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*FINAL REPORT*

## End Evaluation of RSPN TAHAFUZ Project

*Building Resilience through Community Based Disaster Risk Management  
in the Sindh Province of Pakistan*



**Submitted to:**  
Rural Support Programmes Network (RSPN)

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**September 2013**

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## **ACKNOWLEDGEMENT**

This End Project Evaluation report sets out findings, conclusions and recommendations for USAID funded “Building Resilience through Community Based Disaster Risk Management (CBDRM) in the Sindh Province” – commonly known as TAHAFUZ Project (September 28 2012 to September 27 2013) as part of contractual agreement with the Rural Support Programmes Network (RSPN).

This report is developed in compliance with the terms of reference of the assignment. The conclusions and recommendations set out in the following pages are solely those of the consultants and are not binding on the RSPN management.

The evaluators would like to thank all those who assisted this evaluation, particularly Gulab Rai, Khimchand and Zafar Khaskheli at TRDP and Mr. Mustafa, Adnan Hussain, Jawed Shah, Noreen Hassan, Imtiaz and Tahira of NRSP for their valuable support in the field. We are grateful to Mr. Nadeem-Ur-Rehman Memon, Deputy Commissioner, Umerkot, Mr. Malji Rathore, District Social Welfare Officer Tharparkar, Mr. Ghulam Rasool Memon, DDMA Focal Person, District Badin and Khuda Bux DDMA Focal Person/District Social Welfare Officer, District Thatta for their willingness to be interviewed. Last but not least, we want to thank the men and women members of 8 UDMCs, 16 VDMCs, and 379 beneficiary households who agreed to be interviewed for this evaluation.

## LIST OF ACRYNOMS

CBDRM	Community Based Disaster Risk Management
CCI	Community Critical Infrastructure
CO	Community Organization
CPR	Cardio Pulmonary Resuscitation
DIU	District Implementation Unit
DDMA	District Disaster Management Authority
DRR	Disaster Risk Reduction
ERT	Early Response Team
FGD	Focus Group Discussions
IP	Implementing Partner
KII	Key informant interview
LSO	Local Support Organization
NDMA	National Disaster Management Authority
NRSP	National Rural Support Programme
PDMA	Provincial Disaster Management Authority
PDRA	Participatory Disaster Risk Assessment
PDRMP	Participatory Disaster Risk Management Planning
PMU	Project Management Unit
RSPN	Rural Support Programmes Network
SERT	Search Evacuation and Rescue Team
TOP	Terms of Partnership
TOT	Training of Trainers
TRDP	Thardeep Rural Development Programme
VDMC	Village Disaster Management Committee
UDMC	Union Disaster Management Committee
VO	Village Organization

## BASIC INFORMATION

Name of the Project	“TAHAFUZ: Building Resilience through Community Based Disaster Risk Management in the Sindh Province of <u>Pakistan</u> ”
Duration	12 months from 28 Sept 2012 to 28 Sept 2013; during the evaluation the project was given a no cost extension till 28 Dec 2013
Total Funding (USD)	1,399,962
Donor	USAID – Pakistan
Agreement No.	AID-391-A-12-00006
Executing agency	Rural Support Programmes Network (RSPN)
Implementing Partners	National Rural Support Programme (NRSP) Thardeep Rural Development Programme (TRDP)
Project Area	20 Vulnerable Union Councils from four Vulnerable Districts: Umerkot, Tharparkar, Badin and Thatta, from the Sindh Province, Pakistan
Total households (est)	110,879
Total population (est)	646,942
Project Goal	To develop and strengthen resilient community institutions, mechanisms and capacities that systematically contributes towards reduction in losses due to disasters
Expected Results	<ul style="list-style-type: none"> <li>• Local community institutions and mechanisms developed to withstand disasters in future</li> <li>• Capacity of local community developed to develop disaster risk management plans, policies or curriculum</li> <li>• Increased preparedness of local community from proposed hydrological activities (floods and cyclones)</li> </ul>

## EXECUTIVE SUMMARY

RSPN in partnership with NRSP and TRDP implemented a one year OFDA-USAID funded project namely “*Building Resilience through Community Based Disaster Risk Management in the Sindh Province of Pakistan*” commonly known as the TAHAFUZ Project. The project implementation began in October 2012 in 20 high risk Union Councils of four districts in Sindh namely Badin, Thatta, Umerkot and Tharparkar, and the activities were completed in September 2013. The objectives of TAHAFUZ Project were: To develop the capacity of the community in disaster preparedness, management and mitigation; b) to develop the hazard risk reduction plans, policies and curriculum; and c) to increase preparedness of local community from proposed hydrological activities (floods and cyclones). The End Evaluation of TAHAFUZ Project was carried out by a team of consultants including CBDRM Expert, Evaluation Specialist, Quantitative Data Analyst and Associate Engineer. The team undertook the field work from August 15 to 27, 2013 in the four districts of Sindh; 8 UDMCs and 16 VDMCs were randomly selected for qualitative and quantitative data collection through 24 FGDs, 10 KIIs and 379 household interviews. In addition, 39 CCIs were also visited for technical assessment.

TAHAFUZ Project was contextually relevant to the local needs as all four project districts are highly prone to natural disasters including hydro-metrological activities and drought besides other hazards such as the fire incidents and snake bites. The most recent disaster was 2010 floods which caused widespread damages to properties and livelihoods in most of the TAHAFUZ Project villages. The traditional coping mechanisms were not organized and ineffective due to lack of local institutional mechanisms to deal with disasters and the most vulnerable households had no relief support mechanism. The TAHAFUZ Project area is under developed with majority of the population living in poverty<sup>1</sup> and has low human development indicators. The important contribution of the Project is reaching out the most vulnerable, especially women in terms of capacity building, enhancing their participation in local decision making on DRR measures and their benefits. The evaluation has sufficient anecdotal and empirical evidence that TAHAFUZ Project has achieved all agreed outputs and hence the expected outcomes have also been achieved to a great extent. Institutional mechanisms have been developed in 20 Union Councils and 232 revenue villages by organizing UDMCs and VDMCs respectively. Training of over 1160 VDMC members including 580 women in DRM has created awareness amongst the rural communities on DRM and fostered the spirit of collective action and volunteerism. One of the remarkable successes of TAHAFUZ Project is mobilization of men and women around a common interest of DRM within a short span of time. Formation of 232 VDMCs was one of the crucial inputs of the Project towards DRM – a central element of the CBDRM approach as a primary vehicle to implement and sustain DRR activities. With a total membership of 2,692 including 1,341 women, VDMCs are mainly responsible to conduct community-based disaster risk assessment, analysis and develop risk mitigation plans to increase the preparedness at community level. The women have participated in disaster risk

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<sup>1</sup> Anwar T, K.Sarfaraz and Hammad Ali (2002); *Landless and Rural Poverty in Pakistan*, Islamabad

assessment, disaster risk management planning and implementation of the plans. The District governments and DDMAAs are aware of UDMCs and their emergency kits provided by the Project. VDMC and UDMC members have used their search and rescue, and first aid skills for relief assistance during the fire incidents and have also provided early warning information to the District Government for joint action to prevent local hazards. The indicators show that communities are more organized, prepared and equipped to respond to disasters. The completion of 232 critical community infrastructure measures by VDMCs in the revenue villages has not only met their immediate needs, but also contributed to their preparedness to cope with disasters. However, the effectiveness of capacity building component needs to be further enhanced by designing appropriate training material for different levels including a simple participant's training manual for V/UDM members. **While the project has made some impressive gains in less than one year, the V/UDMCs have not attained the required capacity to sustain themselves without any external support. Therefore, continued support would be crucial for the sustainability of the disaster management committees.** The TAHAFUZ Project has already initiated the efforts to link 50% of UDMCs with LSOs as part of their executive bodies. However, it should be noted that institutions will need at least two to three years to build their capacities as a viable and proactive committees of LSOs. The TAHAFUZ Project financial data shows that over 90% of the funds were utilized by end August 2013. The net balance of PKR 14.39 million is primarily exchange gain due to depreciation of the local currency. However, quarterly budget utilization trends show that over 80% (PKR 142.28 million) of the project budget was spent in the last two quarters; this is when the CCIs were being implemented. Overall, the project was well managed by RSPN and funds were judiciously used by the implementing partners to deliver the agreed outputs.

Formation of VDMCs and their capacity building has resulted in the creation of significant social and organizational capacities characterized by an increased willingness of individuals to work for a common purpose – disaster risk management. The VDMC and UDMC members have become potential change agents and emerged as leaders of their communities. The most prominent impact of TAHAFUZ Project is heightened awareness level of disaster risk preparedness and response among project beneficiaries of 232 villages in 20 UCs and other key stakeholders. UDMCs have ensured representation of most vulnerable groups on VDMCs, formation of emergency response teams for the provision of first aid, search and rescue operations. Moreover, UDMCs have also engaged in networking with government, line agencies and other stakeholders as part of their preparedness to handle unforeseen emergency situation. The project has given a sense of protection (TAHAFUZ in Urdu) to the most vulnerable households and other direct beneficiaries with significant awareness and knowledge on disaster risk reduction through capacity building and implementation of CCIs as structural measures. However, these gains need to be consolidated with continued investment in building their knowledge base, institutional, financial and technical capacities for disaster risk management planning and implementation of activities. As a result of the implementation of CCI schemes in 232 settlements, it is expected that adverse effects of future disaster would be reduced; however, these projects will only have a relatively small impact in relation to the total needs of the population at risk at

the revenue village level. Nevertheless, each CCI scheme has benefited, on an average, 88 households and over 90% of households agreed that these structures have reduced the disaster risks. Rehabilitation of water projects and construction of earthen roads and culverts have significant social benefits for the households living around these schemes. The empirical evidence suggests that CCIs have been very effective in addressing some of the immediate needs of the local communities. However, these schemes benefit only one of the average five settlements under the revenue village. RSPN needs to weigh the options to either divert this investment to capacity building to upscale the model in other UCs in the same districts or increase the grant size to support larger project at the revenue village level.

For the long term sustainability, it is recommended that the TAHAFUZ model should be transformed into a CBDRM Program. This is essential for the sustainability of VDMCs and UDMCs under the institutional umbrella of LSOs. With a program approach for further strengthening and replication of CBDRM, RSPN should continue its leadership role in steering the RSPs for a five year programme development to integrate CBDRM as an important cross cutting theme into their core programs. To pursue this goal, RSPN should initiate a strategic exercise early next year aiming to complete the documentation by mid-2014 and subsequently explore donor funding opportunities for the proposed five year program. However, continued engagement in the shorter term is crucial to **nurture the UDMCs and VDMCs as disaster resilient local community institutions** to withstand future disasters. It is essential that these nascent institutions become integral parts of VOs and LSOs respectively. One of the project components that RSPN may wish to consider for the next phase is **policy dialogue and partnership building** with Provincial and district level government departments. As capacity building is an important area, RSPN should invest in building **strong competencies in designing training modules and materials** for training courses at various levels. Also develop a **cadre of Master Trainers (MTs)** to provide quality training courses to VDMC members, school teachers and students. Training in local resource mobilization is another crucial area for the sustainability of UDMCs. As a new phase of the TAHAFUZ Project would be essential to strengthen the CBDRM model, it is recommended to focus the activities on **developing disaster resilient model villages** in the existing UCs as well as expanding the model to additional UCs within the same project districts. Share the key lessons from TAHAFUZ Project with other CSOs, NDMA, PDMA and major donors. Promote **institutional development of V/UDMCs** facilitating their planning process leading to a three year development plan with benchmarks for tracking the progress on their implementation. Sensitization of LSO and other CSOs Executive Bodies through training courses on CBDRM and mainstreaming DRR into their development programs. Facilitate the **formation of the District Network of UDMCs** to work on the policy domain and promote partnerships with Government line departments, and capacity building, resource mobilization and monitoring oversight of UDMCs. **Monitoring, Evaluation and Reporting:** Separate the monitoring functions from documentation and reporting with a dedicated person for each function in the next phase.

## CHAPTER 1: INTRODUCTION

*“An ability to recover quickly from or adjust easily to misfortune, change or disturbance...The capacity of a system, community or society to resist or to change in order that it may obtain an acceptable level in functioning and structure”*

(International Strategy for Disaster Reduction 2002)

Funded by OFDA-USAID “*Building Resilience through Community Based Disaster Risk Management in the Sindh Province of Pakistan*” – commonly known as the Tahafuz Project is implemented during September 2012 – September 2013 in 20 Union Councils of four districts in Sindh, namely Badin, Thatta, Umerkot and Tharparkar. Figure 1 shows the project area. While RSPN is the executing agency, the project is implemented through the institutional mechanisms of RSPN’s partners - National Rural Support Programme (NRSP) in Badin and Thatta districts and Thardeep Rural Development Programme (TRDP) in Tharparkar and Umerkot districts.

This End of Project Evaluation report provides an assessment of the TAHAFUZ Project’s relevance, efficiency, and effectiveness as per the evaluation TOR. The detailed findings of the report are presented in chapter 3 while conclusions and recommendations have been given in chapter 4 and 5 respectively.

### 1.1 BACKGROUND TO THE PROJECT

With an overall goal of developing and strengthening of resilient community institutions, mechanisms and capacities that systematically contributes towards reduction in losses due to disasters, the TAHAFUZ Project has three expected results to be achieved during its life. These include:

- Local community institutions and mechanisms developed to withstand disasters in future
- Capacity of local community developed to develop disaster risk management plans, policies or curriculum
- Increased preparedness of local community from proposed hydrological activities (floods and cyclones)

The sites and beneficiaries for this project included 20 high risk Union Councils in 4 districts of Sindh. The project seeks to benefit a total of 110,879 households (with an estimated population of 646,942) over one year project period. The main goal is, to have community mechanisms actively engaged in the process and the implementation of project activities in order to ensure local ownership and build their capacity.

While the project is formally concluding on September 28, 2013, most of the activities have been completed by the end August 2013. However, it is very likely that the Project will be given a “*No Cost Extension*” by USAID. RSPN has commissioned the end evaluation of TAHAFUZ Project through a third party as part of its policy of promoting accountability for performance, and lesson learning for future programs.

## 1.2 PURPOSE AND OBJECTIVES OF EVALUATION

The evaluation has two main objectives: a) *accountability to stakeholders*: The evaluation findings shall be disseminated to a broad range of stakeholders including targeted communities, USAID, government institutions (National, Provincial and District Disaster Management Authorities), implementing partners (NRSP & TRDP) and other organizations working in focus with DRR; and b) *learning to improve effectiveness*: to provide lessons learned and recommendations in order to refine designs and introduce improvements into the future efforts. The findings of the evaluation were based on the following criteria:

### I. **Relevance:**

- Was the project needed in the context of the target areas?
- Whether or not the most vulnerable communities within the project areas had been targeted?

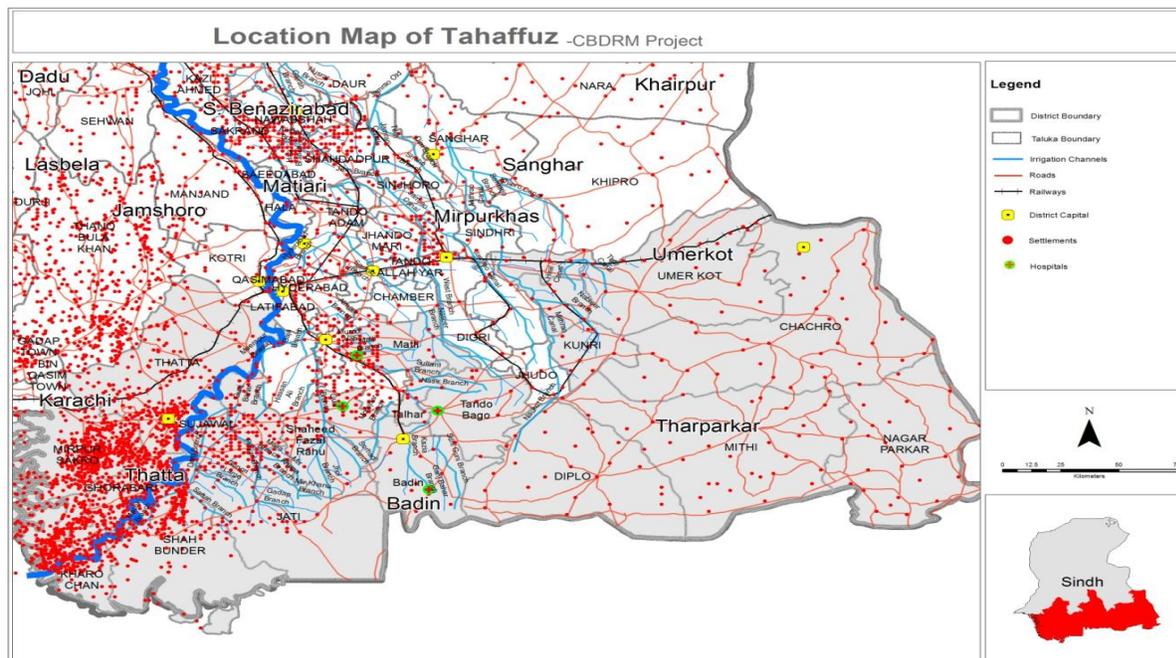
### II. **Efficiency:**

- How efficiently were resources used to produce intended outputs?
- How could resources have been used more efficiently?

### III. **Effectiveness:**

- To what extent did the project achieve its intended results?
- What factors contributed to the achievement of intended results or the lack thereof?

Figure 1: Location Map of the TAHAFUZ-CBDRM Project



## CHAPTER 2: METHODS AND LIMITATIONS

The evaluation began with a review of key project documents upon signing of the consultancy agreement by the evaluation team. Among the key documents reviewed are the TAHAFUZ Project proposal, monthly progress reports, monitoring reports, list of CCIs, UDMCs, VDMCs and several other supporting documents. This was followed by the series of meetings between the Evaluation Team and RSPN Management to refine the proposed methodology. As a result of an iterative and interactive process, the evaluation team finalized the methodology including evaluation tools thus bringing in more clarity on the evaluation framework especially for data collection in the field.

Field visits commenced on the 15th of August and were completed by 28<sup>th</sup> August 2013. Out of 20 Project Union Council, 2 UCs each from the four districts were selected. These 8 UCs were: Kharoro Syed, Faqeer Abdullah, (Umerkot), Daboro, Jhirmirio (Tharparkar) Khoski, Ahmed Rajo (Badin), Keti Bunder and Garho (Thatta). Then 4 VDMCs were selected from each UC; thus FGDs were held with 16 VDMCs. In addition, 10 CCI schemes per district were selected for technical evaluation and a maximum of 100 direct beneficiaries were selected from each district for the household interviews to measure the benefits of the CCIs. A total of 379 beneficiary households were eventually interviewed as due to logistical constraints during the field visits, the target of covering 400 households could not be achieved.

In addition, 10 semi-structured interviews were conducted with the key stakeholders including the field staff and middle management level from the implementing partners. Three District Government officials were also interviewed including the Deputy Commissioner of Umerkot district, DDMA Focal Persons in Tharparkar and Badin Districts. Moreover, three influential people were also interviewed although they were not directly involved with the Project but they were familiar with the project activities. The list of persons met during the field visit is attached as annex D.

Prior to field visits, the implementing partners arranged briefings on the TAHAFUZ Project in their offices. TRDP arranged this briefing at their PMU Office in Umerkot while NRSP did this in their regional office at Badin. The power point presentations were comprehensive and gave a snap shot of the progress and the challenges faced during the implementation. The Evaluation Team hired 8 enumerators including four women and trained them in the first two days of the field visit in Umerkot. After completing the data collection work in Umerkot, the Evaluation Team then moved to Tharparkar where the team conducted FGDs, Semi-Structured Interviews, technical evaluation of CCIs and household interviews as planned. However, the target of 100 household interviews could not be achieved due to logistical difficulties. The next district visited by the Evaluation Team was Badin where the field work in the selected UCs, VDMCs, CCIs and beneficiary household was smoothly completed. The last district covered by the Evaluation Team for data collection was Thatta. In terms of area, this is the largest district in Sindh with scattered population and isolated villages, including some inside the sea creeks. By all means, Thatta is the most challenging district to implement the TAHAFUZ project activities. Except some minor hick ups, the data collection process in

Thatta was successfully completed within the stipulated time frame. Of the total 21 direct beneficiary households missed in the interview, 6 randomly selected households refused to be interviewed, 7 household heads were not present at the time of interview and the remaining six could not be covered due to time constraint. Overall the data collection work went well and concluded on 27<sup>th</sup> August. This was possible only because of the excellent cooperation from the implementing partners, UDMCs and VDMCs.

The evaluation schedule is enclosed as Annex B while the full list of people interviewed as Annex C.

SPSS version 17 was used for the data analysis and the qualitative data collected through FDGs and semi-structured interviews were also summarized and then analyzed and conclusions were drawn. Efforts were made to triangulate the data collected through the different sources and with available project documents which then formed basis for analysis and discussion in the report.

## 2.1 Constraints and Limitations

- Poor road communication, scattered population and the time constraint were the main challenges during the two weeks field visit to the project area. One day was lost due to cancellation of flight to Karachi.
- While only 16 villages out of 232 villages and 8 UDMCs out of 20 were selected, findings of the evaluation study cannot be generalized to make definite conclusions about the entire beneficiary population since selection was undertaken on a random basis. The evaluation team has gathered sufficient evidence to highlight the key achievements and the areas of improvement for the next phase.
- Qualitative information gathering techniques were extensively used and it should be noted that this involves perception, opinion and feelings of the respondents. Hence, data and information obtained and appearing in the report should be taken with this limitation in mind.
- The household survey conducted from 379 respondents study was conducted to assess the social and DDR benefits of CCI schemes. Most of the schemes were completed two to three months before this assessment and hence many respondents might not have realized their full benefits over a longer period of time.
- Translation, whether verbal or written, is always a difficult and time consuming process, especially since some English words and concepts do not have exact equivalents in the Urdu and/or Sindhi languages.

## CHAPTER 3: EVALUATION FINDINGS

### 3.1 Overview

The findings presented in this section are based on the review of the project reports and documents, and primary data collected for this evaluation. The data suggests that the TAHAFUZ Project was successfully implemented as all output targets have been delivered within the agreed time frame. As a result of these achievements, the project outcomes have also been achieved to a great extent thus contributing to the project goal “developing and strengthening of resilient community institutions, mechanisms and capacities that systematically contributes towards reduction in losses due to disasters.”

Most prominent achievements include mobilization of communities into 232 VDMCs with a total membership of 2692, including 1341 women, members covering 232 revenue villages. 20 UDMCs have been formulated in 20 Union Councils across the four districts of Sindh with a total membership of 464 including 232 women. The project has given a sense of protection (TAHAFUZ in Urdu) to over 100,000 beneficiaries with significant awareness and knowledge on disaster risk reduction through capacity building and implementation of CCIs as structural measures. A cadre of 1175 trained and motivated volunteers, including 667 women, has acquired new skills and knowledge in PDRA and PDRM Planning, search and rescue, first aid, early warning, advocacy and networking. Women members of VDMC and UDMC are taking part in decision making and have participated in disaster risk assessment, disaster risk management planning and implementation of the plans. On the advocacy and networking front, UDMCs have developed links with district government and DDMA and women members have raised their voices for the rights<sup>2</sup> of women and children. VDMC and UDMC members have used their search and rescue, and first aid skills to provide relief response during fire incidents in their neighboring villages. District Government in Thatta acted on the early warning information by UDMC Ketti Bundar regarding a breach in the bund, which prevented a looming disaster. Since the communities had no institutional mechanisms before TAHAFUZ Project, the communities in the project area are more organized, prepared and equipped to respond to disasters.

With the financial support from the TAHAFUZ Project, VDMCs have implemented 232 CCIs as part of structural measures of DRR. Technical evaluation of 39 sample CCIs shows that, except some minor issues, by and large these schemes were implemented as per agreed terms<sup>3</sup> of partnership (ToP). Given the limited funds available for CCIs, i.e. average cost per CCI is Rs. 200,000, the direct benefits of CCIs were also limited to the settlement where CCI was constructed. However, it should be noted that the CCI schemes have benefited all the households in the selected settlements. There are questions whether or not the scope of CCIs should be expanded to revenue village or

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<sup>2</sup> Women took out a procession to protest against the marriage of a child girl with an elderly person in one of the villages in Umerkot. As a result of this strong protest from the local women, this marriage was cancelled and the young girl's right was protected.

<sup>3</sup> The ToP sets out the procedure, roles and responsibilities of VDMC and the IP for the implementation of CCI as per the original design specifications of the scheme.

all settlement villages should have one CCI scheme; however this will have tremendous funding implications. Household interviews with 379 beneficiaries have provided empirical evidence that four different types of hydro-meteorological activities implemented have had substantial social benefits in terms of meeting their immediate needs as well a potential benefits during future disasters.

### 3.2 Relevance

The evaluation results based on primary and secondary data have provided sufficient evidence that the TAHAFUZ Project was contextually relevant to the local needs. In addition to project beneficiaries, other key stakeholders including government officials have similar responses that the project was quite relevant. According to several post disaster assessment reports by UN agencies, NDMA, and PDMA, Badin, Thatta, Umerkot and Tharparkar were amongst the most flood affected districts of Sindh. Therefore these districts were highly prone to natural hazards including hydro-metrological and drought besides other man-made disasters such as frequent occurrence of fire incidents and snake bite. The most recent disaster was 2010 floods which caused widespread damages to the properties and livelihoods in most of the TAHAFUZ Project villages. The evaluation has found that traditional coping mechanisms were not organized and effective due to lack of local institutional mechanisms to deal with disasters although local communities do help each other for relief during disasters. However, this help usually does not go beyond close kinship and the most vulnerable households are left out. By creating community based institutional structures, the Project has filled a major gap in terms of strengthening community responses to disasters, and making it more inclusive.

*“Yes the project is relevant because his village is isolated and underdeveloped without road and electricity. Earthen road is crucial for DRR in our village. The area was hit by torrential rains and caused wide spread damage”*  
(Mohammad Ashraf from Villalge Chak 26, Badin)

While the Project area is under developed with an overwhelming majority of population living in poverty and low human<sup>4</sup> development indicators, the important contribution of the TAHAFUZ Project is reaching out the most vulnerable groups, especially women, in terms of giving greater sense of protection through capacity building, enhancing their participation in local decision making on DRR measures and their benefits.

### 3.3 Effectiveness

#### 3.3.1 Formation of Local Community Institutions

**Village Disaster Management Committees (VDMCs):** These are central to the CBDRM approach and the primary vehicle to implement and sustain DRR activities at

<sup>4</sup>“Sindh at a Glance”, Pakistan Bureau of Statistics 2008

the revenue village level. The main purpose of fostering VDMCs was to conduct community-based disaster risk assessment, develop risk reduction plans to implement the mitigation measures and increase the capacity and preparedness at community level in order to build community resilience.

Formation of VDMCs was one of the crucial inputs of the Project towards achieving the expected outputs as most of the project activities were to be implemented through village level committees and in one sense the whole CBDRM activities were dependent on the successful rolling out of VDMCs. Therefore, this was the most challenging task for the TAHAFUZ project field staff after identification of vulnerable UCs and revenue villages to mobilize communities for the formation of VDMCs. The selection of villages was based on the vulnerability criteria: a) severity of community's exposure to risk; b) number of people to benefit from DRM program; c) readiness of community; d) accessibility of the community and; d) security of staff. After identification of 20 vulnerable UCs and 232 vulnerable revenue villages, the field team visited all settlements of the revenue villages to initiate the process of VDMC formation. They introduced the TAHAFUZ Project and its key components including the process of VDMC formation, and asked the settlement dwellers to nominate two persons as their representative on VDMC.

**Figure 2: All children in this village are out of school**



The communities in the settlement then held their own meetings to select two persons including a woman. For the selection of woman representative, women held separate meeting to identify a suitable woman. The third dialogue entailed a combined meeting of all settlement villages after receiving resolutions of nominations from each settlement of the revenue village to finalize selection of the members leading to formulation of VDMC

through wider consensus. The most challenging part of this process was mobilization of women due to their restricted mobility. The entire process took a maximum of 3 to 7 days maximum.

Majority of the VDMCs met during the evaluation were formed between December 2012 and January 2013 as per the work plan. Average membership is 10 with equal number of men and women members who represent their settlements (or Goth<sup>5</sup>). The evaluation noted that 16 VDCMs met for the FGDs were at varying level of maturity<sup>6</sup> including some very active as well as mediocre and weak VDMCs. However, all VDMCs are holding monthly meetings, in which majority of their members have reportedly attended them. Although they have had no set agenda<sup>7</sup> for the meetings but most of them have maintained minutes register as well as stock register. The project has developed excellent registers with all necessary templates for minutes, resolutions and key decisions.

**Figure 3: Key Informant Interview with DC Umerkot**



Given time and resource constraints, however, there seems to have been inadequate follow up on the part of the project staff to ensure proper record keeping. VDMCs have reported to meet on monthly basis but most of them told that they have no fixed date of meeting as they met when all VDMC members were available or on a need basis to discuss any disaster related issue. The VDMC members reported to have regularly informed their respective communities on the VDMC meetings and its progress on the

<sup>5</sup> Goth is settlement and several of them make a revenue village (Deh)

<sup>6</sup> This was based on the judgment of the Evaluation Team in terms of; level of participation of VDMC members, especially women, in discussion, understanding of the DRM concepts, formation of ERT and other sub-committees, record keeping and future planning as part of their sustainability.

<sup>7</sup> The issues discussed in the meetings were related to DRM including identification and construction of CCI scheme and to review the preparedness before Monsoon rains.

activities. Five members from each VDMCs have been trained in PDRA and DRM planning. This achievement was verified during the FGDs with VDMCs.

The main purpose of VDMC formation, as articulated by VDMC members during the evaluation, was to organize a collective response for disaster risk reduction, awareness raising of community members on DRR, disaster response and relief assistance to the affected community at the time of disaster and to minimize the losses from fire<sup>8</sup>related disasters. With regard to VDMC major functions, most of the responses were on preparedness, preparation of seasonal calendars, protection from natural and unnatural disasters, relief response, first aid, formation of search and rescue teams, early warning, awareness raising on disaster risk assessment and information sharing. Although most of the responses were in bits and pieces, but some members were not fully aware of the VDMC functions. Most of the members remembered practical parts of training they received, for instance CPR and first aid. Disaster PDRA exercises were conducted by the VDMCs and DRM plans were developed as part of their training. However, there is a potential to improve these maps and to adequately share them with community members. Similarly detailed DRM plans indicating hazard and risk elements of the communities and plans for their reduction should have been developed after PDRMP courses. The evaluation has noted that VDMCs have developed capacities in disaster preparedness and relief; however they have limited understanding of their role and capacity in recovery and rehabilitation measures. Therefore, their capacity building in this area should be emphasized in the next phase.

*Ms. Rasheedan Saand 45 years old, is from village Kharoro Charan of UC Faqeer Sayed, district Umerkot. She is President of VDMC and President of UDMC. As a result of training in PDRA and DRMP, she has learned hard skills such as firefighting, first aid, search and rescue operations. An unusual incident in her neighborhood gave Rasheedan a chance to use her life savings skills when two minor girls came under the wreckage of a wall that fell over two the girls while playing around it. She rushed to the scene and pulled out the girls but one girl was found to be unconscious. Assessing the situation, she performed CPR, as a result of which the girl started breathing again. Rasheedan realized the importance of the skill she learned under the TAHAFUZ Project.*

Although 50% of VDMC members are women, but extent of their participation varied across VDMCs. Some women members are social activists like Ms. Rasheedan<sup>9</sup>, President of VDMC Kharoro Pat and President of the UDMC Kharoro Syed who is a role model for many women in her village as well as at UDMC level where she is representing her VDMC. There are also several other active women members trained by the project who have created substantial awareness amongst other women of their villages. However, majority of women on VDMCs are still passive and need to build their confidence level to participate in decision making. This

<sup>8</sup> Fire incidents were reported extensively by the communities during field visit as one most frequently occurring hazards invariably across the project districts

<sup>9</sup> Rashida, a local health worker, is very active Manager of her VDMC and has understood the importance of CBDRM. She is spreading the key messages to other women in the area.

can be achieved with more training and motivational efforts by the Project's female social organizers. As trained women have more knowledge and confidence, they are more likely to participate in VDMC decision making process. At least 30% women have reported to have prioritized CCIs<sup>10</sup> in their VDMCs. One of the main reasons for poor participation<sup>11</sup> of women is extremely low female literacy rate<sup>12</sup> in the TAHAFUZ project area. The Project has had only one women social organizer for the mobilization of women in each district. Women staff is more effective in capacity building of illiterate women community members. However, given these societal constraints, the TAHAFUZ project has performed a commendable role in mobilizing women.

All VDMCs have implemented one CCI each and by the end of August 2013, over 90% of 232 CCIs have been completed. As part of TOP, each VDMCs formed a purchasing committee comprising a male and a female members which was verified during FGDs with VDMCs. The main function of this committee was to ensure transparency in procurement of construction materials through collection of quotations of construction materials from the local market to procure the materials with lowest price. All transactions were made through cheques to the vendors. In addition, majority of the VDMCs have also formed Deikh Ball<sup>13</sup> Committee with at least one woman member and two men members mainly to supervise the construction and maintenance of CCIs. In effect, sub-committees were effective. The VDMCs and UDMCs members are apparently determined to sustain their committees on their own after the completion of the project in September 2013. However, they have not made any concrete plans as yet. At least one third of VDMCs and UDMCs have expressed their desire to continue meetings, raise funds and work on building linkages with govt. institutions. The remaining two third said that they will discuss this issue in their forthcoming meetings.

### ***The Benefits of Collective Action***

Having destroyed the embankment of Takar Khario, the sea tides hit the two villages in UC Ketti Bunder at mid night. The President of the VDMC was informed by one of his member and then all V/UDMC members gathered immediately and started to repair the broken embankment with sand bags and stones. As a result of timely provision of emergency services prevented the damages and saved the lives. Later the V-UDMC members while expressing their feelings paid much thanks to USAID, RSPN and NRSP for launching Tahafuz project. They said the project helped in enhancing capacities of communities and enabled them as how to respond to emergency

<sup>10</sup> Earthen roads and culverts have improved women's access to health facilities and therefore women have prioritized these schemes in their VDMCs.

<sup>11</sup> This was based on the qualitative data collected during the evaluation. The educated women members understood the key messages better as they benefited more from the training courses and DRM manual and therefore participated in the VDMC meetings and decision making.

<sup>12</sup> According to UNESCO Report, all four Project Districts have extremely low literacy rates within rural Sindh

<sup>13</sup> Deikh Ball in local language means Oversight Committee

**Union Council Disaster Management Committees (UDMCs):** The main purpose of UDMC formation is amalgamation of VDMCs at the UC level so that can improve coordination amongst themselves as well as with local government and other civil society organisations. UDMCs were also expected to set up ERT with training in First Aid and Search and Rescue, Evacuation, Damage, Needs Assessment and camp management etc. In addition UDMCs were also expected to be engaged in networking at Taluka and district levels for the effective coordination with Government line agencies and other stakeholders to manage unforeseen disasters. One of the key functions was to support VDMCs to develop the capacities of the local community members into a proactive community in the short term and resilient community in the long term.

With these objectives in mind, the TAHAFUZ Project facilitated formation of 20 UDMCs across the four districts with a total membership of 464, including 232 women, members. The formation process was relatively easier as compared to VDMCs due to the fact that communities were already organized at VDMC level. Field staff held series of dialogue with each VDMC under the catchment area of UC for the nomination of two members including one woman to represent their VDMC initially to introduce the model and then for nomination of two representatives for the UDMC. In the next stage, each VDMC nominated two persons including a woman member after internal consultation and then submitted their resolution to the Project staff that brought together all VDMCs to form the UDMC. The office bearers were selected by the UDMC members on the basis of their commitment, leadership skills and integrity. Formation of 20 UDMCs was therefore a smooth process which was completed in the first quarter of 2013 soon after formation of VDMCs.

All UDMCs met during the evaluation process were formed in the first quarter of 2013 with average membership of 26 members representing, on average, 13 VDMCs. All UDMCs hold monthly meetings which have been attended by majority of the members. The evaluation verified the records maintained by the UDMCs. While both minutes and stock registers were presented, minutes register was not updated. Except UCs Faqeer Abdullah and Jhirmirio, there were VOs and LSOs in other UCs fostered by NRSP and TRDP as part of their core programme. FOCUS Humanitarian Assistance Pakistan supported formation of a committee in one village after imparting training to local community in CBDRM. Of the 8 UDMCs met during the evaluation, 5 LSOs have been established at the UC level.

The Project teams have already facilitated the dialogue process between UDMCs and LSOs to integrate Union Disaster Management Committees into Local Support Organizations. The TAHAFUZ Project has provided capacity building support to all 20 UDMCs by imparting training courses to 10 to 15 members from each UDMC in organizational management and development, followed by advocacy and networking training.

**Figure 4: Emergency kit properly stored in the LSO Office in UDMC Ketti Bunder**

The TAHAFUZ Project has also provided stockpile of emergency kits<sup>14</sup> to all 20 UDMCs. Major achievements of UDMCs included formation of ERTs, First Aid, SERT, Early Warning and provision of emergency services to communities affected by different emergencies. Moreover, UDMCs have also developed some contacts with District Government and DDMA and have acquired the key contact numbers to get early warning messages on disasters. Of the eight UDMCs met during the evaluation, two UDMCs reported to have established separate committees for Early Warning System while others have not formed any sub-committee for this purpose. Five UDMCs reported during evaluation that they have identified safe rescue points as part of their preparedness measures.

<b>Text Box: Indicators of Resilient Community: How much has TAHAFUZ Project achieved?</b> <i>(Adopted from UNISDR)</i>	
<b>Indicator</b>	<b>Progress of TAHAFUZ Project</b>
A Community organization;	VDMCs and UDMCs have been formulated
A DRR plan;	All VDMCs have conducted PDRA exercise and have also developed Hazard maps. Some initial planning on DRR has been done by VDMCs
A Community Early Warning System;	Yes 50% UDMCs have formed EW Committees
Trained manpower: risk assessment, search and rescue, medical first aid, - relief distribution, masons for safer house construction, fire fighting	Each VDMC and UDMC has trained manpower of 5 and 10 persons respectively. VDMC level Risk assessment has been conducted but not at UC level. ERT, SAR and First Aid teams have been formed at UDMC level.
Physical Connectivity: roads, electricity, telephone, clinics	CCIs including earthen roads, culverts, and rescue places on raised platforms have been constructed in 232 villages.
Relational connectivity with local authorities, NGOs, etc	UDMCs have developed networks and they have all the key contact numbers of DDMA and

<sup>14</sup> Total value of emergency kit given to each UDMC is worth Rs. 0.5 million

	District Administration for EW information. UDMCs are in the process of integrating into LSOs as their Disaster Management Committee.
Knowledge of risks and risk reduction actions	Yes knowledge has been transferred to the village through training and informal contacts of the trained VDMC/UDMC members with other community members.
A Community Disaster Reduction Fund <sup>15</sup> to implement risk reduction activities	No progress has been made in this regard as this outcome was not included in the project design.
Mechanisms to sustain after the closure of the TAHAFUZ project	18 out of 20 UDMCs have been linked with LSOs, although more capacity building is needed both for LSOs and UDMCs
Formal Linkage of UDMC with the district government stakeholders	UDMCs have held several advocacy and networking workshops where local stakeholders, including district government representatives, have participated. However, no formal arrangements have been made since the district government itself is not clear about how to go about formalizing relationships with UDMCs.

UDMC Kettei Bunder has coordinated with District Government to prevent a potential disaster owing to breach of bund which could have had detrimental consequences for several villages. Timely action by the District Government in collaboration with UDMC has prevented a looming disaster. Women members in all UDMCs visited told that they have passed on their learning to many other women in their villages. While the figures quoted by UDMC women members on the number<sup>16</sup> of women sensitized and trained, could not be verified independently, the project reports and semi-structured interviews with staff did support the notion of spreading the DRM messages to a wider audiences including women in the project villages. There is a need for more institutionalized methods of using trained UDMC or VDMC members as master trainers to train other community members. If this is linked with some incentives, like exposure visits to other districts and villages, transfer of knowledge by utilizing them as trainer in other communities and skills would be more effective.

**Emergency kit:** The UDMCs are also managing stockpiles of emergency kit which is meant to cater the emergency needs of the UC population. The kit was handed over in a formal event organized by the TAHAFUZ Project and attended by the Project staff, Taluka and District Government Officials besides all VDMC representatives and UDMC members. The process of handing over the kit to UDMC was formalized through signing a legal document by UDMC representative, District Government Officials mostly Assistant Commissioner and the Project Coordinator.

Since the agreement is also signed by the District Government, this arrangement gives some functional legitimacy to UDMCs to work as a community institution besides giving

<sup>15</sup> As this was not included in the project design, the TAHAFUZ Project has not pursued this outcome

<sup>16</sup> Most of women told she had trained 100 to 200 other women. However, some women members reported more realistic figures of 20 to 30 women being trained.

some responsibility to the District Government to maintain links with UDMC for future support.

**Figure5: An FGD with a UDMC in Tharparkar**



UDMCs have assigned the responsibility of maintaining stock register to one of its trusted members as custodian. While the LSOs have provided the space for storing the entire stock in its office, other UDMCs where LSOs have not been formed, the kit items have

been kept at the custodian's house. Given limited space, some UDMC custodians have kept the items in two different rooms thus raising questions on the safety of the kit. It was observed that the issue of a proper place for keeping the items was not resolved among the UDMC members and at some UDMCs, the emergency kit was stored in a member's house as a temporary arrangement. Moreover, at least fifty percent of UDMCs have to find a proper space to store emergency kit.

Overall most of the UDMCs are still in their initial stages of learning. Owing to short duration of the project and resource constraints, the TAHAFUZ Project teams were not able to nurture these committees with more follow up and capacity building. The male members are relatively more active than women due to greater exposure and experience of working with LSO, VOs and COs. With the exception of few active women social activists, most women members are passive and have limited knowledge of CBDRM. They face more challenges to attend UDMC meetings due to lack of public transport. More training of women in DRM will build their capacity thus enhancing women's role *before, during* and *after* the disaster.

While none of the 20 UDMCs have signed any MoU with the District Governments, UDMCs have continued to promote two way communications, improve coordination and information sharing with the government line departments.

### **3.3.2 Capacity Building Programme (Training):**

Training was another crucial component of TAHAFUZ Project after VDMC and UDMC formation as a major input to capacity building of community institutions to develop disaster risk management plans and policies. Given the importance of this component, RSPN initially built the capacity of its implementing partners – NRSP and TRDP through a six days TOT training in Islamabad which was attended by 25 participants. RSPN also

developed a CBDRM training manual which was subsequently translated into Sindhi for VDMCs and UDMCs. The participants included Project Coordinators, District Project Officers, Community Mobilizers and staff of RSPs core team. TOT Training content included CBDRM, Participatory Risk Assessment (hazards, vulnerability and capacity); community action for disaster/emergency response; Participatory DRM Planning (DRR Plans, importance of tools and practical work; guidelines for the development of DRR Plans at V/UDMC; Advocacy, networking, gender mainstreaming; Organizational Management and Development, facilitation skills and Training of trainer etc.

The Master Trainers, after returning to their field stations, started training courses for VDMC and UDMC members. With five to seven members from each VDMC, a total of 1173 members, including 601 women, members were trained in DRM and PDRA. The same group of VDMC members received a two days training in DRMP thus enabling them to develop DRM plans for their villages. Themes covered under this training module included; role of VDMC members; first aid, search and rescue, hazard mapping and disaster risk management plans. The Evaluation Team noted that most of the illiterate VDMC members especially women only remembered the practical demonstration sessions of their training courses as they could not recall names of training courses they attended. The most recalled practical session was CPR and first aid, and interestingly a trained woman saved the life of a minor girl who was trapped in the rubble of her collapsed house. Using her CPR skills, she resuscitated the unconscious girl and saved her life. Several other trained members have narrated similar anecdotes of using their knowledge and skills to provide relief services to fire incidents which are common across the project area. This has verified the success stories reported by the project in its monthly donor reports.

**Benefits for Women VDMC Members:**

*VDMC has 50% of women members. Mobility of women members has also increased.*

*Women members trained other women in CPR, putting off fire and emergency relief.*

*VDMC has developed the list of disabled people for evacuation during disaster (VDMC Okara Panwar)*

The project has provided training in Advocacy and Networking, and Organizational Management and Planning to all 20 UDMCs. A total of 232 men and 232 women have received training in both of these courses by taking at least 10 members from each UDMC. The main focus of Advocacy and Networking training focused on negotiating skills and coordination whereas Organizational Management and Planning covered different themes such as leadership, planning and financial management. During the FGDs, the UDMC members endorsed the capacity building support from the TAHAFUZ Project albeit very few, especially women, were able to recall their key leanings from these training courses. Low literacy rate is the primary barrier for women's participation in training courses and challenges illiterate faced in optimizing the benefits from capacity building efforts. However, the evaluation has noted that illiterate women and men remembered the practical demonstrations given to them during training courses. In the second phase, RSPN must explore innovative ways to developing training modules.

While the TOT training content adequately covered all the necessary topics related to CBDRM knowledge, skills and practice, the training course should have been separately arranged for the two different audiences. An advance training of at least 10 days should have been the minimum duration for MTs with a focus on content knowledge, developing training modules and materials, and training delivery methodology – a necessary skill for the MTs. A five days basic training should have been separately arranged for those participants who are not required to be Master Trainers. In the next phase, RSPN should consider arranging exclusive advanced<sup>17</sup> trainings for master trainers. More investment in capacity enhancement in CBDRM training would be crucial for the successful scaling up and consolidation of the gains in the existing project area. Although training of five members in each VDMC has certainly developed a critical mass of trained persons, it has left a gap in terms of knowledge and understanding of CBDRM amongst VDMC members. Those who have had no chance to attend training courses have limited understanding on the role of VDMC vis-à-vis CBDRM. This disparity in access to knowledge has implications on the institutional capacity and motivation of members for DRM planning for the entire village. One of the priorities for the next phase, therefore, should be bridging this gap by training all VDMC members to ensure improved performance of VDMCs. The MTs can train VDMC members in their own villages and local settings.

Regarding training material, the Evaluation Team noted that the material provided seems to have too much text. Since the same training material has been provided to VDMCs and UDMCs, though one copy was not sufficient. Moreover, the technical material is too heavy for the less educated persons and no use at all for the illiterate people. As the training needs are different for various tiers so is the need for training material. Therefore, two different manuals are needed; one for the trainers and other for the community members including VDMCs and UDMCs. For VDMCs and UDMCs, a simple participant's workbook written in Urdu or Sindhi would be sufficient for their understanding of CBDRM concepts and practice.

Another issue regarding dissemination of training and awareness to the wider community was lack of an action plan for the continuing education at the grassroots level. It was noted during the evaluation that many of the trained VDMC and UDMC members have not passed on their learning to others through formal trainings. Rather they have conveyed some messages through informal means. It is important to properly organize and support the continuing education initiatives at the grassroots level through workshops and refresher training courses. Moreover, a follow-up drill/simulation exercise at community level should also be conducted as this part was missing somehow in the training courses. A database of community based Master Trainers should be shared with the DDMA, Civil Defense and Social Welfare department as these government departments can utilize the trainers for future CBDRM training

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<sup>17</sup> Advanced training should cover the conceptual underpinning of CBDRM to provide a strong content knowledge, competencies and skills in developing training modules and training delivery methodologies. Imparting this level of knowledge and skills is not possible to MTs is not possible in 6 days.

courses. Inter-district exposure visits of V/UDMC members to learn from the best practices should also be made part of capacity building program in the next phase.

### 3.3.3 Community Critical Infrastructure (CCI) Schemes:

As the next logical step after Participatory Disaster Risk Assessment (PDRA) exercise conducted by VDMCs as part of their training, was Participatory Disaster Risk Management Planning (PDRMP) in which VDMCs had to prioritize the hazard risks according to priority for action. Facilitated by the field based CBDRM trainers, the PDRM Planning<sup>18</sup> exercise was conducted by VDMC members in their revenue villages. The output of this process was identification and prioritization of disaster mitigation measures to be implemented by VDMC. The most feasible activities in DRM plans to increase their preparedness to hydro meteorological and seismic hazards were construction of community critical infrastructures which included connecting roads/paths, rescue points on raised platforms, protection of drinking water sources, flood proofing of shelters/public buildings and knowledge of food security and immunization. The CCI schemes have, therefore, become integral component of TAHAFUZ Project as structural measures of DRM plans.

The process followed for the appraisal of CCI schemes began with the submission of resolution to DIU from the VDMC for financial and technical support. The CBDRM Engineer then visited the village to conduct the technical appraisal of the proposed CCI scheme on the proposed site as per set procedure developed by the TAHAFUZ Project. The Engineer assessed the technical, social and financial aspects of the scheme that led to the preparation of the CCI proposal for necessary approval from the District Project Officer. The BOQ<sup>19</sup> details including site plan, drawings of cross sections, labor and material requirement were provided in the proposal. In the second stage, after signing the ToP, construction work began by mobilizing local skilled and unskilled labor. Subject to opening of the joint bank account, 80 % of the total approved grant<sup>20</sup> was paid to the VDMC to begin the construction work as first installment. Most of the VDMCs reported to have completed the schemes within two months. A total of 232 CCI schemes have been implemented, of which 216 were completed by the end of August 2013. The

*With a small investment of Rs. 200,000 CCI schemes have not only addressed the immediate needs of the settlements but they have also potential benefits for DRR. These small projects have enhanced the collective action through community mobilization.*

<sup>18</sup> PDRMP is a process where members from all segments of the community propose concrete risk reduction measures based on: a) vision of their ideally prepared and resilient community at village level determining the acceptable level of risk; b) decisions as to whether identified risk can be prevented, reduced, transferred or lived with; and d) their own capacities and other resources that can be generated outside of their community.

<sup>19</sup> Bill of Quantities

<sup>20</sup> The average cost of CCIs was around PKR 200,000

construction of CCI schemes has also created labor opportunities for over 1000<sup>21</sup> poor and vulnerable men and women in their own villages. The VDMCs informed the evaluation team that un-skilled laborers were selected from the poorest families to work for cash<sup>22</sup>. Almost all VDMCs met during the evaluation process have formed purchase and oversight committees comprising three members including a woman member to ensure transparency in procurement and timely completion of the schemes. VDMCs have also maintained stock register provided by the Project; however, more than fifty percent VDMCs needed to update their records.

In terms of social benefits, the CCI schemes have only benefitted the households of one settlement of the revenue village as due to limited financial resources the project could only support one scheme for each VDMC which has, on an average, five settlements.

**Figure 6: A Culvert and Earthen Road Scheme in the Project area**



Therefore consensus building amongst 5 settlements was a real community mobilization challenge for the project teams. However, this was overcome and without creating intra settlement conflicts, the TAHAFUZ Project teams successfully negotiated with all communities under VDMC to reach an agreement on a single CCI scheme for one settlement. An important lesson for the TAHAFUZ Project, however, is to revisit the CCI component for the next phase whether a trade off with scaling up of the CBDRM model would be worth pursuing. The benefits<sup>23</sup> of diverting the CCI investment to capacity building would be replication of TAHAFUZ model to a much wider geographical area to other vulnerable UCs. Although the evaluation team, during its field visits, noted greater demand for CCI schemes either at settlement level or a large project which can benefit all settlements under VDMC. Both options have significant financial implications and raising donor funding would be a challenging task for RSPN.

<sup>21</sup> 4 to 5 persons got unskilled labour work and another 2 persons as skilled labourers on each VDMC for about 2 months.

<sup>22</sup> Daily wages paid for the unskilled labour was Rs. 350 and 600 for skilled labourer

<sup>23</sup> This is not to undermine the social benefits of CCI schemes, however, given the paucity of financial resources, the alternate use of funds can be to scale up the CBDRM model in o

**Technical assessment of CCIs:** A total of 39 completed CCI schemes, ten from each district, (except in Tharparkar where 9 CCIs were selected due to limited number of completed CCI schemes) were selected for detailed technical assessment<sup>24</sup> from the sample villages. The assessment results show that notwithstanding varying degree of construction quality, all 39 randomly selected CCIs actually existed on the ground and were completed.

Based on the technical assessment of CCIs, the Evaluation Team has noted some weaknesses in the follow up mechanism by Project Engineers during the pilot phase. While this may have been primarily due to limited transport facilities under TAHAFUZ Project, it would be important to protect the investment in CCIs through more vigorous follow up in the second phase.

**Figure7: A CCI Scheme (Culvert) in Thatta District**



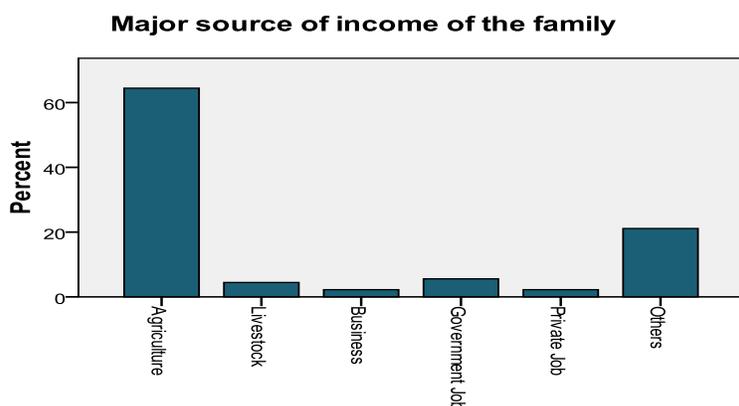
As a matter of fact, a team of CBDRM engineers should be constituted to undertake a detailed visit of all completed CCIs to identify major problems and recommend the way forward. Given the time constraint, however, it was not possible for the evaluation team cover more than 39 CCIs in the given time.

### 3.3.4 Findings of CCI direct household beneficiary survey

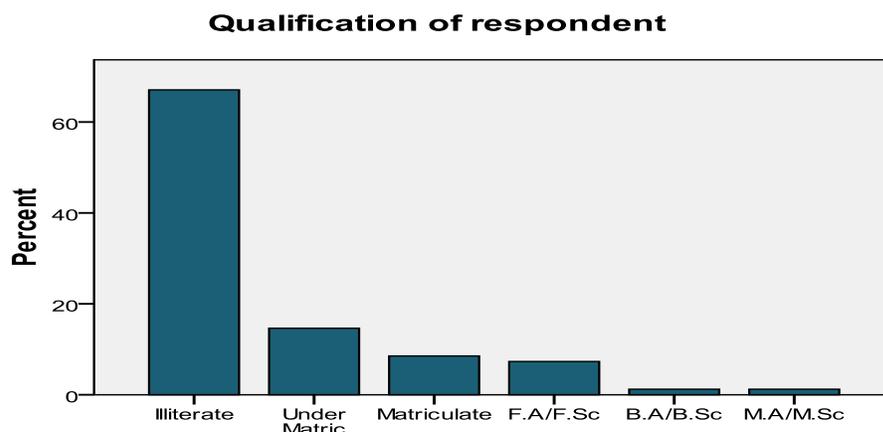
The household survey results show that average household size in the project area is 8 and women make up 49 percent of the total population. The percentage of children and old age varies from 30 to 38 percent in different districts of the project area. The households are headed by men in almost all of the areas. About 70 % of the respondents were illiterate while 78% of the total respondents lived in Kaccha<sup>25</sup> houses. Major occupation of the people is agriculture followed by labor work.

<sup>24</sup> The purpose of this technical evaluation was to see if the CCI schemes have been implemented as per the technical specifications of the project in the project proposal. The engineer on the evaluation team visited each of the sample CCI and took measurements which were then matched with the parameters in the BOQ details of the project proposal.

<sup>25</sup> Mud houses



The respondents consider the CCIs as the real need of the areas and according to them the CCIs have helped to mitigate the losses of disasters in future. The communities in most of the cases were involved from identification to completion of projects and maintenance committees have been formed to look after the CCIs. 100 percent of the respondents replied that there is no discrimination on the basis of caste, religion, gender or any other reason and if they give any suggestion their suggestions are given due importance. The four types of CCI schemes have invariably benefited all the respondent households in their routine life as over 80% believed that they have reduced the disaster risk. An overwhelming majority of respondents reported a marked difference between the situation before and after the schemes as they feel safe due to implementation of risk reduction measures.

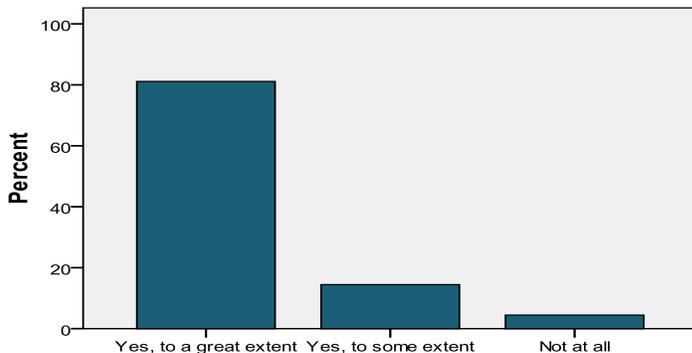


### **Culverts:**

Specific benefits of the culverts for women include improved access to safer places, health facilities, transport facilities, agricultural land, market and participation in social gatherings. Culverts are mostly useful for women because the women due to their vulnerability face greater challenges during the disaster than men. Secondly during pregnancy and delivery cases the culverts help to reach hospitals in time thus reducing

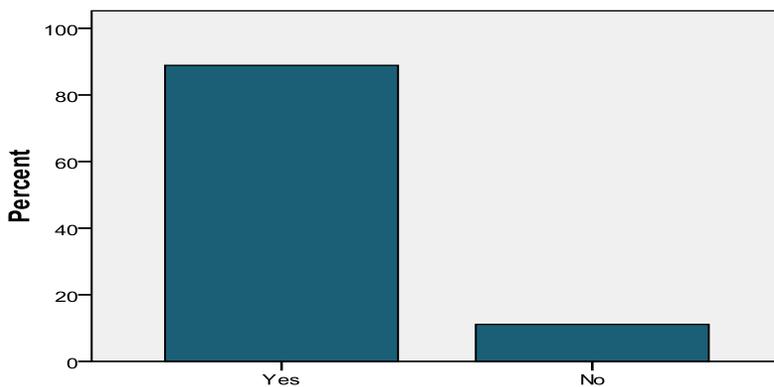
the chances of serious complications and the outcome will be the reduction in maternal and child mortality rates.

**The culvert was really the need of the community**

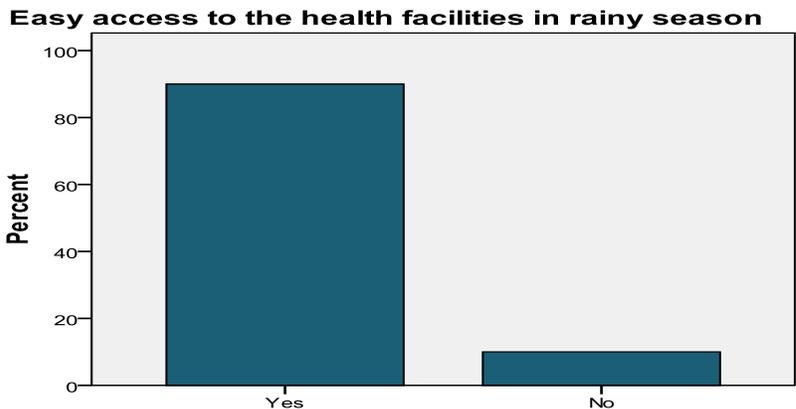


The culverts are useful as mitigation measure to the flood which minimizes the losses in case of its occurrence because they have the ability to direct the flow of water and provide the beneficiaries with the access route to reach safer places, access health care facilities in emergencies and at the same time help relief and rescue operations to reach the victims. Similarly due to the culverts the crops are mostly saved in disaster situation and also the villages can reach their agricultural land to gather their crops at safer places.

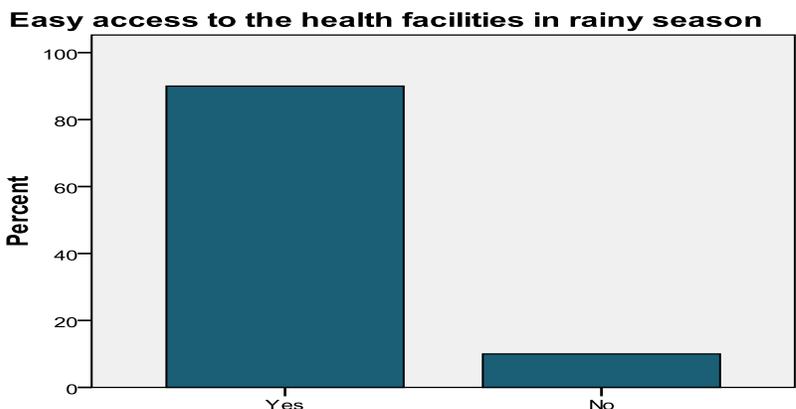
**Easy access to transport facility during rainy season**



An overwhelming majority of the respondent households have reported that culverts have facilitated their easy access to transport facility and over 90% reported to have improved the access to health facilities during rainy season.



One of the major issues during torrential rains is to change the direction of the flow of water away from the settlements to prevent the losses. A total of 90% respondents reported that they feel safer now as compared to before due to culverts in their settlement.

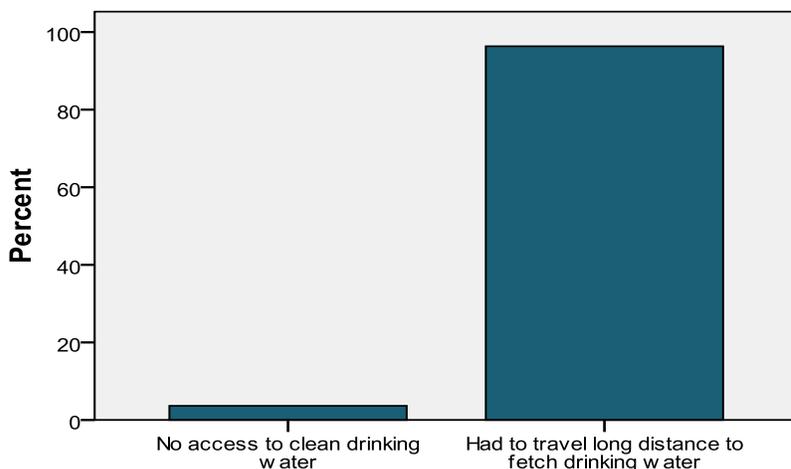


Before the culverts, children used to remain frequently absent from schools during rainy season. Moreover, there was frequent communication problem with the nearby villages as a result of which the people were mostly remained stressful during or even before the rainy season. The situation is different now as the communication problems have been addressed and local people are happy and feel safe as compared to the situation before the project.

**Repair of water Ponds and Dug Well Schemes:**

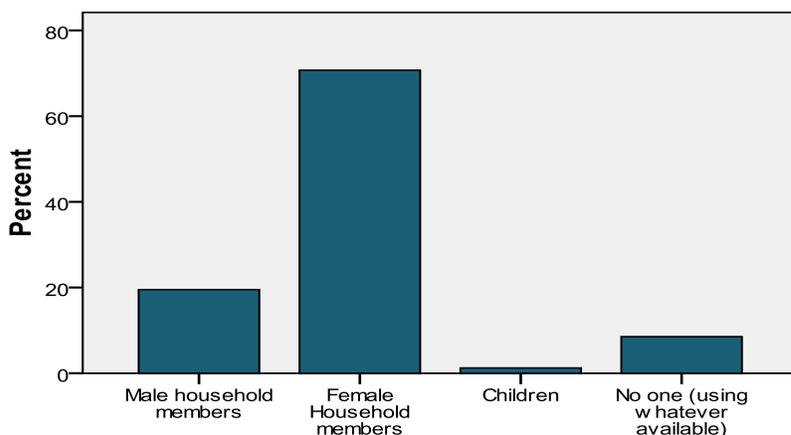
Repair of water supply schemes were identified as one of disaster risk reduction measure by the VDMCs as a result of DRMP process. Many districts face serious issues with regard to accessing drinking water especially in Umerkot and Tharparkar districts. As the existing dug wells were broken down and needed repair, the TAHAFUZ Project provided the crucial support for their repair in order to prevent contamination of water in rainy season. Over 90% respondents reported to have no access to drinking water in their village/settlement.

**Situation before the repair of the dug well**



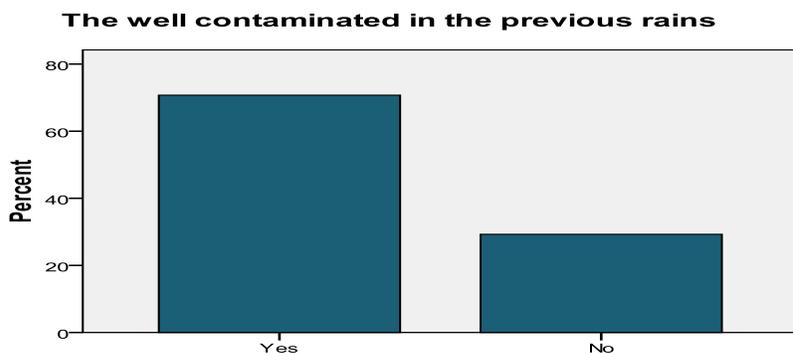
More than 70% respondents said that dug well was contaminated last year when the well was not repaired. As a result of which 38% the respondents could not drink the water besides increase in the incidence of diseases and walking long distances to fetch the water.

**Responsible person for fetching drinking water**

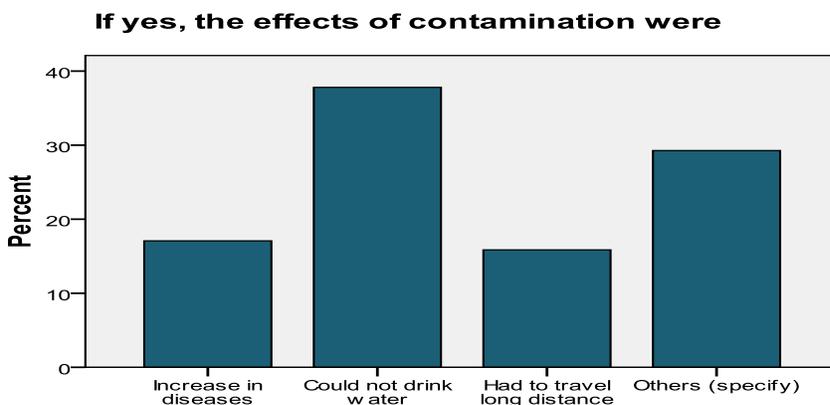


Women are primarily responsible to fetch water, no matter how far the source may be, which takes lot of their time and energy. 70% respondents reported that fetching water for household is women’s responsibility. The gender impact of water project is substantially high as it saves their time on a daily basis. After the repair work, over 80% respondents said that dug well will not be contaminated.

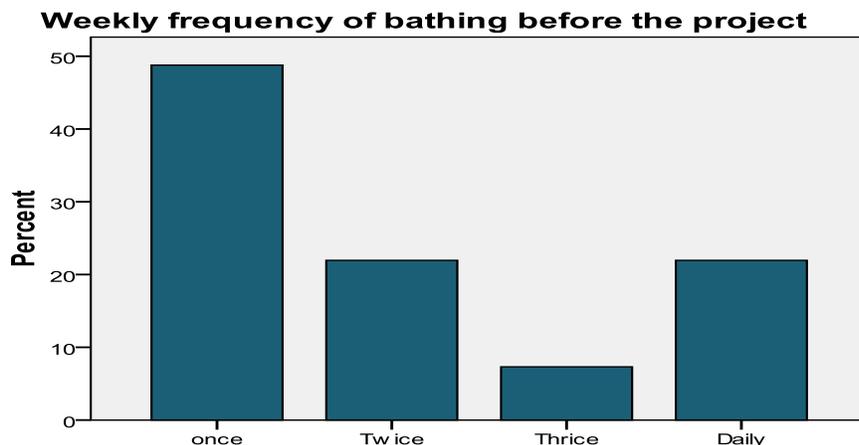
However, 20% respondents said that men also fetch water. The respondents further reported that before the project, more family members became sick with water borne diseases as compared to very few after the project.



Repair of water supply schemes including dug well and water storage ponds have provided access to drinking water by reducing time to fetch water besides reducing the incidence of water borne diseases.

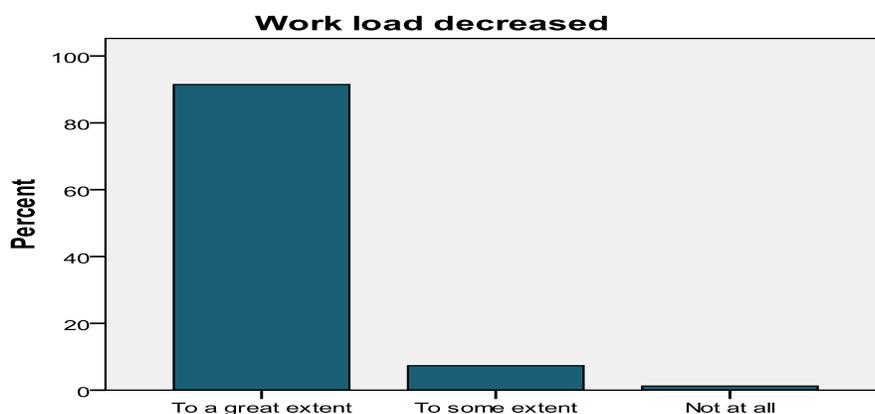


Since the source of water is now closer to home, women spend less time on fetching water, as a result of this their work load has reduced. Thus women can spend the saved time on more productive activities.



Another benefit of the water project is improved hygiene practices. Before the project only about 20% of family members would take a daily bath; after the project this figure increased to 90%. A significant improvement in the hygiene practices.

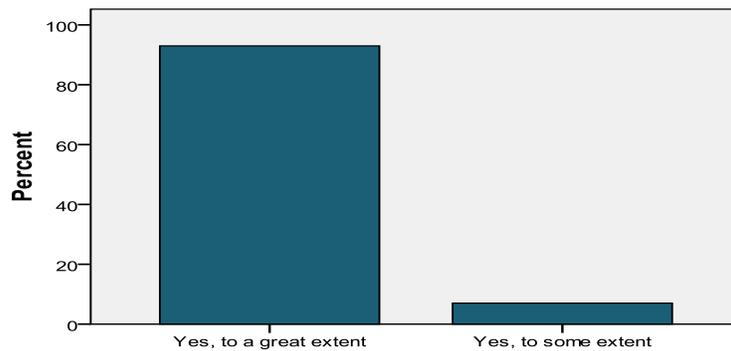
The TAHAFUZ Project should do more studies sometime in the middle of next phase to assess the impact of improved hygiene on the family as a whole and linking this with DRM.



**Rescue Places:**

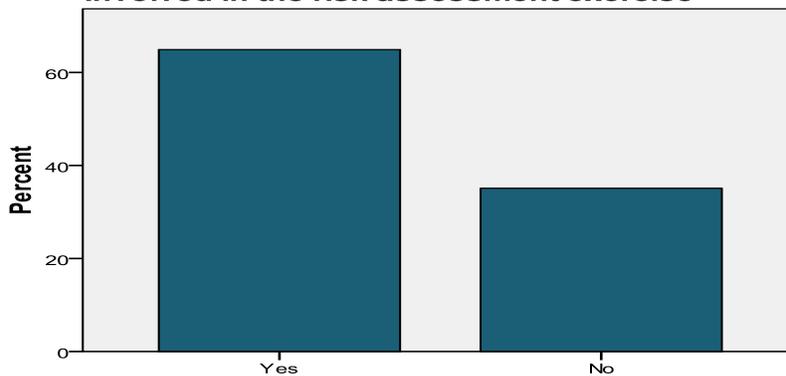
The rescue places provide shelter for villagers especially for women, children and old during disasters. 100% respondents said that rescue places were built at safer places. The people feel safe and it has very positive effect on their mental health as well, because previously they were always in tense situation during rainy season or in case of cyclones. More than 90% reported that rescue place in their settlement/village was needed. 100% respondents believed that the rescue place has been constructed at safer place and that they can easily reach this place in the event of a natural disaster.

**The rescue place was the need of the household**

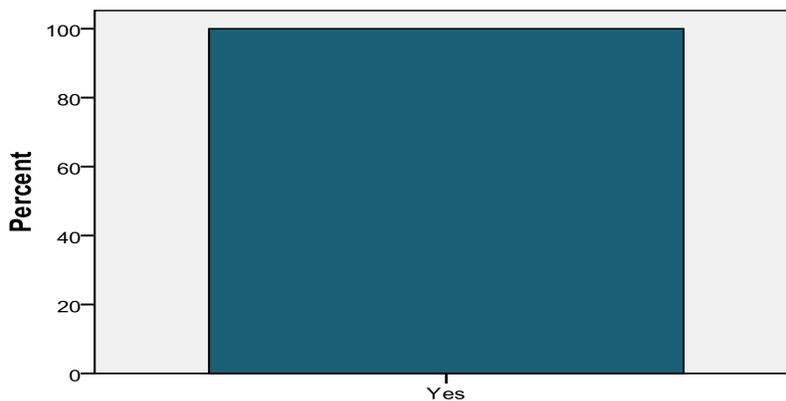


100% respondents feel safer than before because of the construction of rescue place. During FGDs, VDMC members reported that they are using rescue places for holding meetings. However, 77% respondents feel that rescue place is not used for routine life although 22% people believed this place can be used for social purposes.

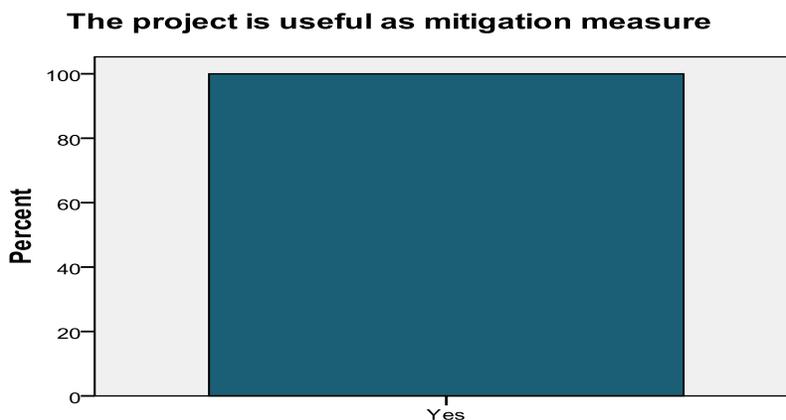
**Involved in the risk assessment exercise**



**Rescue place constructed at safer place**

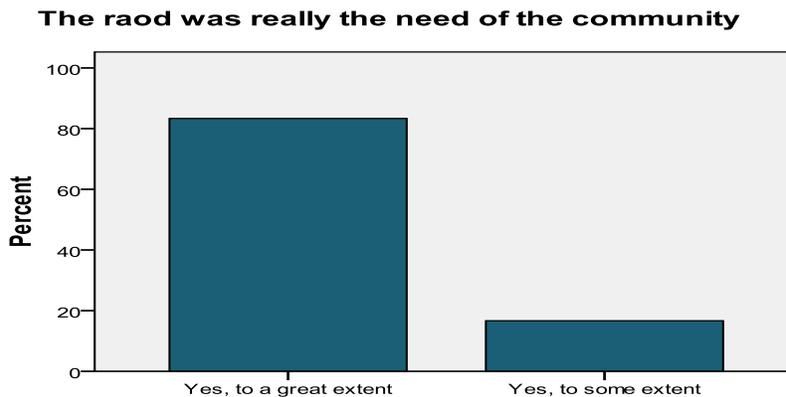


65% respondent households said that they actively participated in project planning while 74% respondents said that there was a committee within VDMC for the management of rescue place. 42% households reported to have worked on the project as daily wage laborers.



**Earthen Road:**

Earthen road schemes were identified by VDMCs as a result of their PDRP process. Over 80% respondents reported that the project was needed for the community. 97% respondents believed that earthen roads have improved their access to transport facilities.

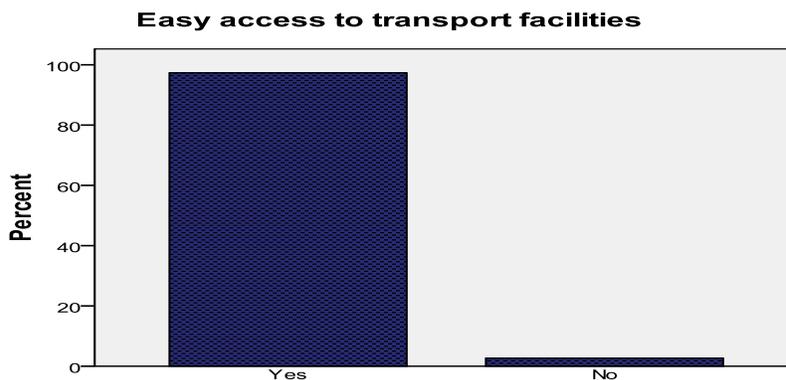


Before the project, vehicles could not access their settlement but after the project vehicles can come to the village directly as a result of which 97% respondents have reported to have improved their access to market while 99% have now easy access to health facilities especially for the very sick persons as well as pregnant women.

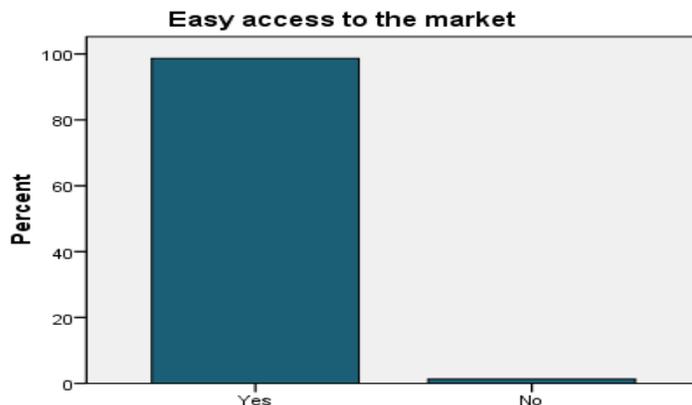
68% respondent households are using earthen road on a daily basis Due to the earthen roads increased access to various facilities like education, health, transport, market and rescue places has been reported by beneficiaries.



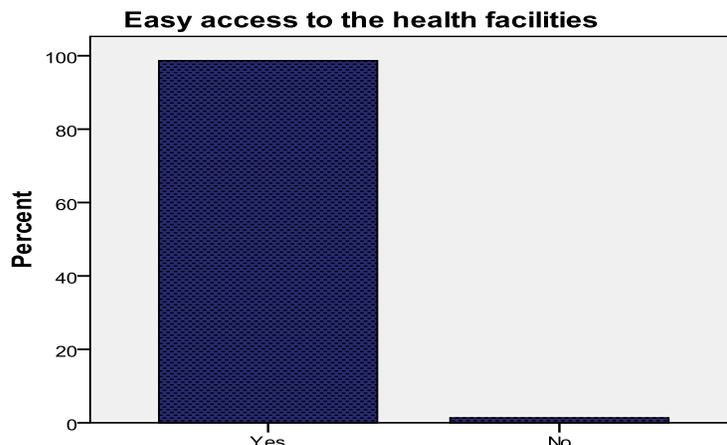
Communication with other villages has improved as a result of which networking between the project villages has been facilitated. The beneficiaries have also been able to attend various social and religious events in the nearby villages.



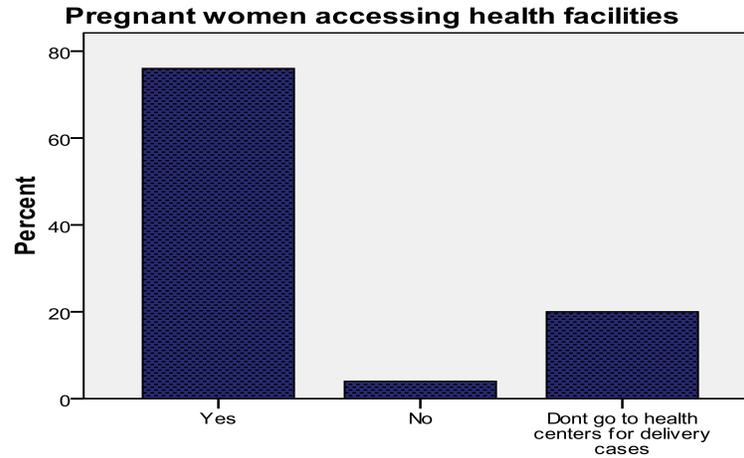
31% respondent households said that they are aware of maternal mortalities in their village due to lack of road access to health facilities before the project.



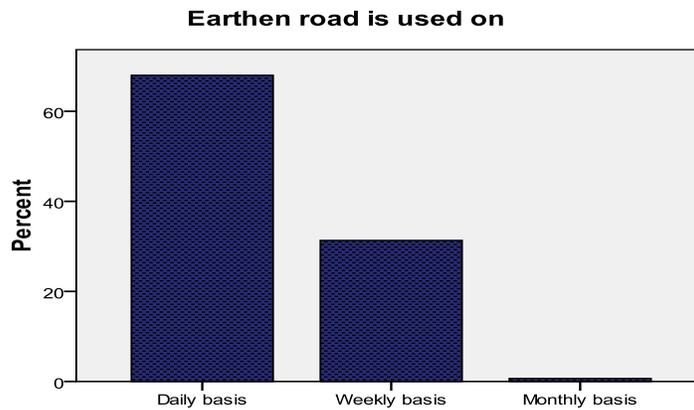
98% respondents have provided easy access to health facilities especially for pregnant mothers and actually reduced maternal mortalities which occurred in some villages due to lack of road to the nearest transport facility.



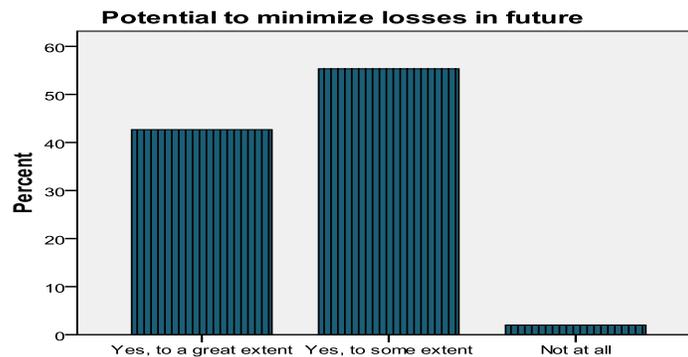
76% respondent households believed that pregnant women are now visiting health facilities more than before because of the road. This trend would eventually lead to higher proportions of deliveries in the health centres instead of unsafe delivery practices at home.



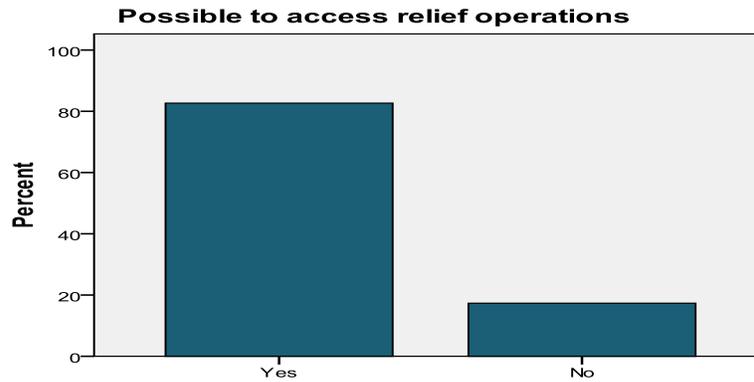
While the earthen were mainly implemented as structural measure for disaster risk reduction, 68% and 31% respondent households told that they are using on a daily and weekly basis respectively.



Overall, 43% respondents believed to a great extent that the earthen roads have contributed towards reduction of disaster risks while 55% also agreed but to some extent.



Over 80% respondents agreed that the earthen road would provide access for relief operations during disaster. One of the major issues during disaster is lack of access road to villages to extend relief operations to the affected people. Earthen roads would address this issue as reported by the community members.



### 3.3 Efficiency

While the TAHAFUZ Project has achieved all its intended outputs within stipulated time frame, it was, in some ways an ambitious project given the challenge of social mobilization in some of the difficult areas of the Sindh province. However, the targets were achieved as a result of the hard work and dedication of its staff at all levels from DIUs to PMUs in the field to its core PMU at RSPN. There were some ambitious targets vis-à-vis social mobilization of communities for the formation of 232 VDMCs and implementation of 232 CCIs in some of the scattered and hard areas of the province. With an effective time frame of ten months, the Project was launched in October 2012 as the project staff was recruited against 52 positions including 5 in the Core PMU Office at RSPN Islamabad. The approved grant for the TAHAFUZ Project was USD 1.4 million.

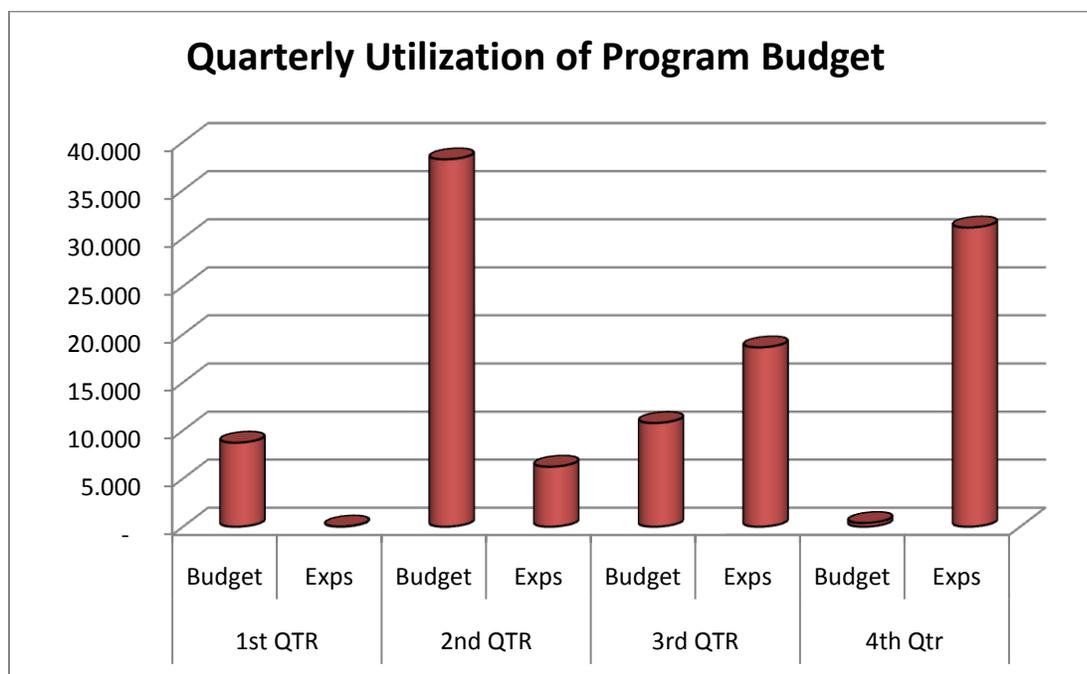
The two implementing partners, TRDP and NRSP implemented the TAHAFUZ Project activities in their respective districts<sup>26</sup>. Both implementing partners have demonstrated capacity in implementing participatory rural development programmes for over two decades. TRDP is a local RSP working in the four districts of Sindh since 1990 with strong roots in the communities especially in Tharparkar where it has been working since its inception. NRSP is a national NGO working in all provinces of Pakistan and Azad Jammu and Kashmir, and has established itself as a credible organization promoting participatory rural development across the country. Under the overall guidance of RSPN's Chief Operating Officer, TAHAFUZ Project is managed by its Project Manager (PM) based in PMU at RSPN Head Office in Islamabad. PM is assisted by two M&E Officers, CBDRM Specialist and Project Finance Officer.

The TAHAFUZ Project in the field is led by two Project Coordinators in PSU Offices Mithi and Thatta. Then there is one DIU in each district under the Project Coordinators which are responsible to implement the project activities in the field. The DIU team members included District Project Officer, two Social Mobilizers including a female, two CBDRM Engineers and one Training Officer. In the PSUs, under the leadership of Project Coordinator, M&E Officer, Senior Finance Officer and Project Engineer are responsible for planning, implementation, monitoring and reporting of the activities for the two districts.

The field offices have utilized more than 80% of the allocated budget to their respective regions to deliver the intended outputs. However, the budget utilization figures maintained by the Core PMU at RSPN show over 90% utilization as of 31 August 2013. The analysis of the quarterly budget utilization trends show that over 80% of the project budget was spent in the last two quarters (this is when CCIs were being implemented). The utilization remained slow in the first two quarters as focus was on community mobilization and capacity building.

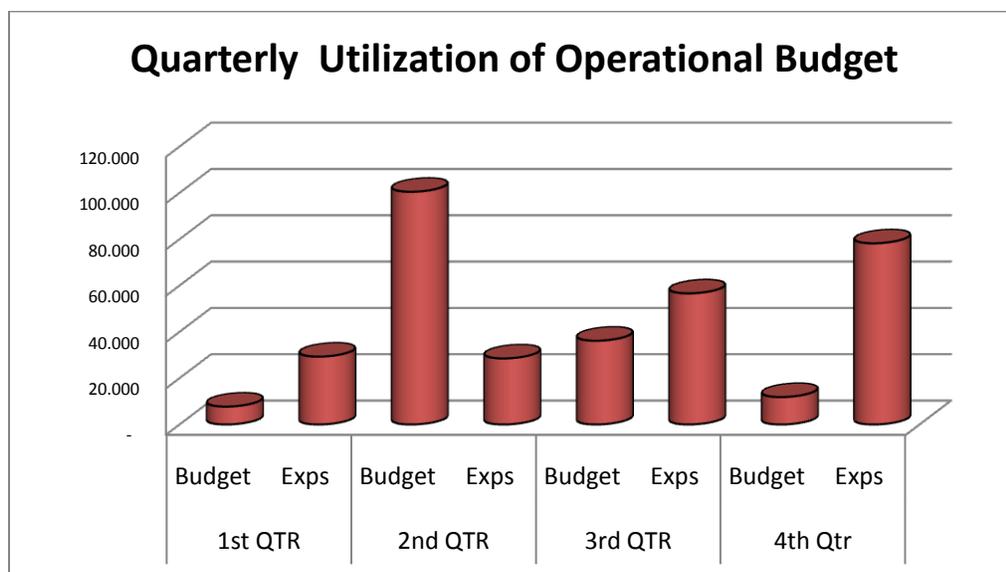
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<sup>26</sup> TRDP: Umerkot and Tharparkar; and NRSP in Badin and Thatta



By the end of August 31, 2013, total expenses recorded were PKR 170,971,064 against the total budget of PKR 185,358,280. The Project has saved funds mainly due to currency exchange gains. The PMU financials show a net savings of PKR 14,387,216 which will be used to support some project activities during the “**no cost extension**” period. USAID has already formally approved the extension of TAHAFUZ Project period till end of December 2013. This period was crucial to follow up on VDMC and UDMC meetings as well as on CCI schemes.

Notwithstanding un-even budget utilization pattern during the four quarters, the project has achieved the agreed outputs by pushing the pace of implementation in the last two quarters. Quarterly review of financial and physical targets would have been more useful in smooth implementation of the project which could have left sufficient time in the last quarter for focusing on the follow up activities. RSPN management should consider organizing quarterly review workshops to ensure implementation of quarterly plans and utilization of the quarterly budget. If possible half of these workshops should be held in the field. Senior management of the implementing partners as well as RSPN should attend these review meetings.



The TAHAFUZ Project resources were judiciously used to achieve the outputs. The field teams received continued technical backstopping from RSPN Core PMU through regular field visits by Project Manager, M&E Officer and CBDRM Specialist. RSPN's value add role was noted throughout the evaluation as they have not only provided the required technical, monitoring and reporting support but also motivated the field teams in terms of mentoring. The Head Office based IP senior staff especially from NRSP, made regular visits to the Project activities in the field which boosted the morale of their staff. While the M&E team has maintained a high standard of progress reporting, there is limited evidence of doing the real monitoring in terms of looking beyond the figures. These gaps can be addressed by separating the reporting/documentation and monitoring and research functions with two (or more) dedicated professionals responsible for each of them. This structural change would also allow sufficient quality time for conducting research and monitoring of the activities in the field. RSPN and its partners should consider offering internship opportunities for young graduates to work in the field offices as M&E interns. However, priority should be given to women as there is dearth of women professionals in project area.

Some of the key challenges that the TAHAFUZ Project faced during the implementation included short duration, limited transport facilities for the field visits and inadequate female professional staff to work with women members of VDMCs and UDMCs. The issue of adding more female staff as trainers and social mobilizers need to be addressed in order to enhance women's participation in the decision making process at VDMCs and UDMCs. NRSP must be commended for having a woman DPO in its Thatta DIU. TRDP particularly need to hire more women staff for its PSU and DIUs. In addition to female SOs and Training Officer, one of two the districts should be led by a female DPO to ensure gender balance in staffing.

## CHAPTER 4: CONCLUSIONS

The evaluation has sufficient evidence to show that the awareness and response capacities of communities to disaster risks have increased and that implementation of TAHAFUZ Project has had a positive impact at the communities. Social mobilization efforts leading into organization of VDMCs, UDMCs, their capacity building in PDRA, PDRM Planning, advocacy and networking, organizational management and planning, provision of emergency and the implementation of small structural measures for disaster risk reduction have, in varying degrees, contributed to this accomplishment. The most prominent impact of TAHAFUZ Project has attained is heightened awareness level of disaster risk preparedness and response among project beneficiaries of 232 villages in 20 UCs and key stakeholders of the four TAHAFUZ Project districts. Moreover, the TAHAFUZ Project also raised awareness through a variety of communication materials including banners, brochures and fliers, and arranging the advocacy workshops at district, provincial and national levels. Efforts have also been made to promote linkages of UDMCs with district governments; however, these contacts could not be institutionalized in the form of MOUs.

One of the factors behind a successful piloting of CBDRM model was contextually relevant project design and receptiveness of local communities to the project activities for disaster preparedness and response due to frequent flood related disasters in the project area. The mobilization of community members and the organization of Village Disaster Management Committees have been largely successful in all four disaster prone districts. Formation of VDMCs and their capacity building has resulted in the creation of significant social and organizational capacities characterized by an increased willingness of individuals to work for a common purpose – disaster risk management. The VDMC and UDMC members have become potential change agents and emerged as leaders of their communities.

Local community institutions and mechanism have been developed. They have also acquired certain capacities to cope with disasters through disaster risk assessment and disaster risk management planning. However, these gains need to be strengthened with continued investment in building their knowledge base, institutional, financial and technical capacities for disaster risk management planning and implementation of activities. More specifically, RSPN and its implementing partners will have to make concerted efforts in further enhancing the capacities in PDRMP, strengthening search and rescue, early warning and first aid committees within VDMCs. While at least fifty percent members have already been trained in some of these areas, the remaining VDMC members should also be trained to bridge the knowledge and capacity gap between trained and non-trained V/UDMC members. The members who had no opportunity to attend training have less or no knowledge and awareness on DRM and the role of VDMCs. Moreover, VDMCs have limited capacity in post disaster rehabilitation as the Project's focus has mainly remained on *before* and *during* the disaster. The evaluation has noted that there is relatively more awareness and knowledge on the relief response among VDMC members followed by pre-disaster preparedness. Since there were no refresher training courses, many trained VDMC

members hardly remembered whatever they had learned during the training course except the practical demonstration of skills. Moreover sustainable livelihood trainings were missing which are necessary as part of CBDRM process to enhance the capacities of the affected communities at household level.

As a result of the implementation of CCI schemes in 232 settlements, it is expected that adverse effects of disaster would be reduced; however, these projects will only have a relatively small impact in relation to the total needs of the population at risk at revenue village level. A significant impact can only be achieved if communities at the VDMC level are benefited by implementing a large disaster risk reduction scheme or smaller projects for all settlements under the VDMC. RSPN, together with its implementing partners, should revisit the TAHAFUZ project design to distill lessons based on the one year implementation experience. While the empirical evidence shows that CCIs have been very effective in organizing VDMCs as well as addressing some DRR needs of the local communities. However, financial implications are higher and if this investment is diverted to capacity building including additional innovative activities in CBDRM, RSPN can replicate this model on greater scale.

The formation of UDMCs was a logical progression on the institutional development continuum for strengthening CBDRM. These structures have the potential to further support to VDMCs. UDMCs have performed some of their functions including ensuring representation of most vulnerable groups on VDMCs. Moreover, they have also engaged in networking with government, line agencies and other stakeholders as part of their preparedness to handle unforeseen emergency situation in their catchment area. There is also a potential for them to begin to mobilize local resources for disaster risk management activities and to begin to explore the possibility accessing support from the provincial government and other organization. UDMCs have a potential and this potential can only be realized when they are integrated into the RSP-fostered Local Support Organizations. With the support from the TAHAFUZ Project, efforts have already been made to link UDMCs with LSOs. Despite this integration into LSOs, UDMCs will still need more support to realize their potential. The evaluation has noted that despite the efforts of the Tahafuz Project, and despite the advocacy and networking meetings of UDMCs where local government representatives participated, more efforts need to be made to foster linkages between communities and local government and other civil society organizations. The fact that the Government of Sindh is already supporting some core programmes of TRDP and NRSP bodes well for fostering such linkages.

The project's targets were ambitious with limited time frame and resources to work in some of the difficult areas with poor road conditions and communication facilities, as well as amongst some of the poorest communities of Pakistan. The TAHAFUZ Project field staff of TRDP and NRSP made relentless efforts to achieve the agreed outputs against the odds. RSPN provided the needed leadership in terms of technical backstopping, monitoring oversight and as a financial conduit. The grant from USAID for TAHAFUZ project has created considerable goodwill for this donor among the project beneficiaries across the four districts in Sindh.

## CHAPTER 5: RECOMMENDATIONS

- 1. Strategic level:** RSPN and its implementing partners have successfully demonstrated a replicable CBDRM model in four disaster prone districts of Sindh. However, the gains made in less than one year may not be sustainable without continued engagement of RSPs with VDMCs and UDMCs. The sustainability strategy proposed under the TAHAFUZ Project for linking UDMCs with the LSOs reflects the RSPN/RSP mainstream approach of social mobilization. For the next phase of the TAHAFUZ Project, RSPN should set out clear set of activities to support both the LSOs and the UDMCs so that their integration and functioning is enhanced. Furthermore, during the next phase of the TAHAFUZ Project, RSPN should continue its leadership role and seek to develop a five year program to integrate CBDRM as an important cross cutting theme into the core programs of RSPs. This strategic exercise should begin by early next year with an aim to complete the documentation by mid-2014 and then explore funding opportunities for a five year programme in the second half of 2014. RSPN may wish to include a component on policy dialogue and partnerships with NDMA, PDMA and DDMA for building long term partnership and strengthening coordination mechanism.
- 2. Operational level: Continued engagement is crucial to nurture the UDMCs and VDMCs as disaster resilient local community institutions** to withstand future disasters. It is essential that the community institutions, e.g. VDMCs, UDMCs, LSOs, etc., are further supported to enhance their skills and functionality. Therefore, the main challenge for RSPN and its two implementing partners is to **ensure sustained support at least for another two years** during which time VDMCs and UDMCs will become integral parts of VOs and LSOs respectively. For USAID, this is a unique opportunity to demonstrate a viable and replicable CBDRM model through continued support to the next phase of TAHAFUZ Project. The evaluation team, therefore, strongly recommends continuation of the Project at least for another eighteen months to strengthen the CBDRM model in the existing project villages as well as expanding it to other Union Councils in the same districts. Support to **CCI schemes as mitigation measures should also be continued**. However, some new innovative activities should also be added, for instance sensitization and awareness raising activities for school teachers, students, **health and hygiene trainings** for VDMCs. RSPN may also wish to consider developing disaster resilient model villages and Union Councils which can show the best practices in DRM. In addition to 20 existing UCs, additional 20 UCs should also be added for replication of TAHAFUZ model. An important component during the second phase should be **policy dialogue and partnership building** with district and provincial level government departments. Some activities should be designed in consultation with PDMA and District Government to revive DDMA in the four districts and facilitate MOUs between District Government and UDMCs.
- 3. Capacity building** is one of the areas that would need particular attention in the next phase. Given the key focus of CBDRM on capacity building, a major investment should be made in developing **strong TOT competencies within RSPN** for

technical backstopping to implementing partners. As this capacity would be required on a long term basis for CBDRM Program, it is worth investing in this competency area for RSPN. The specific competencies which should be developed in house include: **high quality training materials and training manuals for PDRA and DRMP training courses** for VDMCs and advance training courses in advocacy, networking and organizational management with a focus on DRM for UDMCs as well as LSOs. **A cadre of MTs should be developed to provide quality training courses** to VDMC members, school teachers and students. These activists/MTs from the existing V/UDMCs should actively be engaged in mobilization and capacity building of new V/UDMCs in the project area. Local resource mobilization is crucial for the sustainability of UDMCs. A training module on resource mobilization should be developed for UDMCs to build their capacity to raise funds from local sources (philanthropists) on their own. **Emergency Response Team (ERT) should have further sub-committees such as First Aid, Early Warning, Search and Rescue, Evacuation and Camp Management** in order to ascertain the roles and responsibilities and engage every member of ERT effectively. These sub-committees of ERT at UDCM level should be trained in **emergency response management including evacuation, camp management, early warning system and damage need assessment**. As a result of this training, UDMCs would be better able to manage the emergency supplies and equipment.

4. **Dissemination of the key lessons from TAHAFUZ Project:** RSPN may also wish to consider initiating **policy dialogue with the Government of Sindh** and its various relevant departments for the promotion of CBDRM in the province.
5. **Institutional Development of VDMCs and UDMCs:** As VDMCs and UDMCs are still nascent organizations requiring continued capacity building for at least another two years, RSPN and its implementing partners should facilitate the V/UDMC through capacity building. UDMC and LSO members should be trained as master trainers in DRMP. Since the process of integration of UDMCs and LSOs has begun, RSPN should devise a set of institutional capacity building activities that can strengthen UDMC-LSO integration and its formalization in the next phase of TAHAFUZ Project.
6. **Sensitization of LSO and other CSOs Executive Body on CBDRM:** It is important to sensitize LSOs on the importance of DRM as one of their core development agendas. To this end, the evaluation team recommends training course for the LSO Board of Directors/Members of Executive Bodies to give them basic knowledge on CBDRM and integrate DRR into their development programs, and about the process of integrating UDMCs within LSOs.
7. **Formation of District Network of UDMCs:** As a next logical step, RSPN may wish to consider the possibility of facilitating the formation of the network of UDMCs at the district level. These Community Based DRR Forums (DRRF) will be more effective in policy dialogue and partnership work as well as capacity building, resource mobilization and monitoring the performance of UDMCs. In addition, district level

CDFs should be facilitated by the TAHAFUZ Project to bring together all CSOs including UDMCs and DDMA representatives to share experiences and lessons learnt and also to develop linkages with provincial and national DDR Forums. Inter and intra-district level exposure visits should also be arranged in the next phase.

- 8. Monitoring, Evaluation and Reporting:** RSPN has done well on the documentation and reporting front during the TAHAFUZ Project period. However, there is a real need for more in depth monitoring and validation of the activities on the ground. The evaluation team therefore recommends separating the monitoring and research functions from documentation and reporting with at least one dedicated person for each function in the next phase. These two distinct roles will allow more qualitative monitoring of the project outputs as well as time for conducting action research.

**ANNEX A: ASSESSMENT OF PROGRESS AGAINST THE EXPECTED OUTCOMES**

<i>Local community institutions formed and mechanism developed to withstand disasters in future</i> Target: 20 UDMCs and 232 VDMCs		
<b>Indicator</b>	<b>Progress</b>	<b>Assessment</b>
No of UDMCs and VDMCs formed	Target for the formation of 232 VDMCs and 20 UDMCs has been achieved.	Evaluation Team (ET) has visited 16 VDMCs and 8 UDMCs and validated their formation and records.
No. of male and female members in each VDMC	VDMC Membership: Target for 1160 men and 1160 women membership overachieved UDMC Membership: Target for 232 men members and 232 women members achieved.	Despite their equal numbers with those of men, women's participation in decision making varies significantly across VDCMs and UDMCs
Participation of community members in formation of VDMCs and UDMCs	Review of secondary data and analysis of primary data shows that both men and women actively participated in the selection of VDMC and UDMC members. Women separately held meetings to select the suitable representative.	The field teams comprising male and female SOs, District Project Officers mainly mobilized both men and women members of each settlements for VDMC formation and revenue villages for UDMC formation. Through consensus, all VDMC and UDMC members were selected.
Frequency of meetings and records of VDMCs and UDMCs	16 VDMCs and 8 UDMCs met during evaluation have held monthly meetings. And records were also verified	VDMCs are still not very organized as they have been meeting on different dates. Not all VDMCs visited had updated records. UDMCs are slightly more organized in terms of setting meeting dates. Only two out of 8 UDMCs had no records available when ET met for FGDs.
Compliance of VDMCs and UDMCs activities and records as agreed in the Terms of partnership agreement with the VDMCs and UDMCs	VDMCs have followed the compliance agreed in the TOP for CCI implementation and selection of trainees. Their minute register is not updated. UDMCs are managing the emergency kit as per the agreement signed with the Project and District Govt. representative	VDMCs have not updated their meeting records and also their meetings are not held on a fixed date. They donot set the meeting agenda. Similarly UDMC meeting records are not updated. Some UDMCs have not kept their kit properly.
Overall assessment: Yes institutional mechanism is in place and it has been noted that communities are motivated and committed to take the agenda forward with		

greater ownership		
<i>Capacity of local community developed to develop hazard, risk reduction plans, policies or curriculum</i>		
Target: 232 number of CBDRM plans developed		
Indicator	Progress	Assessment
No. of men and women trained in disaster preparedness, management and mitigation	1173 men and women trained, including 601 women, and the target over achieved.	A heavy training content was squeezed in six days training course. CBDRM approach, advocacy and networking and OM&D were taught together. Training for MTs and general training was lumped together as the audience of these trainings were different.
Number and percent of beneficiaries retaining disaster preparedness, mitigation, and management knowledge two months after training.	They have retained certain amount of basic knowledge which was verified during FGDs with VUDMs and UDMCs	While there was basic understanding of the CBDRM concepts amongst majority of the members, they had not fully retained the knowledge and skills taught during the project.
Number of village level disaster risk management plans and training curriculum developed.	During FGDs with VDMCs, ET noted that some VDMCs plans had been developed and training material has been provided.	DRM plans were generalized and not properly developed. Training manual provided to the VDMCs was not of their level and also only one copy was provided. No follow up and refresher course were conducted.
Number of village level disaster risk management plans activities implemented.	They have implemented only activity from DRM plan - CCI	Structure measure was followed but not non-structural measures such as for onward training of other members.
Overall assessment: Although training courses have been delivered on Risk Assessment and Planning but it was not followed properly in terms of risk assessment and developing, revising and updating DRR plans. Overall proper documentation ranging from U/VDMC meetings to risk assessment and DRR planning are missing. MTs at the community level have not been developed. Further training of other community members have not been institutionalized.		
<i>Small scale preparedness and mitigation measures undertaken</i>		
Target: 232 CCI schemes implemented		
Indicator	Progress	Assessment
No. of men and women who will benefit from proposed hydro-meteorological activities	Total 232 CCIs have been implemented of which 216 have been completed by end of August 2013	ET has conducted technical assessment of 39 CCIs on a sample basis. Only those settlements

		have benefited where CCI was implemented. On an average 88 households have been benefited from each CCI scheme.
Number of hydro-meteorological procedures developed as a result of the activities to increase preparedness for hydro-meteorological events.	In addition to implementing 232 CCIs which included culverts, earthen road, rehabilitation of water schemes and rescue places, the Project has also created awareness and transferred knowledge and skills in DRM Planning.	The level of community satisfaction from CCI schemes is very high and over 80% agreed that these structural measures have decreased the disaster risks.
Number and percent of men and women trained in hydro-meteorological-related activities retaining knowledge two months after training	A total of 1173 including 572 women VDMC members have been trained in PDRA and DRMP. In addition, 203 including 95 women have been trained in Advocacy and Networking, Organizational Development and Management.	RSPN has conducted post training knowledge retention surveys. The Evaluation Team has noted that retention of knowledge of trained V/UDMC members is weak because the Project did not conduct any refresher courses.

## Annex B: RSPN TAFHUZ END PROJECT EVALUATION TOR

### Terms of Reference

Evaluation of the project titled: *Tahafuz: Building Resilience through Community Based Disaster Risk Management (CBDRM) in the Sindh Province of Pakistan.*

#### 1. Introduction

This document outlines the objectives, methodologies, work plans and budgets for the end of project evaluation of the project “*Building Resilience through Community Based Disaster Risk Management (CBDRM) in the Sindh Province of Pakistan – commonly known as Tahafuz Project*”. The Tahafuz project is implemented during October 2012 – October 2013 in 20 high risk Union Councils of four districts of Sindh namely Badin, Thatta, Umerkot and Tharparkar. The project is funded by OFDA-USAID, managed by RSPN and implemented through the institutional mechanisms of RSPN’s partners NRSP and TRDP.

#### 2. Project Description

**Objectives:** The overall objective of the project is to build community resilience to future disasters specifically floods. To achieve this objective the project centred all of its activities around the development and strengthening of resilient community institutions, mechanisms and capacities that systematically contributes towards reduction in losses due to disasters.

**Sectoral Results:** Keeping the above objectives in mind the end of project evaluation will focus on assessing the following three key results as agreed in project proposal:

- a. Local community institutions and mechanisms developed to withstand disasters in future
- b. Capacity of local community developed to develop hazard risk reduction plans, policies or curriculum
- c. Increased preparedness of local community from proposed hydrological activities (floods and cyclones)

These results are further explained in the following result framework of the project:

<b>Results</b>		
<b>1:</b> Local community institutions formed and mechanisms developed to withstand disasters in future	<b>2:</b> Capacity of local community developed to develop hazard risk reduction plans, policies or curriculum	<b>3:</b> Small scale preparedness and mitigation measures undertaken.
20 UDMC and 232 VDMC formed	232 number of local CBDRM plans developed	232 CCI schemes implemented
<b>Indicators</b>		
1.1. Number of VDMCs and UDMCs formed. 1.2. Number of male and female members in each VDMC. 1.3. Participation of community member (disaggregated by gender) in formation of VDMCs and UDMCs. 1.4. Frequency of meetings and records of VDMCs and UDMCs. 1.5. Compliance of VDMCs and UDMCs activities and records as agreed in the Terms of partnership agreement with the VDMCs and UDMCs.	2.1. Number of men and women trained in disaster preparedness, management and mitigation. 2.2. Number and percent of beneficiaries retaining disaster preparedness, mitigation, and management knowledge two months after training. 2.3. Number of village level disaster risk management plans and training curriculum developed. 2.4. Number of village level disaster risk management plans activities implemented.	3.1. Number of men and women who will benefit from proposed hydro-meteorological activities <sup>27</sup> . 3.2. Number of hydro-meteorological procedures developed as a result of the activities to increase preparedness for hydro-meteorological events. 3.3. Number and percent of men and women trained in hydro- meteorological-related activities retaining knowledge two months after training

### **Sites and Beneficiary for Planning and Implementation of the Project:**

<sup>27</sup>The term hydro-meteorological activities refer to activities that provide mechanisms to enable community or society to resist, absorb, accommodate and recover from the effects of a hazard in a timely and efficient manner. The aforementioned mechanism under the said project aimed on development of structural and non-structural measures to help reduce vulnerability of that society/community. The structural measure involved construction of small scale infrastructures to provide maximum facilitation to the target communities during disaster, whereas; non-structural measures aimed on capacity enhancement and public awareness. Below are the examples of some of the hydro meteorological activities within the context of disaster risk management that were carried out by the community: Hazard assessment (using hazard and resource maps, historical and seasonal calendars), risk analysis and its prioritization/evaluation.

Development of a risk management plan to counter hazards.

Establishment of early warning systems (linkages with relevant government departments).

Creating awareness among community members on DRR approaches by local VDMC members.

Formation of disaster risk management committees at union councils and revenue villages' level named as UDMCs & VDMCs.

Construction of various community critical infrastructures involving schemes such as culverts, raised platforms with emergency shelters, earthen road, dug wells etc.

Stockpiling of equipment and supplies (Emergency tool kits).

The sites and beneficiaries for this project included 20 high risk union councils in 4 districts of Sindh. The project was supposed to benefit a total of: 110,879 households (with an estimated population of 646,942) over one year project period. The core goal is, to have community mechanisms actively engaged in the process and the implementation of project activities in order to ensure local ownership and build their capacity. The following table illustrates the RSPs, Project Districts, Union Councils and Revenue Villages.

### Partner RSPs, Project Districts, Union Councils and Revenue Villages

S.No	Partner RSP	Districts	Union Councils	Number of Revenue Villages
1	NRSP	Thatta	Keti Bander	27
			Khara Chan	28
			Garho	13
			Ghulam Muhammad Baran	19
			Kothi	20
		Badin	Dai Jarkas	8
			Khoski	8
			Kadhan	6
			Mithi-III	9
			Ahmed Rajo	22
2	TRDP	Umerkot	Kharoro Sayed	9
			Kaplore	5
			Khejrari	11
			Chhore	4
			Faqeer Abdullah	14
		Tharparkar	Bolarhi	8
			Dabhro	7
			Jhirmiryo	6
			Bakhou	4
			Manjethi	4

The project is concluding on October 27, 2013 and most of the project targets will be achieved by end of July 2013. As per the RSPN's policy of promoting accountability for performance, and lesson learning for future programme this end-of project evaluation will be commissioned to a third party.

### 3. Purposes and Objectives of the Evaluation

The evaluation has two primary purposes, which are as follows:

- Accountability to stakeholders: The evaluation findings shall be disseminated to a broad range of stakeholders, including the American public.
- Learning to improve effectiveness: The evaluation shall aim to provide lessons learned and recommendations in order to refine designs and introduce improvements into the future efforts.

The findings of the evaluation shall be based on the following criteria:

IV. Relevance:

- Was the project needed in the context of the target areas?
- Whether or not the most vulnerable communities within the project areas had been targeted?

V. Efficiency:

- How efficiently were resources used to produce intended outputs?
- How could resources have been used more efficiently?

VI. Effectiveness:

- To what extent did the project achieve its intended results?
- What factors contributed to the achievement of intended results or the lack thereof?

### 4. Methodology

The evaluators shall draw on a variety of primary and secondary data to assess the project's relevance, efficiency and effectiveness. The following table provides the data sources and data collection methods for each evaluation criterion. It is important to note that the term 'stakeholders' in the table refers to direct beneficiaries, other community members in targeted areas, personnel of implementing organizations (including project personnel), representatives of government agencies at local and national levels, and representatives of USAID.

**Table: Data Sources and Data Collection Methods for Each Evaluation Criterion**

Evaluation Objective	Data Source	Data Collection Method
Relevance	Project reports; internal monitoring reports; stakeholders' views; reports and information on other DRR projects.	Document analysis; interviews with stakeholders; direct observation.
Efficiency & Effectiveness	Project reports; internal monitoring reports; stakeholders' views.	

Specifically, the evaluation shall include, but shall not be restricted to the following:

- A Technical assessment: It should include 40 randomly selected CCIs. There are four major scheme types i.e. culverts, earthen roads, raised platform with emergency shelter, and rescue place. 10 schemes from each category shall be assessed. It shall be performed by engineers.
- An Institutional Assessment: Focused Group Discussions with VDMC/UDMC members shall be conducted. The interviews shall focus on the institutional aspects of the identification, planning, implementation and management of disaster risk reduction measures.
- Household interviews shall be conducted with a representative sample of targeted households as part of the measurement of project relevance and effectiveness.

## 5. Deliverables

The evaluator(s) will deliver the following:

- Work plan
- Evaluation plan
- Questionnaires
- Draft report
- Presentation
- Final report

The evaluator(s) will produce/submit the final report in hard and soft form (of no more than 30 pages plus annexes, in Microsoft Word using Arial font 12). The report should include:

- Basic Information (max. 1 page)
- Executive Summary (3-5 page)
- Project Background (max. 1 page)
- Methods and Limitations
- Findings
- Conclusions
- Recommendations
- Annexes - Evaluation ToRs, Evaluation schedule, List of persons interviewed and sites visited, Documents consulted, Declaration of Independence from the Project team, detailed note on the methodology and limitations, and the project Log frame.

## 6. Duration and Cost

The evaluator(s) should submit the final report within 45 days of signing the contract. The total cost of the evaluation (including editing, designing and printing) should not exceed PKR .....

## 7. Reporting Line

The evaluator(s) will report to the Chief Operating Officer RSPN and liaise closely with the MER Specialist, RSPN.

## 8. Evaluator(s) Expertise

The evaluation team shall consist of two independent evaluators—one senior consultant (evaluation team leader) and one consultant in addition to the field survey team.

The evaluation team leader and the consultant should have the following expertise:

- Post-graduate degree in Humanitarian Studies, Disaster Management, Development Studies, and/or relevant a Social Sciences discipline.
- Eight-10 years' experience of conducting evaluations of emergency and humanitarian programmes.
- Previous experience of conducting evaluations of CBDRM projects
- Experience in conducting surveys, key informant interviews and analyzing documentation.
- Experience with OFDA/USAID funded projects.
- Excellent skills in facilitation, co-ordination, and oral and written communication in English (particularly report writing).
- Strong analytical and conceptual skills.

### **9. Evaluation Proposal Outline**

The following outline should be used for the submission of the evaluation proposal:

- Evaluator(s)' experience:
  - Evaluator(s)' organisation's experience
  - Evaluator(s)' experience
- Comments or suggestions on the Terms of Reference
- Description of the approach, methodology (including proposed sampling strategy) and work plan for performing the assignment
- Team composition and task assignments
- Curriculum Vitae (CV) of the proposed professional staff
- Cost breakdown (separating direct, indirect and overhead costs)

### **10. Evaluation Criteria**

The proposals for the evaluation will be assessed in terms of its suggested strategy, relevant experience of the organization and evaluator(s), the proposed staff's qualifications and experience, managerial and financial capacities and references. Indicative criteria and scoring for the evaluation of the proposals will be:

**Evaluation Criteria and Score**

<b>S. No</b>	<b>Criteria</b>	<b>Score</b>
1	Specific experience of the evaluator(s), relevant to the assignment	15
2	Competence and qualification of key professional staff regarding the assignment	15
3	Technical approach and methodology	15
4	Work plan	15
5	Financial proposal	40
<b>Total</b>		<b>100</b>

**11. Tentative Timeline**

1. Upload TOR on the RSPN website, and circulation to consultants and consulting firms by June 20, 2013
2. Selection of consultants by JULY 10, 2013
3. Initiation of the evaluation by JULY 25, 2013; completion of first draft by SEP 10
4. Final report SEPT 20, 2013

**ANNEX C: EVALUATION SCHEDULE**

<b>Date 2013</b>	<b>Activity</b>	<b>Venue</b>
Aug 1 - 8	Literature review, inception meetings and tools development	RSPN Office Islamabad
Aug 9 - 11	Inception Report	Islamabad
Aug 15	Travel to Karachi	Karachi
	Travel to Umerkot	Umerkot
Aug 16	Briefing on TAHAFUZ Project	TRDP Office Umerkot
	Selection of Enumerators through written test and interview	TRDP Office Umerkot
	KII with DC Umerkot	DC Office Umerkot
Aug 17	Training of Enumerators and field testing of household questionnaire	Umerkot
	FGD with VDMC Kharoro Pat and visit to CCIs for technical evaluation.	Umerkot
Aug 18	FGDs with VDMCs and UDMC	Umerkot
	KII with Influential Person and staff	Umerkot
	Technical assessment of CCIs	Umerkot
	Household survey of CCI direct beneficiaries	Umerkot
Aug 19	FDGs with VDMC and UDMC	Umerkot
	KIIs with Staff and influential person	Umerkot
	Household survey	Umerkot
	Technical evaluation of CCIs	Umerkot
	Travel to MithiTharparkar	Mithi Tharparkar
Aug 20	Meeting with TRDP – TAHAFUZ PSU Staff	PSU Office Mithi
	FGDs with VDMC and UDMC	Tharparkar
	Evaluation of CCIs	Tharparkar
	KII with government official	Tharparkar
Aug 21	FGDs with VDMCs	Tharparkar
	Technical assessment of CCIs	Tharparkar
	Household interviews	Tharparkar
Aug 22	Meeting with PC and Finance Manager	Tharparkar
	KII with PC	Tharparkar
	Technical assessment of CCIs	Tharparkar
	Household interviews	Tharparkar
	Travel to Badin	Badin
Aug 23	Briefing Meeting with NRSP RGM and PMU staff	NRSP Office Badin
	FGDs with VDMC and UDMC	Badin
	Assessment of CCIs and Household interviews	Badin
Aug 24	FGDs with UDMC and VDMC	Badin
	Technical assessment of CCIs	Badin
	Household interviews	Badin
	KII with Government Official	Badin
	KII with PC	Badin
	Travel to Thatta	Thatta

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Aug 25	Meeting with PMU Staff FGDs with UDMC and VDMC	Thatta
	Technical assessment of CCIs	Thatta
	Household interviews	Thatta
Aug 26	FGDs with UDMC and VDMCs	Thatta
	Technical assessment of CCIs	Thatta
	Household interviews	Thatta
Aug 27	KII interviews with DPO and influential person	Thatta
	Meeting with PMU staff	Thatta
	Meeting with Govt. Officials	Thatta
Aug 28	Travel to Islamabad from Karachi	Islamabad

**ANNEX D: LIST OF PERSONS MET**

S.NO	Name	Designation	Organization
1.	Khaleel Ahmed Tetlay	Chief Operating Officer	RSPN
2.	M. Akbar Raza	Project Manager, TAHAFUZ	RSPN
3.	Atta-ur-Rehman	CBDRM Specialist, TAHAFUZ	RSPN
4.	Hamza Hassan	M&E Officer TAHAFUZ	RSPN
5.	Zaheer Khan	M&E Officer TAHAFUZ	RSPN
6.	Fazal Ali Saadi	Specialist M&E	RSPN
7.	Khalil Baig	Finance Officer TAHAFUZ	RSPN
8.	Mohammad Ali Azizi	Social Mobilization Specialist	RSPN
9.	Hasnain Khalil	PO MER	RSPN
10.	Agha Ali Jawad	General Manager	NRSP
11.	Adnan Hussain	Project CoordinatorTahafuz	NRSP
12.	Imtiaz Ali	CBDRM Engineer	NRSP
13.	Tahira Nawaz	Monitoring Officer	NRSP
14.	Meer Muhammad	Training Officer	NRSP
15.	Javid Ali Hussain	DPO-Badin	NRSP
16.	Ghulam Mustafa	RGM	NRSP
17.	Ms. Sakina	S.O	NRSP
18.	Ravi Shankar	S.O	NRSP
19.	Piar Ali Khoso	Field Supervisor	NRSP
20.	Javed Ali Shah	Field Supervisor	NRSP
21.	Ayaz Ali	Field Engineer	NRSP
22.	Mashooq Ahmad	Training Officer	NRSP
23.	Ms. Zakia	Community Mobilizer	NRSP
24.	Ms.Tahira Nawaz	Monitoring Officer	NRSP
25.	Nasreen	Community Mobilizer	NRSP
26.	Pervaiz	Field Supervisor	NRSP
27.	Javed Ahmad	Field Engineer	NRSP
28.	Noreen Hassan	District Project Officer	NRSP
29.	Nadeem –Ur- Rehman Memon	Deputy Commissioner Umerkot	District Government
30.	Syed Sjajjad Ali Shah	GM Operations	TRDP
31.	Khalid Ishaq	Senior Manager, Social Sector Services/TAHAFUZ Focal Person	TRDP
32.	Gulab Rai	Project Coordinator	TRDP
33.	Kheim Chand	DPO	TRDP
34.	Abid Rehman	Training Officer	TRDP
35.	Seetal	Field Supervisor	TRDP
36.	Roshan	CBDRM Engineer	TRDP
37.	Govinda Rathore	Field Engineer	TRDP

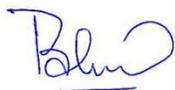
38.	Ms. Nazia	Community Mobilizer	TRDP
39.	Haresh Chandar	M&E Officer	TRDP
40.	Ali Mohammad Junejo	Manager CPI	TRDP
41.	Zafar Khaskeli	DPO	TRDP
42.	Ayaz Higo	Training Officer	TRDP
43.	Noorudin Laghari	Community Mobilizer	TRDP
44.	Ms. Maria Sarwat	Community Mobilizer	TRDP
45.	Amrit Lal	Field Supervisor	TRDP
46.	Karim Bux Magrio	Influential Person	Umerkot
47.	Malji Rathore	District Social Welfare Officer	District Govt.
48.	Ghulam Rasool Memon	DDMA Focal Person	District Govt.
49.	Khuda Bux	District Social Welfare Officer/DDMA Focal Person	District Govt.
50.	Mohammad Ashraf	Influential Person	Badin
51.	Wali Mohammad Jat	Social Activist	Thatta

**ANNEX E: DOCUMENTS CONSULTED**

<b>S.No.</b>	<b>Name of Document</b>
1.	TAHAFUZ Project Proposal and Cooperative Agreement
2.	Monthly Project Progress Reports
3.	Project Monitoring Reports
4.	CBDRM Training Manual
5.	Case Studies and Success Stories
6.	Training Reports

**ANNEX F: DECLARATION OF INDEPENDENCE FROM THE PROJECT TEAM**

We the undersigned hereby declare that after successful bidding the Rural Support Program Network (RSPN) procured our services to undertake the end project evaluation of RSPN TAHAFUZ Project: *Building Resilience through Community Based Disaster Risk Management (CBDRM) in the Sindh Province*. This project is funded by USAID. We therefore write this declaration that we have undertaken this evaluation independently along with our team comprising Tariq Ahmed, Quantitative Data Analyst; Bashir Ahmed Bhatti, Consultant Associate Engineer and eight enumerators hired in Ummerkot District, Sindh in a utmost professional manner without having any biases and our judgment is based on the evidences collected through the analysis of primary data which was generated from the field visits to the Project area and review of secondary data.



Pervaiz Ahmed, Evaluation Specialist



Falak Nawaz, CBDRM Expert  
Islamabad Pakistan. September, 2013

## **ANNEX G: DETAILED NOTE ON THE METHODOLOGY AND LIMITATION**

The preparatory stage of the TAHAFUZ End Project Evaluation began with the series of meetings between the lead consultants and RSPN Management to refine the proposed methodology. Under the overall guidance of RSPN Chief Operating Officer, the discussions were attended by TAHAFUZ Project and the M&E staff who provided useful input to refining of methodology and development of evaluation tools. As a result of this iterative, the lead Evaluators were able to realign their methodology including development of evaluation tools thus bringing in more clarity on the evaluation framework especially for data collection in the field. The Evaluation Team arrived in Ummerkot in the evening of August 15. After selection and training of 8 enumerators including 4 women, the data collection process began from Ummerkot on 17<sup>th</sup> of August and covered all four districts in 12 days. The target of covering 100 households from each District could be achieved due to logistical challenges. Many randomly selected households were not available at the time of interview and several others refused to be interviewed. However, all 24 FGDs including 16 with VDMCs and 8 with UDMCs were conducted successfully as planned. Of the total 12 KIIs, only one could not be conducted due to unavailability of the District DDMA Focal Person in Thatta, although a brief conversation took place. The last district covered for data collection was Thatta where the data collection work was concluded. The following section provides further details on the tools used for the data collection.

### **Inception Meetings with RSPN Management and Project Team**

The main highlights of this activity was series of meetings with the RSPN Management, TAHAFUZ Project Team and M&E staff to bring in greater clarity of the evaluation framework including, sampling of UCs, Villages, CCIs and direct beneficiary households leading into development of evaluation tools. The local contextual knowledge of project and M&E staff's technical support, and most importantly the COO's pragmatic advice formed the basis for developing the qualitative and quantitative tools for data collection.

### **Review of Project documents**

Another most important activity carried out during the inception phase was desk review of the Project documents shared by RSPN. The documents reviewed included; project agreement, monthly progress reports, lists of UCDCMs, VDMCs, CCIs and project success stories. The review of background documents by the Evaluation Team was crucial in understanding the project's context, programmatic thrust, achievements and challenges. Despite short duration of the project, RSPN and its IPs have made considerable achievements against the set targets. The achievements were analyzed and also verified in the field during FGDs, KIIs and technical assessment of the CCIs. The analysis of the achievements has been presented in the report under main findings.

## Sampling Framework

As part of the agreed sample size, a total of 400 households were randomly selected and the interviews were conducted with 379<sup>28</sup> by a team of 4 enumerators. These households were selected from the five sample villages in each of the 8 selected UCs for qualitative and quantitative data collection. Both random and purposive sampling techniques were used to select the sample size for the technical assessment of 39 CCIs and the beneficiary household interviews. The evaluation team followed the sampling framework and collected the data from the selected VDMCs, UDMCs, CCIs and the names of the households were picked up through simple random method. The VDMCs with which FGDs were held have been highlighted in yellow in the table below

**Table 1: Names of UDMCs, VDMCs, CCIs and number of households from whom data was collected**

Name UC/UDMC	S.No.	Name of Village/ VDMC	Name of CCIs Technically assessed	No. of Households interviewed
<b>1. Kharoro Sayed</b>	1	Thathrai	Culvert	10
	2	Kharoro Jagir	Repair of Reservoir (Pond)	10
	3	Ahori Chhor	Drinking Water Supply Reservoir (DWSR)	10
	4	Juneja	Culvert	10
	5	Kharoro Pat	Rescue Place	10
<b>2. Faqeer Abdullah</b>	1	Janhero Pat	Repair of Reservoir (Pond)	10
	2	Rajari Thar	Rescue Place	10
	3	Senhoi Thar	Culvert	10
	4	Okraro Panhwar	Culvert	10
	5	Samey jo Tar	Rescue Place	10
<b>District: Badin</b>				
<b>1. Khoski</b>	1	Khoski I	Culverts	10
	2	Hingoani	Earthen Road	10
	3	Moona	Earthen Road	10
	4	Beero Viran	Earthen Road	10
	5	Khoski II	Culverts	10

<sup>28</sup> The target of 100 households in each district could not be achieved due to logistical problems in the field.

<b>2. Ahmed Rajo</b>	1	Jhole 2	Earthen Road	10
	2	Ahmed Rajo 4	Earthen Road	10
	3	Jhole 3	Earthen Road	10
	4	Acri 1	Culverts	10
	5	Rari 2	Earthen Road	10
<b>District: Tharparkar</b>				
<b>1. Daboro</b>	1	Dabhro	Repair of Dug Well	10
	2	Balhayari	Rescue Place	10
	3	Thoharchho	Rescue Place	10
	4	Saran	Dug well	10
	5	Sandoque	Drain Nalla	10
<b>2. Jhirmirio</b>	1	Paneli	Repair of Dug Well	10
	2	Soomrasar	Repair of Dug Well	10
	3	Konral	Repair of RWHP	10
	4	Wingi	Rescue Place	10
	5	Verhar	Repair of Dug Well	10
<b>District: Thatta</b>				
<b>1. Keti Bandar</b>	1	Wathiyun	Earthen Road	10
	2	Jhaloo	Earthen Road	10
	3	Jamani Jatoi	Earthen Road	10
	4	Jangisar	Earthen Road	10
	5	Jamani Ibrahim Shah	Earthen Road	10
<b>2. Garho</b>	1	Mohal	Rehabilitation of School Building	10
	2	Garho	Rehabilitation of School Building	10
	3	Khatho	Earthen Road	10
	4	Jarar Ket	Earthen Road	10

## The Evaluation Tools

The Evaluation Team spent considerable amount of time in developing evaluation tools in consultation with RSPN M&E Team as several iterations of FGDs, KIs and Checklists for the technical evaluation of CCIs were made to ensure their relevance to the project's context and consistent with the evaluation TORs. The following tools were used for the data collection in the field:

### Focus Group Discussion (FGD):

The FGD guide sheets were developed for UDMCs and VDMCs with an aim to collect information for the institutional assessment of the two tier Disaster Management Committees at Union and Village levels. Efforts have been to focus on the rationale for collective action, effectiveness of achievements, challenges and sustainability of VDMCs and UDMCs beyond the project phase. The assessment of institutional capacity for an effective and sustainable disaster risk management is one of the major objectives the evaluation.

**Figure 10: FGD with a VDMC in Thatta District**



The Evaluation Team conduct 24 FGDs; 3 each in (8) sample union councils of the four Project district; Ummerkot, Tharparkar, Badin and Thatta. The names of VDMCs met for FGDs are given in the table 1. In each UC, 2 FDGs were held with UDMCs and the remaining 4 were held with VDMCs. The participants of each focus group varied between 8 to 12 persons depending on the membership VDMC. In most of the VDMCs visited, women members were also present in equal numbers. Similarly, women members were also present at each UDMC meeting. While 16 FGDs were conducted smoothly, some FGDs had to be cut short due to time constraints. The Project staff did the translation into Sindhi.

### Key Information Interviews (KIIs):

A total of 12 KIIs, 3 in each District, had been agreed with RSPN. The Evaluation Team conducted 10 as two KIIs could not be held; one in Thatta with the Government Official and the other with an influential person in Tharparkar while KIIs with other key stakeholders were completed as planned. Of the three Government officials interviewed, one was with the Deputy Commissioner, Ummerkot while the other two were with DDMA Focal Persons in Badin and Tharparkar. The Focal Person in Tharparkar is District Social Welfare Officer but DC has given him additional charge for disaster relief coordination. The DDMA Focal Person in Thatta is also the District Social Welfare Officer with additional charge. Other semi-structure interviewed were held with the Project staff; one in each district and two Influential Persons were interviewed. The third was although an influential person but a social activist from Badin who knew the TAHAFUZ Project very well.

**Figure 11: Key Informant Interview with Government Official**



### Checklists for Technical Evaluation of CCIs:

The Consultant Engineer visited 39 CCI schemes during the evaluation to assess the quality of their construction against the original specifications in the project design. He took the measurements of the completed CCIs and then compared with the original BOQs in the proposal. The Project's Field Engineers accompanied him for the field visits. The challenge he faced during the assessment was that in some VDMCs, the president or manager were not available to ask details about the CCI scheme. Also, stock registers were missing in some VDMCs. Time constrain was another challenge due to scattered population and poor road infrastructure.

## **Emergency Kit**

The CBDRM Expert visited six Emergency Kit Stockpiles in Ummerkot, Tharparkar and Badin. There were no difficulties in visiting these stockpiles as most of them were close to the venue of FGDs with UDMCs.

## **Household interviews**

Consistent with the agreed sampling framework that household survey will be conducted from the CCI direct beneficiaries. Therefore the interviews were conducted from 10 direct beneficiaries of each 40 CCI schemes which were technically assessed. The target was therefore 100 households in each district thus adding up to 100. However, this target could not be achieved due to logistical difficulties in the field as 379 households were eventually covered. In some cases, randomly selected households members were not available when the team of enumerators arrived at their door step. Others refused to be interviewed.

## **Direct Observations**

While all members of the Evaluation Team used direct observation of the Project activities which were completed under the TAHAFUZ, the CBDRM Specialist observed the items in the emergency kit maintained by UDMCs. He used direct observation method to see the type of items given to UDMCs under TAHAFUZ Project as well as the physical space where the Emergency Kits were kept. He also looked at the stock register to how the records of issuing different equipments to UDMC members were maintained.

Similarly, the Engineer visited all 39 critical community infrastructure (CCI) schemes implemented by VDMCs. He physically validated the schemes, on a sample basis, reported in the monthly progress reports as well took measurements of their specifications against the BOQs given in the original proposals prepared before the implementation. The type of CCI schemes visited included culverts, raised platforms with emergency shelters, earthen road, dug wells and rehabilitation of schools (only in Thatta). The Engineer took some data as per the checklist to prepare a summary on the overall assessment of CCIs visited.

## **Data Analysis and Report Writing**

The process of data analysis was very intensive as there was a large data set collected from beneficiaries and other key stakeholders through quantitative and qualitative methods. The data analyst entered and cleaned the household data for further analysis and subsequently he produced tables, graphs and charts. The FGD responses were summarized and the qualitative data from these summaries were transcribed and categorized according to the various project objectives, and then conclusions drawn. The entry and analysis of quantitative and qualitative data was completed on September 8 and then drafting of the report began. Although it was not possible to complete the draft report on 10<sup>th</sup> September, however, the lead author (Evaluation Specialist on the Team) of the report worked hard to complete the first draft with the

help of CBDRM Specialist and the Draft Evaluation Report was submitted on 20<sup>th</sup> of September, 2013.

While the Evaluation Team is aiming to complete the draft final evaluation report by September 10 as desired by RSPN Management, it has been agreed with RSPN to allow some flexibility for extending this deadline. However, the actual time required will be determined later. The report will include; Executive Summary; Project Background; Methods and Limitations; Main Findings; Conclusions and Recommendations.

The field work will start from August 15 with a plan to arrive in Umerkot on August 14 via Karachi. As agreed with RSPN Management, the Evaluation Team will make the efforts to meet the original timelines of September 10, however some flexibility would need to be allowed by RSPN in case of delay.

## Annex H: The Project Logical Framework

### Program Goal:

The development and strengthening of resilient community institutions, mechanisms and capacities that systematically contributes towards reduction in losses due to disasters.

Total Number of Beneficiaries Targeted (Individuals): **646,942**

Total Number of Beneficiaries Targeted (Households) : **110,879**

Results		
<b>4:</b> Local community institutions formed and mechanisms developed to withstand disasters in future	<b>5:</b> Capacity of local community developed to develop hazard risk reduction plans, policies or curriculum	<b>6:</b> Small scale preparedness and mitigation measures undertaken.
20 UDMC and 232 VDMC formed	232 number of local CBDRM plans developed	232 CCI schemes implemented
Indicators		
1.6. Number of VDMCs and UDMCs formed. 1.7. Number of male and female members in each VDMC. 1.8. Participation of community member (disaggregated by gender) in formation of VDMCs and UDMCs. 1.9. Frequency of meetings and records of VDMCs and UDMCs. 1.10. Compliance of VDMCs and UDMCs activities and records as agreed in the Terms of partnership agreement with the VDMCs and UDMCs.	2.5. Number of men and women trained in disaster preparedness, management and mitigation. 2.6. Number and percent of beneficiaries retaining disaster preparedness, mitigation, and management knowledge two months after training. 2.7. Number of village level disaster risk management plans and training curriculum developed. 2.8. Number of village level disaster risk management plans activities implemented.	3.4. Number of men and women who will benefit from proposed hydro-meteorological activities. 3.5. Number of hydro-meteorological procedures developed as a result of the activities to increase preparedness for hydro-meteorological events. 3.6. Number and percent of men and women trained in hydro- meteorological-related activities retaining knowledge two months after training