speak more about women empowerment. While all MSC stories are positive, the HH survey results seemingly contradict this: ex-post data shows moderate hunger increasing, plus two households out of 237 facing severe hunger (Figure 11).

Indicator	Midline	End-line	Ex-post
Prevalence of households with moderate or severe hunger	20,55%	8,65%	12,66%
moderate	19,18%	8,65%	11,81%
severe	1,37%	0,00%	0,84%

Figure 11 Indicator 5.1: Prevalence of households with moderate or severe hunger, Nkawanda

Poverty rates ex-post also increased compared with the end-line, although this indicator is trickier to compare over time as the definition of poverty changed during the observed period. Poverty is currently measured as the proportion of households below the poverty line of \$1.90 per day. According to this definition, ex-post PPI in Nkawanda is about on par with the

national average, although it worsens when measured as the proportion of households below \$1.25 per day (Figure 12).

Indicator	Midline	End-line	Ex-post	Comparison to national average
PPI: Proportion of households below the poverty line				
National			32,22%	23,40%
\$1.25 per day	15,52%	8,93%	16,97%	
\$1.90 per day			13,54%	13,30%

Figure 12 Indicator 7.1: PPI: Proportion of households below the poverty line, Nkawanda

The HH survey results show worrisome trends but they are inconclusive without additional research due to the above-mentioned explanation of data being influenced by the (loaded) aid program survey carried out in the same area around the same time. Indeed, most of the other indicators measuring the prevalence of hunger and malnutrition in Nkawanda the epicenter area show positive trends: 96% of smallholders are applying improved farm management practices, 92% of HHs have access to cash, 80% of them are consuming animals, and 63% of HHs are using a home garden compared with 38% in 2016 (see Figure 13).

Indicator	Midline	End-line	Ex-post
Average number of practices implemented		2,19	2,88
Proportion consuming animals in household	44,04%	50,27%	79,67%
Proportion of households with at least one child enrolled in school meal program	33,73%	26,95%	51,19%
Proportion of households using home gardens		38,38%	62,87%
Proportion of households using improved storage facilities		8,65%	1,95%
Proportion of households with access to cash	94,01%	90,81%	91,98%
Proportion of households participating in food processing training	1,38%	8,65%	0,42%
Proportion of smallholders applying improved farm management practices	72,62%	75,76%	96,00%

Figure 13 Indicator 5c: Measuring the prevalence of hunger and malnutrition, Nkawanda²²

57-year-old male, Nkawanda

What to eat was a problem, how to pay my children's school fees was a problem, and I didn't also know how to plant on my farm. We didn't care about the process of planting to yield good products. The loan I took helped me invest in my farm. I have expanded the products on my farm and this has really helped me earn enough money. I am now respected in my community because of my growth. The Hunger Project also taught me how to save money, take care of my children to school, and I am now a chairman in my community school.

²² The evaluation study could not conclude whether 51% of households with at least one child enrolled in a school meal program is a positive or worrisome sign. In addition, it is unclear whether this is a seasonal or permanent pattern.

31-year-old female, Nkawanda

I didn't have a place to make my products and sell. When it rains it affects our pot making and this really affects my business. The Hunger Project team build us a place to market and sell our products(pottery making). Now I am able to take care of my children to school because I work and get a lot of profit. I also learned about family planning which has really helped me in birth control.

Textbox 3 Selected MSC stories about poverty and hunger, Nkawanda

4.2 Access to and Use of Health Resources

One-quarter of the 99 MSC stories collected from both countries are about improved health. Around 20% of them talk directly about the epicenter health programs contributing to the positive health results, some due to improved hygiene, others due to AIDS-preventive behavior, yet others due to better family planning. In addition, women's MSC stories categorized under themes of hunger and poverty are partly about the improved health of their children due to better nutrition.

the HH survey complements the qualitative data. Among others, an indicator of children's health – the proportion of children under five who sleep protected by a bed net – is steadily increasing over the years in both epicenter areas. From the end-line to ex-post, in Ligowe it saw a 13% increase and in Nkawanda 35% (Figure 14). The latter is partially credited to the increase in bed net distribution by GHS.

Indicator	mid-line	end-line	ex-post
Proportion of children under 5 who sleep under a bed net, Nkawanda	65,74%	44,35%	80,50%
Proportion of children under 5 who sleep under a bed net, Ligowe	72,46%	69,95%	83,44%

Figure 14 Indicator 6a: Children sleeping under a bed net, both countries

27-year-old female, Ligowe

For a long time, I didn't know how I can protect myself from HIV/AIDS. LICODO conducted community HIV/AIDS awareness and sensitization. Now I know that HIV is a virus that causes AIDS and that AIDS is a full-blown HIV. I also know how I can protect myself from HIV infection including using male or female condoms when having sex. This knowledge has helped me take the necessary steps to stay free of HIV infection.

64-year-old female, Nkawanda

I used to help the women to deliver, but I was doing it at home. I didn't have any license in doing that. I am able to help the women to deliver due to the license and training I got from the project. I am able to charge the women for their service and take care of my children and grandchildren. I pay their fees.

Textbox 4 Selected MSC stories about health, both countries

4.3 Literacy and Education

The ex-post results regarding literacy and education are quite positive. The HH survey illustrates (Figure 15²³) that in Malawi enrollment in primary and secondary education continued a positive trend for both boys and girls. 90% of children aged 4-18 are in school

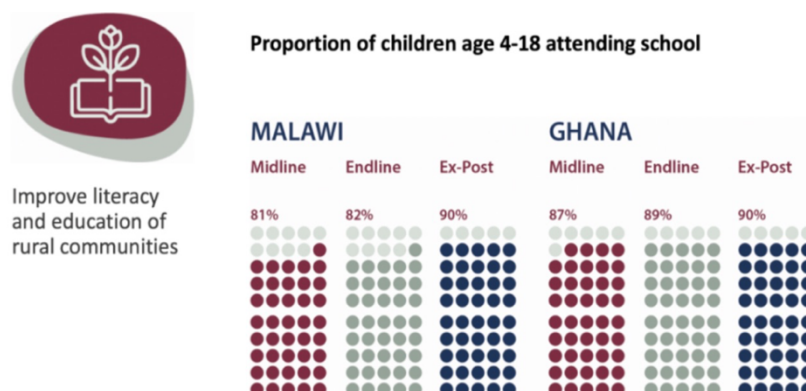


Figure 15 Education, both countries

around the Ligowe epicenter. In Ghana, education results have also improved overall, although girls are doing better than boys. Despite the secondary education results improving only slightly, they are still higher than the national average. Primary education results have also improved compared with the mid-line but dropped slightly in comparison with the end-line. Primary education results are also higher than the national average (Figure 16)²⁴.

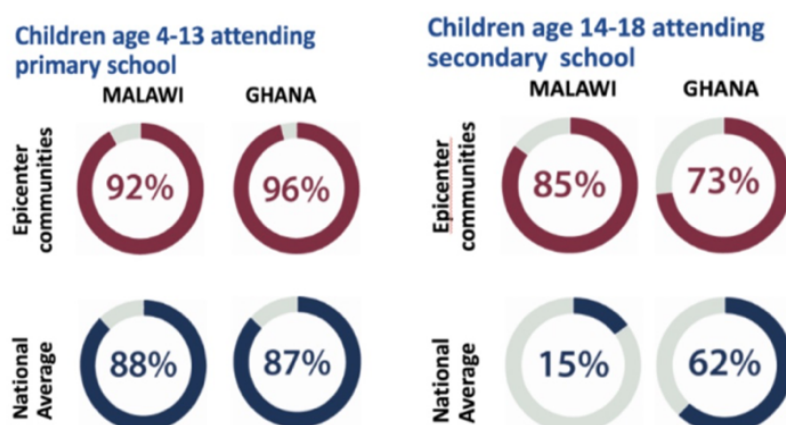


Figure 16 Education compared to national average, both countries

In both epicenters, the key contributing factor mentioned is sensitization/awareness-raising on the importance of education. In addition, based on the well-researched positive correlation between earnings and education²⁵, it can be inferred that overall decrease in poverty has also been pushing this trend up.

Narrative analysis of MSC stories also confirms this, whereby an increase in income in 75% of cases is said to be used for fees for schooling children.

Further, in both epicenters, the proportion of youth not in education or employment is around 20%, which is 10% lower than the national averages (Figure 17). In other words, youth

²³ Source for national averages in Malawi: <https://millenniumindicators.un.org/unsd/mdg/Data.aspx>. Source for disaggregated data on primary and secondary education by gender in Malawi: <https://www.unicef.org/esa/sites/unicef.org.esa/files/2019-04/UNICEF-Malawi-2018-Education-Budget-Brief.pdf>,

²⁴ Source for national average in Malawi: <https://www.unicef.org/esa/sites/unicef.org.esa/files/2019-04/UNICEF-Malawi-2018-Education-Budget-Brief.pdf> Source for national average in Ghana: <https://www.indexmundi.com/facts/ghana/school-enrollment-2016-data>

²⁵ <http://blogs.worldbank.org/education/strong-link-between-education-and-earnings>

at the epicenter areas are in school, job training, or employed at higher rates than the national average. In Nkawanda, fewer male youths are at school, job training or employed, while in Ligowe the same is true for female youths.

Indicator	ex-post	national average
Proportion of youth not in education, employment or training, Nkawanda	22,09%	30,50%
women	20,00%	33,30%
men	23,91%	27,70%
Proportion of youth not in education, employment or training, Ligowe	20,35%	32,90%
women	27,27%	41,40%
men	13,79%	23,60%

Figure 17 Indicator 4c: Proportion of youth not in education, employment or training²⁶

21-to-35-year-old male, Ligowe

The benefits of adult literacy motivated me to encourage my wife to start adult literacy classes. Having my wife attend adult literacy classes was very beneficial to me because previously, my wife used to have difficulties doing simple accounting of the basic household finances that I often gave her for home use. I ended up getting frustrated and managing all the household finances myself. After encouraging y wife, she enrolled for the classes in 2017 and at the moment, she is able to read and write and have also attained numeracy skills which have enhanced her skills to handle basic household finances. Before she knew how to read and write, we used to face some family strife bordering on suspicion. When I received a letter, she would sometimes suspect it was from a girlfriend. Now, when I receive a letter, she can also read and thus understand that it is not from a girlfriend or it is not about anything bad. This has improved my relationship with my wife.

25-year-old female, Nkawanda

Things were not going well because I had no helper. I was really disturbed about how to further my education. I didn't have confidence but with the teaching, I am able to speak well in public now. In the past, I was worried about how to get money to further my education, but with the help of the Hunger Project, I was able to get a loan to further my education and I now work as a journalist. Also with the teaching I also got, I am able to speak well in public. And also with Adult Education, most elderly people are now able to read and write. Teenage pregnancy has also reduced.

Textbox 5 Selected MSC stories about education, both countries

²⁶ Source for national average in Ghana: <https://data.worldbank.org/indicator/SL.UEM.NEET.MA.ZS?locations=GH> (2017 data); Source for national average in Malawi: <https://data.worldbank.org/indicator/SL.UEM.NEET.ZS?locations=MW> (2017 data).

4.4 Access to Safe Drinking Water and Sanitation Facilities

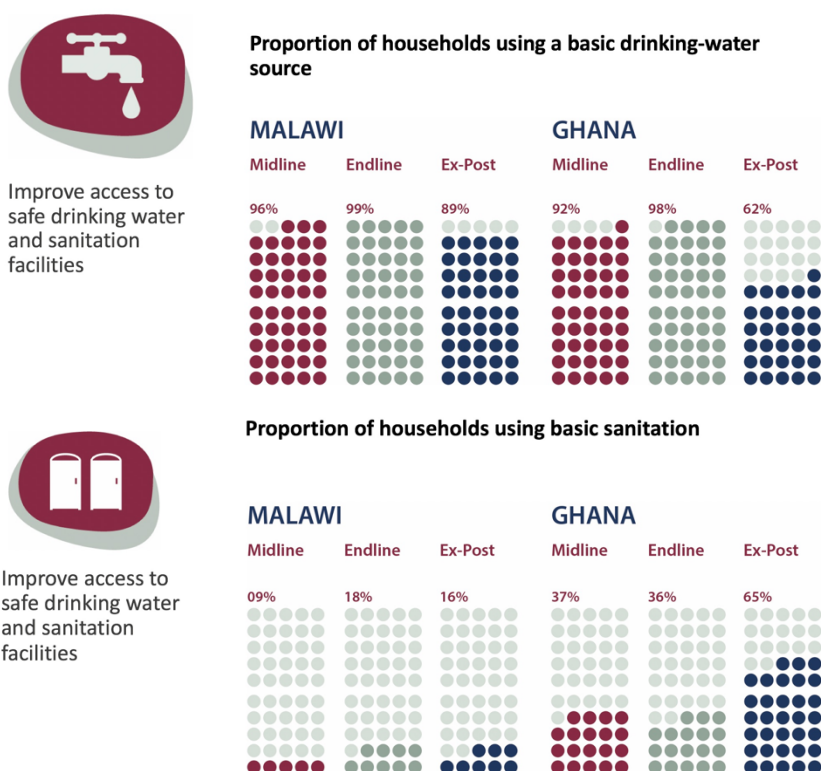


Figure 18 WASH, both countries

In comparison with the positive overall results in health and education, water and sanitation (WASH) results present a mixed picture. According to the HH survey (see Figure 18), access to basic sanitation in the Ligowe area is a struggle with only 16% using it. Moreover, there is a 2% decrease from the end-line. The main reason for this seems to be the quality of latrines: the temporary latrines are reportedly vulnerable to heavy winds and rains, while more resistant ones remain unaffordable.

By contrast, in Nkawanda the proportion of the population using basic sanitation has increased from 36 to 65%, largely credited to the construction of new KVIPs.²⁷ This increase in use of basic sanitation is an encouraging sign as a large increase in households using basic sanitation also improves health outcomes.

Access to a basic drinking water source is worsening as the number of households who have access to clean water is declining in both epicenter areas, in Ligowe by 10% and in Nkawanda by 38%. A partial explanation for this surprisingly undesirable trend is found in an update to the definition of the indicator measuring access to basic drinking water. The new definition of "basic drinking water"²⁸ – updated in 2017 (a transition from the MDGs to the SDGs, rolled out in 2017), a year after the end-line survey took place – factors in total time collecting water (while it was not previously a factor). Accordingly with the new decisions, unless one spends less than 30 minutes per day collecting water, it is not considered basic access. The adjustment of data for consistency and comparison purposes results in 96% of people having access to clean water at the time of the ex-post study in Nkawanda. This is only a 2% decrease

²⁷ the Kumasi Ventilated Improved Pit Latrine (KVIP) is a popular latrine design developed by Albert Wright at the Kumasi University of Science and Technology (now the Kwame Nkrumah University of Science and Technology) in the early-1970s. The KVIP is a twin-pit VIP latrine, which allows the contents of one pit to compost while the other pit is in use.

²⁸ https://www.who.int/water_sanitation_health/monitoring/coverage/monitoring-dwater/en/

instead of a 38% decrease. Similarly, in Ligowe, adjustment of data gives us the same percentage (96%) of households with basic drinking water ex-post, showing only a 3% decrease instead of 10%. Notably, the proportion of the population with access to drinking water is higher in both countries than regional averages: in Ligowe it is 89% compared with the regional average of 65%²⁹ and in Nkawanda 62% compared with the regional average of 56%³⁰.

Nonetheless, a decrease in access to water still remains. An explanation given during the sense-making event in Ligowe refers to damaged mechanic pumps for boreholes and failure to collect monthly contributions from community members for maintenance/repair. The participants of the learning event in Accra highlighted a limited number of boreholes (some communities only have one) and low groundwater level.

Female, Ligowe

We did not have sanitation facilities (toilet, a rubbish pit, kitchen) and did not know good sanitation practices. My household used to defecate openly in the bush, through rubbish indiscriminately or just left it on the ground to be blown around by the wind. Due to poor sanitation practices, we were unhealthy and frequently suffered from diarrhea and other sanitation-related sicknesses. However, animators from LICODO visited our and other households to teach us about good sanitation practices and the need to have sanitation facilities on the home. Following the training, we constructed sanitation facilities and adopted good sanitation practices. Now, my household no longer suffers from sanitation-related sickness as often as we used to. We can use our time productively instead of continuously nursing sicknesses.

Textbox 6 Selected MSC story about WASH, Malawi

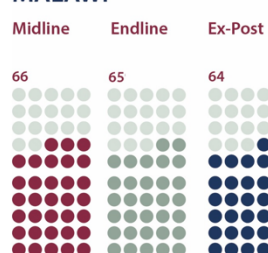
4.5 Empowerment of Women and Girls



Empower women and girls in rural communities

Women's Empowerment Index

MALAWI



GHANA

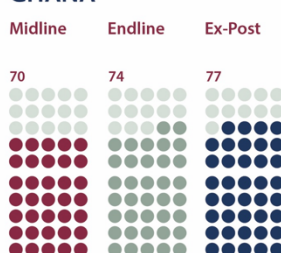


Figure 19 WEI, both countries

Among the 99 MSC stories, only four directly talk about women empowerment. However, as previously mentioned, almost all stories of women are above all on being empowered to run their households, earn money and participate in the community life on an equal footing to men. This is confirmed by improvement in the agency part of Women Empowerment Index (WEI),³¹ i.e. women are better able to make decisions and exercise

²⁹ Rural averages, source: <https://washdata.org/data/household#!/table?geo0=country&geo1=MOZ> (data 2017)

³⁰ Rural averages, source: <https://washdata.org/data/household#!/table?geo0=country&geo1=GHA> (data 2017)

³¹ https://thp.org/wp-content/uploads/2015/10/THP_WEI-Intro_10-12-151.pdf

control over resources and they are free to exercise these decisions without fear of repercussion. Having said that, while there is an increase in the agency and a minor increase in overall WEI Nkawanda, there is a minor decline in overall WEI in Ligowe (see Figure 19).

When scrutinizing indicators that make up WEI for an explanation, a decline in income is observed in both countries, which could be directly tied to the declining proportion of women accessing financial services (see Figures 20 and 21). Remarkably, while income and resources decline, the leadership follows with a significant drop.

Indicator	mid-line	end-line	ex-post
Women's Empowerment Index Ligowe	66,25		63,95
Agency	14,09		14,26
Income	15,41	14,38	12,92
Leadership	19,84		14,71
Resources	13,97	16,5	18,32
Time	2,95	4,01	3,74
Proportion of adults accessing financial services Ligowe	22,75%	21,70%	22,82%
women	31,80%	28,88%	27,67%
men	11,45%	12,60%	17,24%

Figure 20 WEI disaggregated and access to fin. services, Ligowe

Indicator	mid-line	end-line	ex-post
Women's Empowerment Index Nkawanda	69,66	73,99	76,95
Agency	17,08	17,06	19,57
Income	14,97	15,27	14,41
Leadership	15,54	16,01	12,60
Resources	14,55	16,33	16,00
Time	7,52	9,32	14,37
Proportion of adults accessing financial services Nkawanda	29,17%	32,74%	20,72%
women	26,76%	27,95%	18,99%
men	33,17%	38,97%	23,45%

Figure 21 WEI disaggregated and access to financial services, Ligowe

As possible explanatory factors for the decline in women's income, participants of the learning event in Blantyre identified poor functioning of the WEP committee and microfinance program of LICODO (SACCO), a lack of community-based credit schemes like voluntary saving groups (VSLA) and remaining gender stereotypes. The HH survey results possibly confirm this: the proportion of community who believe that women and men jointly share responsibility for making household decisions has only slightly increased between the end-line and ex-post by 2% in Ligowe, while more considerably in Nkawanda by 18% (figure 22).

Indicator	midline	end-line	ex-post
Proportion of the community who believe men and women jointly share responsibility for making household decisions Ligowe	32,38%	32,53%	34,53%
Proportion of the community who believe men and women jointly share responsibility for making household decisions Nkawanda	-	56,94%	75,10%

Figure 22 Indicator 2f: Gender equality at HH level

Other markers of women empowerment have been encouraging. In Malawi, child marriage continued to decrease from the mid-term and end-line and in Ghana it remained about the same, but still much lower than the national average (see Figure 23).³² Further, in comparison with the national average, the percentage of young people marrying as adults is considerably higher in both epicenter communities, by 26% in Malawi and by 15% in Ghana. Among the factors contributing to the further decrease in the prevalence of child marriage in Ligowe and its significantly low figures compared with the national average in Malawi are community by-laws that penalize parents who allow child marriage and continuous advocacy against it.

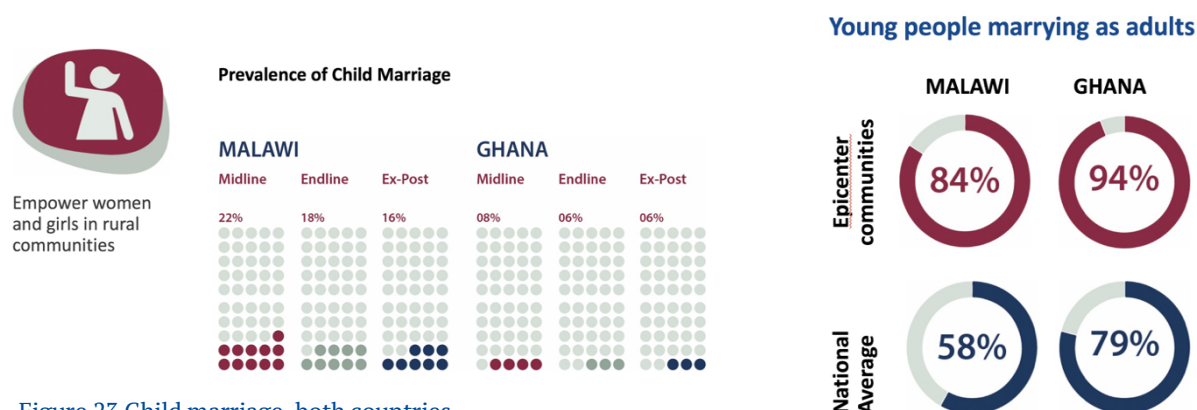


Figure 23 Child marriage, both countries

41-year-old female, Ligowe

I have been empowered through WEP of LICODO. I used to wholly depend on my husband to provide for all my and the household needs (soap, salt, etc.). However, after participating in LICODO WEP sessions on how and what women can do to be independent and not just rely on husbands, my eyes opened up. I immediately started a fish vending business using a K50,000 loan from the SACCO. The business has been doing well. I use profits from the business to meet some of the basic households such as maize milling costs. I have repaid the loan and grown my business capital from K50,000 to K80,000 currently.

36-to-65-year-old female, Ligowe

Before I got trained by LICODO, my husband used to abuse me but I could not leave because he provided for all my and the household needs. In 2018 I attended women empowerment training by LICODO during which I learned about recommended action to take when a woman is abused. I also learned that a woman can be economically independent by engaging in IGAs. Now, when I get abuse and violence from my husband, I report to Social Welfare or Police Victim Support Unit where we get counseling. The frequency of abuse has reduced because my husband knows that I can report him to authorities. The relationship with my husband is better because he no longer abuses me as he did before.

³² Sources for the national average, Ghana: <https://www.girlsnotbrides.org/child-marriage/ghana/>; Malawi: <https://www.girlsnotbrides.org/child-marriage/malawi/> (both 2017 data).

63-year-old female, Nkawanda

I didn't know the value of education, my children were not going to school, I didn't have money to start a business so I was really worried about the problems of my children. The women Empowerment really changed me. I had a lot of knowledge and I understood the essence of education. I also took a loan which really helped take my children to school. Now, I have my own properties and my daughter is now a journalist. Literacy and Education training also benefited us a lot. I am also an HIV animator now.

Textbox 7 Selected MSC stories about WEI, Malawi

4.6 Mobilization of Rural Communities to Achieve Their Development Goals

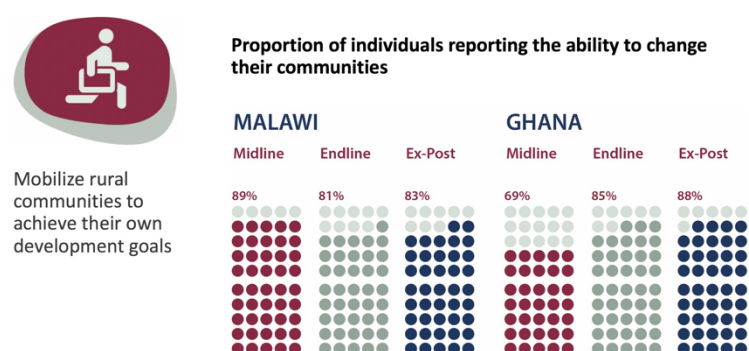


Figure 24 Community mobilization, both countries

According to the HH survey results, the proportion of individuals reporting the ability to change their communities – one of the key indicators to measure rural community mobilization – has continued to improve (Figure 24).

In both epicenter areas, 3% more people have been motivated, confident, and self-reliant to improve their lives and their communities every day. On the other hand, the proportion of individuals reporting the ability to change their communities shows a decline from mid-line in Ligowe. This could be related to the high level of poverty remaining in the country and (to a lesser extent) in the Ligowe epicenter area.

Indicator	midline	end-line	ex-post
Proportion of women reporting the ability to change their communities Nkawanda	64,77%	79,58%	84,97%
Proportion of men reporting the ability to change their communities Nkawanda	77,38%	94,37%	96,15%
Proportion of women reporting the ability to change their communities Ligowe	85,85%	82,23%	79,25%
Proportion of men reporting the ability to change their communities Ligowe	97,30%		93,94%
Proportion of community members who perceive leaders to be successful in addressing community concerns Nkawanda	61,54%	68,54%	71,60%
1b women	61,93%	73,94%	71,51%
1b men	60,71%	57,75%	71,79%
Proportion of community members who perceive leaders to be successful in addressing community concerns Ligowe	70,63%	71,19%	81,09%
1b women	70,28%	70,73%	81,34%
1b men	71,62%		80,30%

Figure 25 Community mobilization and empowerment, both countries

MSC story analysis also finds that while 80% of storytellers from Ligowe strongly agree that they can change their community, few strongly disagree, despite one of the storytellers becoming a chairperson of the village development committee during the epicenter

functioning. Moreover, in both countries, there is a decline in the perception – especially among women – that leaders are successful in addressing community concerns (Figure 25). The reasons for both of these trends – the ability to change their communities and perception of leaders being successful in addressing community concerns – need further investigation.

4.7 Self-Reliant Epicenters

Three years after declaring them as self-reliant, both epicenters are continuing operations.

LICODO Board and Executive Committee have undergone a due diligence process by WFP and the Royal Norwegian Embassy and have worked on institutional capacity development, including topics of human resource management, finance management, procurement, conflict of interest, harassment, job description for key positions, whistle-blower – fraud and corruption, segregation of duties, and a monitoring, evaluation and accountability framework. LICODO has established an administration/management structure and system, registered with statutory institutions (CONGOMA and the NGO Board), developed a LICODO program strategy and submitted two project proposals for funding: one to WFP and another to the Royal Norwegian Embassy. LICODO has been awarded one grant of MK18 million (an equivalent of USD 25,000) for the 5050 Campaign in Neno and Mwanza districts.

Having said that, the LICODO board has reported on their analysis of funding opportunities. According to this analysis, donors make it difficult for local initiatives/community groups to compete for funds with international organizations as they more easily pass the threshold criteria to access funds. As a result, money is (re-)distributed among international organizations, leaving local organizations with little possibility for additional fundraising. The LICODO board has also reported on the opportunity of Malawi NGO law potentially creating funding opportunity for local NGOs, as well as the strategy that LICODO should link up with international NGOs to secure funding.

In terms of generating income from own resources, LICODO has faced several challenges. First, due to poor rainfall affecting the yield, repayment of loans has been low. Second, LICODO has not been able to make optimal use of their premises and generate income from its ten-room lodge and restaurant (i.e. IGAs envisaged at the time of becoming self-reliant). Rent repayment has been low and meager, reportedly due to the inconvenient location of the premises to attract business and lack of skills in hospitality management by staff.

As LICODO management has struggled with the efficient use of limited funds, they have discovered unrealistic expectations from the board of trustees that travel/mobilization costs of meetings/trainings of thematic leaders and animators would be sponsored. According to the LICODO management presentation during the learning event in Blantyre, these expectations illustrate the poor commitment of some board of trustees members.

The main downside of LICODO's lack of funds – according to its board – has been the restricted possibility to motivate the animators with further capacity development activities. However, despite this, 58 out of 120 LICODO animators are still active. The main **strategic question** for them remains how to motivate animators (there is a strong link to training), when some donors do not fund it and IGAs are insufficient to cover costs.

A similar picture is seen in the Nkawanda epicenter. For more information, see the snapshots of “epicenter health” in Table 4.

Table 4 LICODO ex-post snapshot

	Questions	LICODO	Comments LICODO	Nkawanda Epicenter	Comments Nkawanda Epicenter
1.	In the last three years, did epicenter <u>revenue exceed expense</u> ?				
	2017	YES		YES	
	2018	YES		YES	
	2019	NO		YES	
2.	Does the epicenter have at least one <u>electrical connection</u> ?	YES	The connection works almost 24 hours a day unless there is power interruption	YES	The electrical connection is very regular and dependable
3.	Does the epicenter executive committee have <u>democratic operations</u> ?	YES		YES	
4.	How many <u>women</u> are on the epicenter executive committee?	5		4	
	How many <u>men</u> ?	5		5	
5.	How many <u>sub-committees</u> are still active?	4	Nutrition, WEP, Food Security, HIV&AIDS	3	Loan Committee, Social Enterprise, Epicenter Bank Board
6.	How many <u>income-generating projects</u> are active at the epicenter?	2		3	

7.	How many <u>community-initiated projects</u> are active in 2019?	2		7	
8.	Does the epicenter have an improved sanitation facility?	YES		YES	
	Does the facility work?	YES		YES	
9.	Does the epicenter have a clean water access point?	YES		YES	
	Does the water source work?	YES		YES	
10	Is there an <u>open health clinic</u> in the epicenter?	YES	It is in the epicenter radius (not in the epicenter building)	YES	The health clinic is attached to the epicenter building
11	Is the <u>clinic managed and staffed</u> by the government?	YES		YES	
12	When was the last <u>epicenter-led activity</u> ?	July 2019	Construction of two toilet at the epicenter	Oct 2019	Improving on the social enterprise project
13	Has the epicenter <u>applied for grant funding</u> since reaching self-reliance?	YES		NO	
	How many <u>applications</u> ?	3			
	How many <u>grants</u> have been received?	1	MK18 million (USD 25,000) for 5050 Campaign in two districts		

5. Conclusions, Recommendations and Strategic Questions

This section outlines conclusions based on the findings presented in the previous chapter as well as the following recommendations and strategic questions. The conclusions are organized around the evaluation questions (Figure 1) per criteria, combining inferences on effectiveness and impact. The recommendations are derived from learning events but also include MDF team's suggestions. Some areas require more strategic thinking and THP-wide deliberations. Therefore, the third section of this chapter outlines key strategic questions voiced during the learning events with links to the overall (beyond country offices) recommendations. The needs for further adequate research are also stated. The chapter concludes by stating the recommendations to epicenters and the THP country office made during learning events.

5.1 Conclusions on Effectiveness and Impact

To what extent have the nine goals of SR framework been met? What are the reasons behind their achievements and non-achievements? What have been the contributions of the program's key interventions in the improvements?



Reduced prevalence of hunger and malnutrition in rural communities, especially for women and children

Program in **Ligowe** has contributed to a positive trend of a reduced prevalence of moderate and severe hunger. The overall prevalence of hunger being lower than the rural average – albeit high – is a sign of THP program's positive impact. With its training in farm management practices, loans, and health and nutrition programs, the THP-supported epicenter has been effective in changing community members' behaviors in both farming practices and consuming nutritious foods. Similar contributions have been seen in the case of the program in **Nkawanda**. Although these contributions have been assessed as effective, the inconclusiveness of ex-post prevalence status limits the appreciation of the program's impact on hunger in Nkawanda.



Reduced incidence of poverty in rural communities

With its microfinance program in **Ligowe**, it has contributed to a positive trend of a 30% decrease since the end-line in the proportion of households below the poverty line (\$1.25/day). Loans have been essential to starting up/growing/diversifying micro-businesses of community members, among them many women. With the same caveat of inconclusive findings on the incidence of poverty in **Nkawanda**, ex-post PPI is on par with the national average, but worse when measured below \$1.25 per day. Although unconfirmed, higher costs of living and low demand/poor access to the market could be among the reasons for stagnant poverty here.



Improved land productivity of smallholder farmers

The program's effectiveness on improved land productivity has been outstanding. Indeed, the program has seen a steady gradual increase from the beginning to mid-term and end-term in farmers using improved practices, reaching almost 100% ex-post in **both epicenter areas**. This has been largely due to the training quality and, possibly due to the strategy of making attendance of the demonstration farms conditional to loans.



Improved literacy and education in rural communities

Enrollment in primary and secondary education has seen impressive results continued in **both epicenter areas**. Ex-post, the upward trend of school attendance has reached 90% of children (4-18 years old). In **Ligowe**, this has been true for both boys and girls, while in **Nkawanda** the attendance of girls has been better than for boys. Further, both primary and secondary education results have been higher than the national average. Moreover, in both epicenters, the ex-post proportion of youth not in education or employment has been around 20%, 10% lower than national averages. The program has contributed to these remarkable results by enabling families to pay schooling fees, due to increased income/reduced poverty.



Improved access to and use of health resources in rural communities

The program has contributed to improved health in rural communities of **both epicenter areas** by enabling the change of community members' behaviors related to better hygiene, nutrition, AIDS prevention, and better family planning. The program has achieved this by running effective animator-based awareness-raising programs on sexual and reproductive health as well as support for the improved food and nutrition security of families.



Improved access to safe and drinking water in rural communities

There has been a decrease in access to water by 2-3 % in **both epicenter areas**, although the proportion of the population with access to it has been higher than regional averages. The decrease has been credited to the factor beyond the program's control, including mechanic pumps for boreholes getting damaged as their use increases. However, the program contributions to address this factor – community water committees – have not worked sufficiently effectively to result in working maintenance/repair arrangements or alternative solutions for access to water.



Improved access to sanitation facilities in rural communities

Despite program effectiveness in changing hygiene behavior of community members in **Ligowe**, access to basic sanitation has declined from 18% in 2016 to 16% in 2019 due to the unfit quality of latrines for local conditions. By contrast, in **Nkawanda**, the proportion of the population using basic sanitation has increased from 36% to 65%, largely credited to the construction of new KVIPs. It can be inferred that albeit effective in resulting in improved hygiene practices, WASH program/initiatives without offering working solutions for basic sanitation infrastructure (durable latrines) have been ineffective in terms of having a positive impact on access to sanitation facilities.



Empowered women and girls in rural communities

The program has seen one of the longer-term effects of girls' empowerment in a significant decrease in child marriage, which has continued from the mid-term and end-line in **Ligowe** and remained at the same level in **Nkawanda**. In **both epicenter areas**, the percentage of young people marrying as adults has been considerably higher than the national average, a positive sign of program impact in this area. Furthermore, in **both epicenter areas**, the program has been effective in empowering women, specifically by enabling them to care better for their families, have sufficient income from farming and running micro-businesses on their own and use it for HH needs, children schooling and proper nutrition. In **Nkawanda**, the program has also seen an improvement in attitudes towards gender equality as ex-post most of the community members believe women and men should jointly share responsibility for making household decisions.

The ex-post results have also shown the declining proportion of women accessing financial services, followed by a significant drop in the leadership and the time (parts of WEI) and in WASH results. Combining this with a reduction in women's perception that leaders have been successful in addressing community concerns gives ground to infer that efforts in the empowerment of women have been more impactful in the HH domain and less in the public/community one. Although there have been numerous examples of individual women's empowerment, the declining trend suggests that these changes have not yet become sustainable. Based on the concept and research of 'critical mass' in women and politics research,³³ arguing that it takes a certain minimum representation (e.g. 30%) before the minority such as women are able to

³³ The debate on 'critical mass' in women and politics research can be traced back to three seminal works, two by Kanter, Rosabeth Moss. 1977. Men and Women of the Corporation. New York: Basic Books and and one by Dahlerup, Drude. 1988. "From a Small to a Large Minority: Women in Scandinavian Politics." Scandinavian Political Studies 11 (4): 275–98.

make a substantial difference in politics, it could be argued that such mass has not yet been reached. This conclusion is tempered by the realization that the envisaged change here is fundamental, while the time to achieve it is relatively short.



Mobilized rural communities that continuously set and achieve their own development goals

In **both countries**, the epicenters continue to function as mechanisms for community-led development. The infrastructure of both epicenters has been working, the committees have been functioning with women holding leadership roles, and community-initiated projects have been implemented. Further, significant efforts have been made – especially by LICODO – for institutional development and fundraising. This signs increase the likelihood of sustainability of the results in this area, although it has to be said that while the number of people who have been motivated, confident, and self-reliant to improve their lives and their communities has been gradually growing, the evaluation has not gathered sufficient evidence to claim that this is due to the epicenter contributions.



Improve environmental and climate resilience

The situation with the environmental and climate resilience has not been studied specifically for this ex-post study due to this goal having been added later to the program.

What are the views of community members in relation to the project results? What do they value most?

Community members seem to most strongly value contributions of the program in the areas of decreased incidence of poverty and hunger, i.e. training in farming practices combined with loans. They also appreciate information and skills received from health and nutrition as well as literacy programs. These findings are in line with the general picture in the development sector. It is not uncommon for program participants to appreciate a direct benefit and in-kind (visible) contributions above others. The simplest explanation is that seeing longer-term and more gradual (and complex) changes in their lives due to the programs is usually more difficult. However, when paying attention when bringing these changes in the limelight, as it has been done by facilitated reflection on the overall picture during learning events, community members have shown their appreciation for the process of reflection itself and pride in achieving better results as communities than regional/national averages. It can be inferred that enabling communities to celebrate their own achievements, reflect on the collective challenges and discuss ways forward has been among the most valuable contributions of THP ex-post epicenter self-reliance.

5.2 Conclusions on Sustainability

To what extent has the achieved progress been sustained after the exit of THP? How are the village institutions affected (local governance structures i.e. unit committees, assemblymen/ women, religious bodies, chieftaincy, others)? How do the epicenter institutions and pre-existent village institutions interact to sustain the achieved results?

The level to which the progress has been achieved varies per goal. Most positive trends have been seen in achieving goals of (a) **improved access to and use of health resources** and (b) **improved literacy and education**. Notably, both of these goals are in the areas, with more or less functional government services. It could be argued that by contributing to the improved economic status of families, the program has removed the main barrier (schooling fees) to their school attendance, and eventually to better performance in primary and secondary education. Similarly, by raising awareness on nutrition, hygiene, and sexual and reproductive health, the program has used the leverage point³⁴ of behavioral changes to make more optimal use of the existing health services, and thus to achieve better health results. With this line of reasoning, the positive trends in these two goals are seemingly more sustainable.

There are other goals such as **improved access to safe and drinking water and sanitation facilities** where it can be argued that without deliberate attention and interventions the progress reached might fade out or decline (further) in the long run. The reason for this argument is that as sustainable as behavioral changes are, they need to be combined with existing functional basic infrastructure (such as mechanic pumps and durable latrines suited for the local conditions) or alternative low-cost solutions in its absence. Seemingly, behavioral changes and the community efforts have less impact, especially in areas with high poverty and hunger, where other crucial elements of the system are not functioning properly. In case of WASH, this concerns the supply side: pumps, latrines or parts thereof, medium/small/micro-enterprises that produce parts and tools, vocational courses to train mechanics that service WASH infrastructure, (government) financial incentives to start up such medium/small/micro-enterprises, and the wider use of alternative practices such as rainwater collection, among others.

The sustainability of the positive trends in **reduced incidence of poverty, the prevalence of hunger and malnutrition** and **improved land productivity** also seem fragile in the long run, albeit not to the same extent as the WASH results. Similarly to WASH, behavioral changes in farming have been achieved, although the other elements of the system beyond the control of communities such as prices of agricultural inputs (seeds and fertilizers), climate-related hazards, continuous access to rural credit and market to sell produce remain

³⁴ Leverage points are places within a complex system (a corporation, an economy, a living body, a city, an ecosystem) where a small shift in one thing can produce big changes in everything (Meadows, Donella H. *Thinking In Systems : a Primer*. London ; Sterling, VA :Earthscan, 2009.)

unsupportive to them. This leads to the conclusion that unless alternative solutions are sought out and put in practice, the achieved results remain vulnerable in the long run.

Further, the goal of having **empowered women and girls in rural communities** has seen a positive trend. At the same time, the individual changes have not reached a critical mass yet to become transformative and therefore sustainable. Less strong but similar conclusions have been drawn on the more summative goal of having **mobilized rural communities that continuously set and achieve their own development goals**. Here, the continuous support from community leaders to epicenters, the dedication of animators and boards as well as projects initiated and implemented by the communities clearly show that achievements have been present. At the same time, the communities continue to face the challenges of poverty, access to water and sanitation, and women empowerment. In light of the conclusion that deliberate efforts of capturing and celebrating community mobilization successes are needed for resilient belief in the power of community initiatives, it can be concluded that sustainability in this area depends on continuous attention to community mobilization.

Finally, it has to be stressed that for overall sustainability a focus on including youth in community mobilization and addressing climate change for communities to become more resilient requires attention.

5.3 Lessons Learned

What are the lessons learned for work in similar epicenters and improvement of the delivery of the program and the achievement of its results?

First, the training components of epicenter programs targeting skills and attitudes in areas of farming practices, nutrition, hygiene, and sexual and reproductive health pay off in achieving sustainable behavioral changes.

Second, a combination of improved farming practices and loans (also in a form of agricultural inputs) produces effective results in terms of increased yield. It also increases the motivation of farmers to reapply learned techniques.

Third, animators are motivated by capacity development opportunities, not only increasing their knowledge and skills but also their status in the community. In the absence of such capacity development opportunities, encouragement and other stimuli are successful in keeping a smaller, more committed group of animators engaged.

Fourth, microfinance (loan) program becomes vulnerable in the post-reliance stage, and its poor performance in turn negatively affects a number of result areas including WEI (through reduced women's access to financial services).

Fifth and final, the placement of epicenter building contains a dilemma: while the clinic and model plots/gardens should stay close to the areas with the most vulnerable and poor, the

epicenter IGAs require being nearer to the consumers/users of the IGA services who are not necessarily the most vulnerable and poor. Professionalization of the epicenter as an organization, including administrative and financial arrangements fit for due diligence scrutiny from donors, increases its chances of successful fundraising, contributing to the sustainability of the epicenter activities.

5.4 Overall Recommendations and Strategic Questions

Recommendation 1: Continue with targeting behavioral changes with training in areas of farming practices, nutrition, hygiene, and sexual and reproductive health. Pay more attention to attracting young people. Continue to promote more youth-led/youth-centered programs.

Recommendation 2: Develop capacities for market analysis and business planning to boost the profitability of epicenters' IGAs. Focus earlier on and more professionally on fundraising and business development strategies for epicenters. Promote peer learning between experienced self-reliant epicenters and others on the way to self-reliance, e.g. by facilitating LICODO leadership sharing their successful experiences with other epicenters in Malawi.

Strategic question A: In the knowledge of microfinance program becoming vulnerable post-reliance and a need for the continuous capacity development of animators, how can sustainable income be ensured for epicenters (from IGAs and fundraising) for such development?

Strategic question B: How can serving the most marginalized and poor (i.e. bringing clinic and a model plot/garden in their vicinity) be combined with ensuring that the epicenter IGAs attract customers (i.e. being closer to the users of the IGA services)?

Recommendation 3: For the goals where behavioral changes are insufficient to make transformative changes (like WASH results in the absence of basic infrastructure), pay more attention to the supply side with the following options: (3a) enrich your programs, e.g. train young people to become water pump mechanics; (3b) combine your programs for greater impact, e.g. use a loan component to stimulate micro-businesses that make parts for WASH infrastructure; (3c) build in-country partnerships with complementary WASH initiatives earlier on; (3d) advocate for government support of developing/strengthening WASH infrastructure and investing in small/micro-businesses producing/servicing its parts.

Strategic question C: How and when have drilling and equipping boreholes worked as a solution for access to safe and clean water? If people stop using boreholes, does it mean that they did not need them in the beginning? Did THP impose a solution on communities that they did not need? How does 'providing/giving' boreholes fit in our 'no handouts' policy? How can WASH results be made sustainable including alternative solutions to delivering infrastructure (e.g. rainwater collection)?

Further investigations are needed to ascertain how broken boreholes/mechanic handpumps affect women empowerment (e.g. the more time that a woman has to spend on the water, the less time that she has for other issues_. How does this relate to the agency (WEI)?

Recommendation 4: Strengthen achievements in agriculture with a value chain approach. Support linkages within epicenter phases 2 and 3 for more sustained economic prosperity. In addition, combine own programs with those of other organizations addressing climate change, e.g. improve the farming program with the smart use of rainwater management, soil conservation, permaculture, reforestation, food forestry, organic fertilizers.

Strategic question D: How can THP link agriculture to value chains proactively and in a community-led manner?

Recommendation 5: Strengthen WEP to create a critical mass of women for transformative change. Promote the discussion among men and women on how they can empower each other and organize themselves from early on in the program.

Recommendation 6: To put gradual changes in community mobilization under the limelight, make a deliberate effort (e.g. by including annual retreats in the strategic plan of the epicenters) to stimulate self-reflection as well as defining and celebrating successes and champions of change in community mobilization.

Strategic question E: How is it possible to move from individual-/HH-level achievements/successes to more collective ones to create transformational change (for the whole community)?

Strategic question F: Where have the positive mindset shifts been seen and where not? How is it possible to influence a shift from 'receiving training and loans' to taking initiative in one's own hands?

Recommendation 7: Continue with ex-post evaluations. Start with the HH survey and after analysis leading to the discovery of areas with answers to "why" questions needed, employ MSC story collection and analysis or other complexity-aware methods like outcome harvesting to address them. Conclude with a sense-making event for joint analysis and action planning. To maintain consistency, consider adjusting methodologies for mid-line and end-line evaluations from the current practice of collecting quantitative and qualitative data at the same time to first analyze trends of HH survey and then gather data to answer questions on remarkable findings with the FGDs. This would lead to an integrated report and replace having a database on the one hand and a narrative report on the other.

5.5 Specific Recommendations for the Epicenters and Country Offices

Recommendations to LICODO

#	Topics	Recommendations	Responsible	Comment
1	WASH	revamp existing water committees, and set up new ones	LICODO executive committee(LEC), which have WASH animators as members Traditional Leaders (TLOs)	VCAs on ownership and predicting
2	Food security	Grow drought resilient crops: Sorghum, ground nuts, other crops	LEC TLOs will support	Need technical expert
3	Women empowerment	1. borehole rehabilitation 2. reforestation 3. encourage openness to VSLAs 4. revamp make champions for equal participation in HH	LEC and TLOs same same women empowerment leader, chief	Encourage partners

Recommendations to THP Malawi

#	Topics	Recommendations	Responsible
1	WASH	• Link WASH program to microfinance/VLA e.g. sun plat for latrine business • Focus more on (permanent) behavioral change • Bring in experts on theater for change and other methods to disseminate key messages (not rely only on animators)/Consider new partners • Diversify programs/do not only rely on animators	THP Malawi
2	Food security Farmers as seed growers	• Encourage use of compost, agroforestry, and promote organic farming • Demonstration plots at village level (with lead farmers) • Make use of information from government: how farming can be done, heatmaps, etc • FS animators put more focus on training farmers, instead of food bank so that they work as lead farmers	THP Malawi

		Document the Ligowe foodbank model for learning and sharing. The way foodbank is managed ineffective, maize is sold to purchase fertilizers, and is empty/does not serve as a bank during lean months. One solution to this is to promote organic fertilizers, so maize is not sold to purchase (ever increasingly expensive) inorganic fertilizer	
3	Post self-reliance	Prepare for self-reliance and IGAs: - Introduce in year 4/5 capacity development of board and executive committee in NGO management and leadership; - conduct due diligence in year 6/7; - build an institution so the transition leads more smoothly to running NGO/community organization, including hands on knowledge of how to motivate volunteers	THP Malawi
5	IGA	- Rethink location of IGAs - IGA is only used for running office and maintenance, But is should cover also basic program e.g. animator training - Be more creative about IGA, where is the money, what do people need, serve the market - Include in animator=> lead farmers awareness-raising issue of demanding government extension service	THP Malawi
3	VSL (village savings and loans) women empowerment	- Look for VSL best practices in Malawi - Link VSL to skills development? - Increase number of animators in VSL - WEP animators to bring a broader message/broader issues of time e.g. energy saving cooking stoves - use male champion model	THP Malawi
	Child marriage	- Advocate against child marriage; join an existing movement to end child marriage in Malawi - Ensure that there are support mechanisms for child brides when they withdraw from the marriage - THP NL to share findings of child marriage prevention programs (from other countries) with Malawi	THP NL

Recommendations to THP Ghana

#	Topics	Recommendations	Responsible	Timeline	Resources and mobilization
1	WASH	- More mechanized boreholes - More community/household water taps - Strengthen partnership with District Assemblies, NGOs and Embassies - Strategies for construction of household toilet facilities (saving scheme). Thus, where individuals save as a group so that they can be supported by donors	- Epicenter leadership - Community Leadership/Unit Committee e.g. Assemblyman, Chiefs, Municipal Assemblies	2019-2021	Funds/District Engineers
2	WEP	- Increased women empowerment education - Increased access to loans by women - Women-centered income-generating activities - Increasing women literacy - Promote and encourage women participation in leadership	- WEP Animators - Microfinance(MFP) Program Officers - Municipal Assemblies	2020-2021	Fund/Assembly/ Business development partners
3	Community Mobilization	- Community development plan - Community strategies to mobilize resources, e.g. project savings scheme for new project - Institute community accountability sessions	- Assemblyman - Chiefs	2020-2021	Funds
4	Microfinance	Improve repayment of loans by - Digitizing the micro credit program (mobile money transfers) - Increase microfinance staff/ collection agents	THP/MFP/Dept. of Coop	2020-2021	Funds
5	Food Security	- Ensure questionnaire administration/design reduces incidence of interviewee playing vulnerable - community validate of poverty	THP/MEL	2020/2021	Funds/staff capacity
6	Poverty(Low Income)	Diversification into cereals that can be stored and sold at higher price compared with perishables like cassava, plantain, garden eggs and banana	THP/MOFA	2020-2021	Funds

